Case Log Number: U -		URINALYSIS Case Log		
Name of Candidate:		Patient ID:	Collection date and Time:	Run date and Time:
Species:	Sex:	Test(s) requested:	Testing method / Instrument used: Manual	
Breed:	Age:		Automated (specify)	
Sample collection type:	Sample clarity:	Sample color:	Additional comments / observations:	
Other	Other	Other		
Preliminary diagnosis:		Brief explanation of results:		

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