Rocky Mountain Veterinary Clinical Pathology, PLLC
Dacono, CO
(970) 258-1138
RMVetClinPath.com
clientservices@rmvetclinpath.com

Sample Submission Form

Clinic information

Name:

Doctor:

Email (for results):

Patient information

Owner name:

Patient name:

Age:

Sex: M / NM / F / SF

Species/breed:

Lesion description/patient history (site, duration, size, any previous therapy for lesion, other pertinent history):

Services requested (please mark all that apply)

Standard cytology		**Joint fluid screen (up to 3 joints)**	
STAT image cytology		**Fluid cytology**	
Lymph node screen (up to 3 nodes)		**Hematology path review**	
Bone marrow		**Re-check cytology**	
PARR		**Flow cytometry**	
Protein electrophoresis and IF		Other:	
STAT fee ($50/per service)			

Stained and unstained slides will be accepted. Please label all slides. Please see the fee schedule for sample requirements/notes.