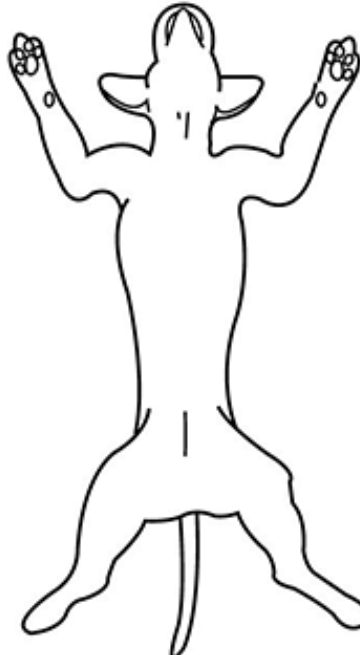
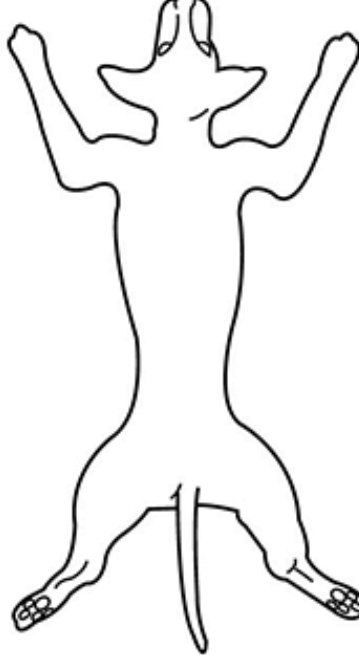


<b>VETERINARY CONSULTATION REQUEST FORM</b> <b>JOINT PATHOLOGY CENTER</b> https://JPC.CAPMED.MIL		Previous Submission? <input type="checkbox"/> Yes <sup>†</sup> <input type="checkbox"/> No	<b>PRIORITY REQUESTED</b> <input type="checkbox"/> Routine <input type="checkbox"/> Urgent (reserved for <i>emergent</i> cases) <input type="checkbox"/> No Letter (for training or research)
		<sup>†</sup> JPC Accession Number _____	
<b>PATIENT INFORMATION (Required)</b>			<input type="checkbox"/> Government Animal <input type="checkbox"/> Privately-Owned Animal <input type="checkbox"/> Wednesday Slide Conference <input type="checkbox"/> Other _____
OWNER NAME (Last, First) _____	ANIMAL NAME _____	TATTOO NUMBER _____	
SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female NEUTERED: <input type="checkbox"/> Yes <input type="checkbox"/> No	DATE OF BIRTH (AGE _____) Month / Day / Year: _____	COLOR _____	
COMMON NAME _____	BREED _____	GENUS AND SPECIES _____	<b>VITAL STATUS</b> <input type="checkbox"/> Alive <input type="checkbox"/> Spontaneous Death <input type="checkbox"/> Euthanized Method _____
<b>MATERIALS SUBMITTED (*Required)</b> <input type="checkbox"/> Clinical Information* <input type="checkbox"/> Formalin Fixed ( <i>Wet tissue</i> ) <input type="checkbox"/> Photos (Qty _____) <input type="checkbox"/> Surgical Path Report <input type="checkbox"/> Slides (Qty* _____) <input type="checkbox"/> Imaging (Qty _____) <input type="checkbox"/> Autopsy Report <input type="checkbox"/> Blocks (Qty* _____) <i>**Email digital images to the address provided below**</i>			<b>TYPE OF BIOPSY</b> <input type="checkbox"/> Excisional <input type="checkbox"/> Needle <input type="checkbox"/> Incisional <input type="checkbox"/> Endoscopic <input type="checkbox"/> Punch <input type="checkbox"/> Other _____
<b>WORKING DIAGNOSIS</b>			<b>TYPE OF CYTOLOGY</b> <input type="checkbox"/> Fine Needle Aspirate <input type="checkbox"/> Touch Impression <input type="checkbox"/> Other _____
<b>ANATOMIC LOCATION OF SPECIMEN(S)</b> ( <i>Indicate on below diagram or specify tissue</i> )			<b>**THIS SECTION IS <u>CRITICAL</u> FOR A REFINED DIAGNOSIS**</b>  <b>CLINICAL HISTORY</b> ( <i>Provide a detailed clinical summary to include location, size, distribution, appearance, duration, symptoms, physical and laboratory findings, and other pertinent information. To prevent unnecessary delays, kindly avoid referring to electronic record.</i> )
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>VENTRAL</p>  </div> <div style="text-align: center;"> <p>DORSAL</p>  </div> </div>			
DATE OF SPECIMEN COLLECTION _____			(Continue on back)
<b>CONTRIBUTOR INFORMATION</b> (Complete <u>entire block</u> to avoid delay in case processing)			Digital photos, imaging (X-ray, MRI, CT, ultrasound), and/or questions may be emailed to:  <b>dha.ncr.joint-path-center.mbx.askvetpath@health.mil</b>
CONTRIBUTOR'S NAME _____			
EMAIL _____			
NAME OF FACILITY _____			
BUSINESS ADDRESS _____			
CITY _____ STATE _____ ZIP CODE _____			
COUNTRY _____			
TELEPHONE _____			

OWNER LAST NAME

ANIMAL NAME

ADDITIONAL COMMENTS AND REQUESTS (Provide justification for urgent priority requests here)**IMPORTANT SUBMISSION INFORMATION****\*\*LABEL ALL SUBMITTED CONTAINERS / SLIDES WITH PATIENT AND OWNER NAME, CLINIC NAME, AND TISSUE SOURCE\*\***

1. Address material to:

**Joint Pathology Center  
ATTN: Vet Path Service  
606 Stephen Sitter Ave.  
Silver Spring, MD 20910**

2. To protect from any possible leaking, enclose this consultation request form and any supporting documentation in a separate plastic bag prior to submitting with tissue specimen(s).
3. Avoid shipping tissues specimens immersed in formalin. After 24-48 hours, remove adequately fixed tissue specimens from formalin and either wrap in formalin-soaked sponges or place in formalin-soaked tissue bags prior to double-bagging in heavy-duty plastic bags.
4. Never prepare, store, or ship cytologic specimens with formalin-fixed tissues. This inhibits our ability to read cytologic specimens due to exposure artifact and often results in non-diagnostic specimens.
5. We do not accept and will immediately discard the following materials:
  - a. Fluid samples
  - b. Culture samples
  - c. Stones (e.g., urinary or gallbladder)
  - d. Tissue for rabies testing

**JPC RETENTION POLICY**

1. Microscopic slides submitted with each case are retained permanently. Under certain circumstances, original slides may be returned to the contributor by written request with approval by JPC.
2. Blocks are retained for a minimum of ten (10) years, unless return is requested by the contributor at the time of case submission. Return or loan of blocks may also be requested by the contributor at a later time.
3. All case material including wet tissue, X-rays, CT scans, MRI scans, echograms, angiograms, photographs, and similar diagnostic studies may be retained.
4. Retained slides, blocks, and additional case material may be used for education or research.