ANTECH DIAGNOSTICS

Place Hospital/Clinic Information Below Please

In addition to including this form with the blood to ANTECH, please also FAX a copy to Animal Nutrition Technologies at (866) 433-1559 in order to further expedite the processing of your order.

PLEASE FILL OUT THIS FORM COMPLETELY.

THE FOLLOWING HISTORICAL, MEDICAL AND DIAGNOSTIC INFORMATION IS NECESSARY TO ACCURATELY ASSESS THE ANIMAL'S CURRENT CONDITION AND CREATE THE PROPER NUTRITIONAL AND SUPPLEMENTAL PROGRAM FOR THE NUTRITIONAL BLOOD TEST. QUESTIONS? CALL (888) 533-5162.

CHART #

SPECIES: ☐ CANINE ☐ FELINE **BREED:**

DOCTOR

SEX: ☐ M ☐ F ☐ Neutered ☐ Spayed

CLIENT | **PET NAME** | **DATE** / /

TEST CODE

9945 NBT_____

WEIGHT (LBS)

Important: Weight must be accurately entered for proper dosing of nutraceuticals.

AGE (YEARS)

SPECIMENS RECEIVED

FOR LAB USE ONLY

☐ SS ☐ R

☐ S ☐ L

CURRENT MEDICATIONS

- ☐ Anabolic Steroid
- ☐ Antibiotic/Sulfonamide
- ☐ Anticonvulsant
- ☐ Antidepressant
- ☐ Antidiarrheal
- ☐ Antiemetic/Antispasmatic
- ☐ Antifungal
- ☐ Anthelmintic
- ☐ Antihistamine
- ☐ Antitussive
- ☐ Bronchodilator
- ☐ Cardiac
- ☐ Chemotherapeutic
- ☐ Corticosteroid
- ☐ Digestive Enzyme
- ☐ Diuretic
- ☐ Fluid Therapy
- ☐ Insulin
- ☐ NSAID
- ☐ Nutraceuticals
- ☐ Ocular
- ☐ Otic
- ☐ Radiation
- ☐ Thyroid
- ☐ Tranquilizer
- ☐ Other_____

VACCINATIONS GIVEN WITHIN LAST YEAR

- ☐ Bordetella
- ☐ Calicivirus
- ☐ K-9 Distemper
- ☐ Chlamydia
- ☐ Coronavirus
- ☐ FELV
- ☐ FIP
- ☐ Hepatitis
- ☐ Leptospirosis
- ☐ Lyme
- ☐ Panleukopenia
- ☐ Parainfluenza
- ☐ Parvovirus
- ☐ Rabies
- ☐ Other_____

DIAGNOSIS

AUTOIMMUNE DISEASE

- ☐ Arthritides (Lupus/Rheumatoid)
- ☐ Hematological
  - ☐ Anemia
  - ☐ Thrombocytopenia
- ☐ Muscles/Nerves (Myasthenia, etc)
- ☐ Skin (Pemphigus, etc.)
- ☐ Other_____

CANCER TYPE (1)

- ☐ Adenocarcinoma
- ☐ Chondrosarcoma
- ☐ FELV
- ☐ Fibrosarcoma
  - ☐ Vaccine-Induced
- ☐ Hemangiosarcoma
- ☐ Leukemia
- ☐ Lymphoma/Lymphosarcoma
- ☐ Mast Cell
- ☐ Melanoma
- ☐ Osteosarcoma
- ☐ Squamous Cell Carcinoma
- ☐ Other_____

CANCER LOCATION (2)

- ☐ Adrenal
- ☐ Bladder/Transitional
- ☐ Bone
- ☐ Bone Marrow
- ☐ Brain/Nerves
- ☐ Cutaneous
- ☐ Heart
- ☐ Intestines/Colon
- ☐ Kidney
- ☐ Liver/Gall Bladder
- ☐ Lymph Node
- ☐ Mammary
- ☐ Oral/Throat/Nasal
- ☐ Ovaries/Uterus
- ☐ Pancreas
- ☐ Prostate/Testes
- ☐ Spleen
- ☐ Stomach/Esophagus
- ☐ Thoracic/Lung
- ☐ Thyroid
- ☐ Other_____

CNS DISEASE

- ☐ Convulsions
- ☐ Degenerative Myelopathy
- ☐ Encephalitis/Meningitis
- ☐ GME
- ☐ Herniated Disc
- ☐ Paresis/Paralysis
- ☐ Other_____

GASTROINTESTINAL DISEASE

- ☐ Bloat
- ☐ Enteritis/Diarrhea
- ☐ Flatulence
- ☐ Food Allergy
- ☐ Gastritis/Vomiting
- ☐ Inflammatory Bowel Disease
- ☐ Internal Parasites
- ☐ Malabsorption
- ☐ Megacolon/Megaesophagus
- ☐ Other_____

GLAND DISEASE

- ☐ Addison's Disease
- ☐ Cushing's Disease
- ☐ Diabetes Insipidus
- ☐ Diabetes Mellitus
- ☐ Hyperthyroidism
- ☐ Hypothyroidism
- ☐ Liver Disease
  - ☐ Acute Hepatitis
  - ☐ Chronic-Active Hepatitis

GLAND DISEASE (CON'T)

- ☐ Cirrhosis
- ☐ Hepatic Lipidosis
- ☐ Hepatotoxicity
- ☐ Pancreatitis
  - ☐ Acute Pancreatitis
  - ☐ Pancreatic Insufficiency
- ☐ Parathyroid
  - ☐ Nutritional Secondary
  - ☐ Primary
- ☐ Ovaries/Uterus
- ☐ Prostate/Testes
- ☐ Other_____

HEAD & NECK DISEASE

- ☐ Ear
  - ☐ Acute Otitis
  - ☐ Chronic (Narrow Canal)
- ☐ Eye
  - ☐ Cataracts
  - ☐ Corneal Disease
  - ☐ Glaucoma
  - ☐ Progressive Retinal Atrophy
- ☐ Mouth
  - ☐ Eosinophilic Granuloma
  - ☐ Gingivitis/Periodontal
  - ☐ Stomatitis
  - ☐ Teeth
    - ☐ Loose
    - ☐ Plaque/Tartar
  - ☐ Tonsillitis
- ☐ Sinusitis
- ☐ Other_____

HEART/LUNG DISEASE

- ☐ Heart
  - ☐ Arrhythmia
  - ☐ Cardiomyopathy
  - ☐ Conduction Disease
  - ☐ Congenital Heart Disease
  - ☐ Congestive Heart Failure
  - ☐ Heartworms
  - ☐ Valvular Disease
- ☐ Lung/Respiratory
  - ☐ Allergy
  - ☐ Asthma
  - ☐ Bronchitis
  - ☐ Collapsed Trachea
  - ☐ Lungworms
  - ☐ Pneumonia/Pneumonitis
- ☐ Other_____

INFECTIOUS DISEASE

- ☐ Canine Distemper
- ☐ Chlamydia
- ☐ Feline URI
- ☐ FIP/FIV
- ☐ Herpes
- ☐ Panleukopenia
- ☐ Parvovirus
- ☐ Tracheobronchitis
- ☐ Other_____

MUSCULO-SKELETAL

- ☐ Arthritis
- ☐ Elbow Dysplasia
- ☐ Eosinophilic Panosteitis
- ☐ Fracture

MUSCULO-SKELETAL (CON'T)

- ☐ Hip Dyspiasia
- ☐ OCD
- ☐ Osteomyelitis
- ☐ Spinal Arthritis/Spondylosis
- ☐ Other_____

REPRODUCTIVE DISORDERS

- ☐ Dystocia
- ☐ Eclampsia
- ☐ Endometritis/Pyometra
- ☐ Infertility
- ☐ Mastitis
- ☐ Ovaries/Uterus
- ☐ Prostate/Testes
- ☐ Pseudocyesis
- ☐ Other_____

SKIN DISEASE

- ☐ Abscess/Pyoderma
- ☐ Allergy/Dermatitis
  - ☐ Dust/Mold
  - ☐ Flea Bite
  - ☐ Food Allergy
  - ☐ Grass/Pollen
  - ☐ Pruritus
  - ☐ Trees
- ☐ Alopecia/Dry Skin/Dandruff
- ☐ Demodectic Mange
- ☐ Eczema/Seborrhea
- ☐ Fungal Infestation
- ☐ Sarcoptic Mange
- ☐ Other_____

URINARY TRACT DISEASE

- ☐ Kidney Disease
  - ☐ Amyloidosis
  - ☐ Glomerular Nephritis
  - ☐ Interstitial Nephritis
  - ☐ Pyelonephritis
- ☐ LUTD
  - ☐ Cystitis
  - ☐ Urolithiasis
    - ☐ Calcium Oxalate
    - ☐ Struvite
- ☐ Urinary Incontinence
- ☐ Other_____

MISCELLANEOUS

- ☐ Anemia
- ☐ Anorexia
- ☐ Behavior Problems
  - ☐ Aggression
  - ☐ Depression/Apathy
  - ☐ Hyperactivity
  - ☐ Inappropriate Urination
  - ☐ Separation Anxiety
- ☐ Cognitive Dysfunction
- ☐ Genetic Disease
- ☐ Haemobartonella
- ☐ Lethargy
- ☐ Obesity
- ☐ Tick-Borne Disease
  - ☐ Ehrlichiosis
  - ☐ Lyme Disease
  - ☐ Rocky Mt. Spotted Fever
- ☐ Toxoplasmosis
- ☐ Trauma/Injury
- ☐ Wasting/Weakness
- ☐ Other_____