

CANADIAN VETERINARY UROLITH CENTRE SUBMISSION FORM

Send directly to:

Canadian Veterinary Urolith Centre University of Guelph, Laboratory Services Division, 95 Stone Rd. W., Guelph, ON. N1G 2Z4

Fax: 519-767-6240

appreciate efforts to provide as accurate information as possible. Please keep a copy of this form for your records.

This urolith analysis* is made possible in part by the support of Royal Canin.



Phone: 519-823-1268 ext. 57454

Email: cvuc@uoguelph.ca

NOTE: SUBMITTING CLINICS ARE RESPONSIBLE FOR SHIPPING CHARGES. PLEASE SUBMIT CLEAN DRY UROLITHS, CRYSTALS AND URETHRAL PLUGS IN A CLEAN PLASTIC VIAL.

Clinic Name:		Clinic ID:	Pet	Name:
Address:	City:	Owner's Last Name:		
Province:	Postal Code:	Species: □ Canine □ Feline □ Other*:		
Veterinarian:		Breed:		
Phone:		Sex: 🗆 Male	🗆 Female	Neutered/Spayed: 🗆 Yes 🗆 No
Fax:				If Yes: 🗆 Before stone removal
				At or post stone removal
Email:		Age:	Yea	r(s)Month(s)

SAMPLE INFORMATION:

No. Samples: Specimen submitted:] Urethral plug 🛛 Sediment 🛛 Crystals		
Source of urolith(s): (check all applicable): Renal Pelvis			
Method of removal: 🗆 Voided naturally 🗆 Cystotomy 🗆 Voidin	ıg Urohydropropulsion 🛛 Lithotripsy +/- basket removal		
□Percutaneous cystolithotomy □ Laparoscopic assisted cystoto	umy 🗆 Other		
RELEVANT HISTORY:			
Does the patient have ren al disease? □ Yes □No □ Unknown	Is the patient hypercalcemic? 🗆 Yes 🛛 No 🛛 Unknown		
List other concurrent diseases (if applicable)	List medications (if applicable)		
Body condition: Thin Normal Overweight Body Sco	ore: Weight: 🗆 kg 🗆 lb		
Environment of animal:			
# of OTHER animals on premises: Cats: Dogs:			
Primary diet (at time of diagnosis): Brand name:			
Primary diet type: □ Wet □ Dry □ Mixed □ Semi-Moist	🗆 Fresh 🛛 Unknown Diet name:		
Previous diet: Brand name: Prev. Durat	ion: Year(s) Month(s)		
Previous diet type: □ Wet □ Dry □ Mixed □ Semi-Moist	🗆 Fresh 🛛 Unknown Prev. Diet name:		
Does this patient have a previous history of Urolith(s)?	s 🗆 No 🗆 Unknown		
IF YES PLEASE PROVIDE INFORMATION BELOW REGARDING TH	E PATIENT'S PREVIOUS UROLITH(S):		
Previous urolith method of removal: Voided naturally Cystot			
🗌 🗆 Lithotripsy +/- basket removal 🗆 Percutaneous cystolithotomy			
Composition: 🗆 Struvite 🗆 Calcium Oxalate 🗆 Calcium Pr			
Source (check all applicable): Renal Pelvis Ureter(s)			
Previous urolith removal date(s):			
Previous urolith report number(s) (if available):			
Preferred language of correspondence:			
Results also available on the Royal Canin Veterinary Portal at vet.rc			
NOTE: ALL FIELDS MUST BE COMPLETED IN FULL TO PROCEED W	/ITH ANALYSIS.		
ANY MISSING INFORMATION WILL RESULT IN DELAYS.			
* The Canadian Veterinary Urolith Centre provides urolith analysis for all species, exc Canine and feline urolith analysis is made possible in part by the support of Royal Canin. Cli the analysis fees for uroliths from species other than dogs and cats.	ept humans and other primates. nics are responsible for the shipping costs and		
Information collected by University of Guelph Laboratory Services will be subject to the Freedom of In the University of Guelph Privacy Statement [www.uoguelph.ca]. Submitting Veterinarian is responsible owners and to explain that data collected or created through these testing services may be used by th	e for obtaining any or all necessary consents from pet EXCLUSIVE		
product development and case studies posted to the Royal Canin Veterinary Portal at vet.royalcanin.ca			