

# Test Requisition Form

Prices valid through Jun 30, 2024



VDI Laboratory, LLC  
www.vdilab.com  
805-577-6742

Please Also Complete Patient Background On Reverse Side

Veterinarian: \_\_\_\_\_  
 Facility Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email/Fax: \_\_\_\_\_

Patient Name: \_\_\_\_\_  
first last  
 Species:  Canine  Feline  Equine  \_\_\_\_\_  
 Gender:  M  MN  F  FS  
 Breed: \_\_\_\_\_  
 Age: \_\_\_\_\_ Weight: \_\_\_\_\_  lb  kg  
 Draw Date: \_\_\_\_\_ Applied Date: \_\_\_\_\_

Recommended  
"Best Value" Panels

### SAMPLE TYPES:

FS = Frozen Serum DS = Dry Serum EF = Effusion U = Urine FUR = Fur (DERM = Skin/Ear | STL = Stool/Fecal) - requires microbiome collection kit

Cancer Diagnostics- Suspected or Confirmed						
✓	Code	Test/Panel Name	Includes	Sp.	Price*	Sample
	201	Cancer Panel - General	TK1, CRP or HPT, NI	C,F		FS or DS
	201b	Cancer Panel - Lymphoma <small>(See GI section for GI LSA Panel)</small>	TK1, CRP or HPT, NI	C,F		FS or DS

#### 201 Cancer Panel Add-ons. You may select more than one.

See price schedule for cost or contact VDI | FS or DS unless otherwise noted.

<input type="checkbox"/> + VitD	<input type="checkbox"/> + B12	<input type="checkbox"/> + Folate	<input type="checkbox"/> + Mg	<input type="checkbox"/> + tCa	<small>frozen serum only</small>
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	229	Cancer Panel + VitD, B12, Fol, Mg	TK1, CRP or HPT, NI, VitD, B12, Fol, Mg	C,F		FS or DS
	205	Pre-Stem Cell Therapy Panel	TK1, CRP/HPT, HA, VitD, NI	C,F		FS or DS
	908	Equine Lymphoma - TK1	TK1	E		FS or DS
	206	Pericardial Effusion Panel	Contact VDI for details			

### Gastrointestinal (GI) Disease

✓	Code	Test/Panel Name	Includes	Sp.	Price	Sample
	260	<b>Advanced GI Panel 12 (AGI 12)</b> <small>For Dx of: GI LSA vs IBD, Pancreatitis, PLE, Essential Vitamins, Gut Status. For Dry Submission: 2 DSTK (3 wells minimum)</small>	TK1, CRP or HPT, NI, cPL or fPL, B12, Folate, VitD, Mg, TP, Alb, Glob, A/G Ratio	C,F		FS or DS
	269	<b>Advanced GI Panel 16 (AGI 16)</b> <small>For Dx of: same as above PLUS Allergies, Addison's, and Cholangitis For Dry Submission: 2 DSTK (4 wells minimum)</small>	TK1, CRP or HPT, NI, cPL or fPL, B12, Folate, VitD, Mg, TP, Alb, Glob, A/G Ratio, ALP, ALT, Cortisol, Allergy Panel CR	C,F		FS or DS
	228	GI Lymphoma Panel	TK1, CRP or HPT, B12, Folate, NI	C,F		FS or DS
	143	GI Vitamins Panel	VitD, B12, Folate, Mg	C,F		FS or DS
	740	GI Microbiome Panel <small>Requires Stool Collection Kit</small>	NGS Bacteria & Fungi	C,F		STL
	741	GI Microbiome Panel + B12/Folate <small>Requires Stool Collection Kit &amp; Serum</small>	NGS Bacteria & Fungi, B12, Folate	C,F		STL plus FS or DS

### Other Specialty Panels

✓	Code	Test/Panel Name	Includes	Sp.	Price	Sample
	301	Osteoarthritis Panel	HA, CRP or HPT	C,F		FS or DS
	302	Osteoarthritis Panel + VitD	HA, CRP or HPT, VitD	C,F		FS or DS
	303	Calcemia Panel <small>frozen serum</small>	PTH, tCa, VitD	C,F		FS
	304	VitD Toxicity Panel <small>frozen serum</small>	VitD, tCa, PTH	C,F		FS
	320	Insulin Resistance Panel <small>frozen serum</small>	Insulin + Glucose	C,F		FS

### Allergy (IgE) & Dermatology Testing

✓	Code	Panel Name	Allergen Count	Sp.	Price	Sample
	753c	Allergy Panel CR	125 (72 food, 53 env.)	C,F		FS/DS
	760c	Allergic Dermatitis Panel	Allergy CR, VitD, CRP/HPT	C,F		FS/DS
	790	Allergic Dermatitis & Infection Panel <small>(Requires serum &amp; skin swab kit)</small>	Allergic Dermatitis Panel + Skin/Ear Biome Panel	C,F		FS/DS + DERM

### Glyphosate Testing

✓	Code	Panel Name	Sample Type	Sp.	Price	Sample
	780u	Glyphosate Panel	Urine Sample (3-5 mL)	C,F		U
	780f	Glyphosate Panel	Fur Sample (50 -100 mg)	Contact VDI		FUR

Custom/Other

### Wellness Panels

✓	Code	Test/Panel Name	Includes	Sp.	Price	Sample
	101	Essential Vitamins 1	VitD, B12	C,F		FS or DS
	112	Essential Vitamins 1 + Mg	VitD, B12, Mg	C,F		FS or DS
	135	Essential Vitamins 1 + Folate	VitD, B12, Folate	C,F		FS or DS
	143	Essential Vitamins 1 + Mg + Folate	VitD, B12, Folate, Mg	C,F		FS or DS
	013	Vitamin D + Mg	VitD, Mg	C,F		FS or DS

✓	Code	Test/Panel Name	Includes	Sp.	Price	Sample
	103	Essential Wellness	CRP or HPT, VitD, B12	C,F		FS or DS
	134	Essential Wellness 2	CRP or HPT, VitD, B12, Folate, Mg	C,F		FS or DS

#### Essential Wellness Add-ons. You may select more than one.

See price schedule for cost or contact VDI | FS or DS unless otherwise noted.

<input type="checkbox"/> + Cancer Risk Assessment (CRA)	<input type="checkbox"/> + Joint Assessment (HA)
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✓	Code	Test/Panel Name	Includes	Sp.	Price	Sample
	109	Complete Wellness <small>frozen serum only</small>	CRP or HPT, VitD, B12, Fol, Mg, Chem12, HA, CRA.	C,F		FS
	121	Complete Wellness - NO CHEM12	CRP or HPT, VitD, B12, Fol, Mg, HA, CRA.	C,F		FS or DS

### Mineral Analysis

✓	Code	Test/Panel Name	Notes	Sp.	Price	Sample
	701	Mineral & Toxic Metal Fur Analysis	29 Minerals & Metals	C,F		FUR
	702	Mineral & Toxic Metal Fur Analysis plus VitD, B12, Folate, Mg	29 Minerals & Metals plus VitD, B12, Fol, Mg	C,F		FUR plus FS or DS

### Individual Tests

✓	Code	Test/Panel Name	Sp.	Price
	901	Vitamin D	C,F,E	
	902	B12 (Cobalamin)	C,F	
	914	Folate	C,F	
	903	Magnesium	C,F	
	909	Hyaluronic Acid (HA)	C,F	
	905	CRP: high sensitivity	C	
	906	Haptoglobin	C,F	

FS or DS unless otherwise noted.

### Individual Tests

✓	Code	Test/Panel Name	Sp.	Price
	904	Total Calcium	C,F	
	912	Chem 12	C,F	
	916	Cortisol	C,F	
	919	ACTH Stim Test		
	917	DEX Supp. - low dose		
	918	DEX Supp. - high dose		
	915	cPL/fPL (quantitative)	C,F	
	921	Insulin	C,F	

frozen serum only

FS or DS unless otherwise noted.

### Lab Use Only

- Missing: lid | box | pak  CB  2Day  
 Damage: foam | box  LCB  Express  
 No Postage

# of samples in package \_\_\_\_\_

- HM  IC  UL  PK  NID  T4  
 LP  CLT  LV  PID  T3  A |  B  
 GPT  W  OS  PU  REJ  T2  C |  \*  
 T1

# Test Requisition Form

## Patient Background



**Specimen Shipping Address**  
VDI Lab Receiving  
9420 Topanga Canyon Blvd. STE 100  
Chatsworth, CA 91311

### Current Supplementation

#### Fasted Sample?

- Unknown  
 <8 hrs fast  >8 hrs fast

#### Recent Diet Change?

- Changed in last 3 months  
 Since last test  No Change

#### Vitamin D

- Not Taking  
 Currently Taking: \_\_\_\_\_  
IU/Day

#### B12 (Cobalamin)

- Not Taking  
 Currently Taking: \_\_\_\_\_  
mcg/Day

#### Magnesium

- Not Taking  
 Currently Taking: \_\_\_\_\_  
mg/Day

### Cortisol Testing

#### ACTH Stimulation Test:

- Dry Kit 1**  
 Basal: Well A  Post 1hr: Well B  
**Dry Kit 2**  
 Post 2hr (if needed): Well A

#### DEX Suppression Test (frozen serum):

3 properly labeled tubes: Basal, 4hr, 8hr

Samples collected for cortisol should be stored cold, in-tube, until the last cortisol collection is done. Then, apply all samples for that patient to the dry kits at the same time.

If not applying serum to dry kits within 6 hours, store the serum in the freezer for up to 30 days.

### Suspected Condition / Differential Diagnosis:

\_\_\_\_\_

### Relevant Medications/Procedures

- No Current Medications/Therapies
- Steroids:  Short Term (<6mo)  Long Term (>6mo)
- Chemo:  CHOP  COP  CCNU  Other
- NSAIDs: \_\_\_\_\_
- Other Medications/Therapy:
- Galliprant (or similar)  Cyclosporine or Azathioprine
  - Sulfasalazine  Apoquel (or similar JAK inhibitor)
  - Immunotherapy  Hormonal Therapy
  - TKIs (eg Palladia, Kinavet)  Other: \_\_\_\_\_
- Radiation Therapy
- Antibiotics: \_\_\_\_\_
- Anti-inflammatory botanicals
- Anti-proliferative botanicals (for list of common botanicals contact VDI)
- Surgery within previous 60 days
- OA/DJD therapy: \_\_\_\_\_
- Adequan  HA Injections/Oral  PRP/Stem Cell

### GI Findings

- No GI signs
- GI Signs
- Diarrhea
  - Constipation
  - Vomiting
  - Inappetance
  - Weight Loss
  - Bloody Stool
- Abdominal Pain
- Lethargy

### Ultrasound Findings

- Not Performed
- No Significant Findings
- Thickened Muscularis Layer
- Diffuse  Focal
- Thickened Mucosa
- Diffuse  Focal
- Increased Wall Thickness
- Diffuse  Focal
- Loss of Wall Layering
- Symmetrical  Asymmetrical
- Splenic Changes
- Enlarged  Mass  Abnl parenchyma

### Other Clinical Findings

- Hypercalcemia \_\_\_\_\_ mg/dL
- Enlarged Lymph Node(s)
- Node Involvement:  Unilateral  Bilateral
- Anemia  Fever
- Mass Detected:
- Abdomen  Anal  Liver
  - Derm  Heart  Spleen
  - Kidney  Limb  Other: \_\_\_\_\_

### Recent Chemistries

Mark outcomes if already tested. Blank assumes not performed

L: low N: normal H: high

	L	N	H		L	N	H		L	N	H
Total Protein:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BUN:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Calcium:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Albumin:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Creatinine:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ALT:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Globulin:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BUN/Creat:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ALP:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A/G ratio:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Glucose:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Total Bili:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Cancer History (if applicable)

- Patient is apparently healthy (no signs of cancer)
- Patient is sick but NOT suspected of having cancer
- Patient is suspected of having cancer
- Patient has cancer  Patient is in remission
- Type: \_\_\_\_\_
- Dx Date (mm/yy): \_\_\_\_\_
- Currently Being Treated  Not Being Treated

### Concurrent Disease

confirmed/suspected

- Cushing's Disease
- Addison's Disease
- B12 Deficiency
- Degenerative Joint Disease (eg. OA)
- Autoimmune: \_\_\_\_\_
- Vector borne: \_\_\_\_\_
- Inflammatory: \_\_\_\_\_
- Pancreatitis: \_\_\_\_\_

### Allergic Dermatitis

Check all that apply for integration into Allergic Dermatitis Interpretation

#### Canine

- None of the below apply
- Affected ear pinnae
- Affected front feet
- Age of onset <3 years
- Chronic/recurring yeast infections
- Corticosteroid-responsive pruritis
- Mostly indoor lifestyle
- Nonaffected dorsolumbar area
- Pruritis without skin lesions at onset

#### Feline

- None of the below apply
- 2+ body sites affected
- Symmetrical alopecia
- Lesions on the lips
- Erosions or ulcers on the chin/neck
- Absence of lesion on the rump
- Absence of nonsym. alopecia on rump
- Absence of nodules or tumors
- Presence of at least two of four:
- Symmetrical Alopecia
  - Miliary dermatitis
  - Eosinophilic dermatitis
  - Head & Neck erosions/ulcers