Accession Continuation Form

(Must be accompanied by general accession form)

UNIVERSITY OF KENTUCKY
College of Agriculture
Veterinary Diagnostic Laboratory

1490 Bull Lea Rd; Lexington, KY 40511
PO Box 14125, Lexington, KY 40512-4125
Phone: 859-257-8283
Fax: 859-255-1624
Web: www.vdl.uky.edu

Accession #: _____

Case Coordinator: _____

Name of Owner	City, State	County	Page
			of

Lab Use Only	No#	List each Animal or Specimen Id	Breed	Sex: (M=Male F=Female)	Age	Age Units Hr. Day. Wk. Mo. Yr.	Test Request

Comments: _____

Veterinarian Signature: _____Date: _____

Note: General accession form must also be completed. Separate request form required for each animal species & premise ID.