

VETERINARY PATHOLOGY SERVICES
EXTERNAL RESEARCH PATHOLOGY SUBMISSION FORM

Date:	PI Name (Surrey):	PI Contact Number (Surrey):	PI Email (Surrey):
	PI Name (Institute):	PI Contact (Institute):	PI Email (Institute):
Institution Name and Address/Department:		Study Name and Synopsis:	
		Proposed Study Timescales:	
Detail of Samples for Submission, Including Numbers, Tissue Type, Infectious Agent, Fixative:		Pathology Services Requested:	
		Pathologist Interpretation Required: Yes No	

For human tissue only - Human Ethics Approval Reference Number:

Tick to confirm you have patient consent as required under the Human Tissue Act 2004

University Of Surrey Quotation:		Quotation Accepted: Yes	
UoS Quote Reference:		Accepted By:	Date:
Quote Details:		I have read and agree to the Terms and Conditions at http://www.surreyvetpathology.com/terms-and-conditions	
		Yes	No
By indicating that you accept the terms and conditions you hereby agree that submitted materials become the property of the University of Surrey and may be retained for diagnostic, teaching and research purposes, unless indicated at submission. If you do not consent to this reuse, please indicate here.			
Please send request to: Veterinary Pathology Centre University Of Surrey Francis Crick Road Guildford Surrey GU2 7AQ	Email: vetpath@surrey.ac.uk Tel: 01483 689823	<u>Lab Use Only</u>	
		VetPath Reference Number:	
		Date Received:	

November 2017