

**For lab use only: IZVG #:**

**Date sample received:**

**Urgent** – please indicate why:



**Laboratory dedicated to Zoo, Exotic & Wildlife Pathology**

Telephone (all enquiries): 01535 692000

Email: [pathologists@izvg.co.uk](mailto:pathologists@izvg.co.uk)

Pathologists: Mark Stidworthy MA VetMB PhD FRCPath MRCVS RCVS Recognised Specialist  
Daniela Denk Dr med vet DiplECVP MRCVS RCVS Recognised Specialist

**AQUARIUM SUBMISSION FORM**

Name and address of submitting veterinarian:		Name and address of owner/collection:	
Phone:		<b>PO number:</b>	
Fax:		Phone:	
Email:		Fax:	
Date sample taken:		Email:	
Species name, common:		Species name, scientific:	
Animal name or number:		Enclosure/tank:	
Age:		or if not known: <input type="checkbox"/> Adult <input type="checkbox"/> Juvenile <input type="checkbox"/> Neonate	
Origin:		<input type="checkbox"/> Wild caught <input type="checkbox"/> Captive bred <input type="checkbox"/> Unknown	
Sex:		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown	
Length of time in collection?		<input type="checkbox"/> <1 week <input type="checkbox"/> <1 month <input type="checkbox"/> < 1 year <input type="checkbox"/> >1 year	
Location:		<input type="checkbox"/> Quarantine (recent arrival) <input type="checkbox"/> On display <input type="checkbox"/> Holding (off display) <input type="checkbox"/> Quarantine (treatment)	
If on display, which other species are in exhibit?			
Group size:		No. affected:	No. dead:
Gill press:		<input type="checkbox"/> Negative <input type="checkbox"/> Positive Suspected problem?	
Skin scrape:		<input type="checkbox"/> Negative <input type="checkbox"/> Positive Suspected problem?	
Any post mortem findings (list organ and abnormality suspected)?			
Is the animal/group under treatment?		<input type="checkbox"/> N <input type="checkbox"/> Y	AHEF/Medical record number:
Is there a current/recent stressor? (note any that apply)			
<input type="checkbox"/> Treatment (what?):		<input type="checkbox"/> Suspected toxin (what?):	
<input type="checkbox"/> Drain down/clean		<input type="checkbox"/> Excess visitors	<input type="checkbox"/> Equipment failure
<input type="checkbox"/> Supersaturation		<input type="checkbox"/> Temperature issue	<input type="checkbox"/> Known water quality issue
<input type="checkbox"/> Other (please list)			
When was the stress (minutes/hours/days ago)?			
How was recent appetite?		<input type="checkbox"/> Good <input type="checkbox"/> Moderate <input type="checkbox"/> Poor	
How long has appetite been affected?			

Did the fish look ill prior to death? List signs:

Was fish euthanased?  No  Yes If yes, method:

Water quality parameters (use transport water if just arrived):

Ammonia	Nitrite	Nitrate
Salinity	Temperature	Dissolved oxygen



**Instructions to IZVG Pathology - tests required:**

**Histopathology:**

Whole fish  Biopsy from **live** fish

Parts of dead fish (please list below):

**Please indicate the location of any gross lesions or biopsy site:**

Fixative  Formalin  RCL2  Other

**Microbiology:**

List sites of swabs or tissues:

Aerobic  Anaerobic  Fungal  Special requests:

(contact your vet or a pathologist if unsure)

**Parasitology:**

List samples submitted (e.g. faeces, worm in ethanol, unstained smears):

Coelomic fluid (plain tube) from rays

**Other tests:** Please list (contact lab if uncertain):

Have any other samples been saved?  Ethanol  Frozen  Other (list):

Have samples been sent elsewhere (e.g. water testing)? Please list and send any results to [pathologists@izvg.co.uk](mailto:pathologists@izvg.co.uk):

**Tick if more green boxes needed**

Post mortem examinations on non-formalin-fixed fish/amphibian specimens are by prior arrangement (freshly-dead, unfrozen, whole carcasses or live fish for euthanasia only). Please contact the pathologists before submission, on 01535 692000, or [pathologists@izvg.co.uk](mailto:pathologists@izvg.co.uk).

**For lab use only:**

Green box received? Green boxes sent to client?  Y  N

Formalin pot (s)  Whole fish  Pieces of tissue Other samples (list):

Swab(s) Site (s):