Veterinary Genetics

Laboratory
Faculty of Veterinary Science
University of Pretoria
Private Bag X04 Onderstepoort 0110

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SAMPLE SUBMISSION FORM CANINE

(Valid 01/01/19 to 31/12/19) VGL_Form_108



DWNER DETAILS: Submitter (Name of person submaddress:	nitting the s	ample (Owner	· / Kennel), who must red	ceive 1 copy of the repo	ort):			
el:		F	-ax:		Cell:			
-mail:								
eterinarian (who collected the s	ample and	verified the m	icrochip number			_Veterinary	√ stamp / Clinic	
Breed Society Details (name and	l e-mail add	dress):						
 Please complete Perm 	ni ssion se	ection on pag	e 2 if the report must b	e sent to the Society	y.			
NIMAL DETAILS: (If parenta	ge is selec	ted in the test	request column, please	ensure that the parent	details are in	cluded belo	ow)	
Full Name of Dog Incl. prefix (Please ensure that the name on	t the name on SFX Breed of		Registration Number or	Microchip Number	TEST REQUEST		LABORATORY USE	
ne form is the same as the name indicated on the sample)	e name Dog	Date of Birth	moreomp rumber	Parentage	DNA Certificate		SONATON SOL	

Full Name of Dog Incl. prefix (Please ensure that the name on	CEV	Breed of	Registration Number	or Microchip Number	LABORATORY USE		
the form is the same as the name indicated on the sample)	SEX Dog	Dog	Date of Birth		Parentage		

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Blood samples: EDTA (purple top tubes). 1 Tube / dog.

Buccal / cheek swabs: Before collecting the sample, make sure that the animal is not chewing any food or suckling. If the animal has been eating, let it drink water, or wash its mouth with water. Sample ONE animal at a time. Use 2 swabs to collect buccal cells from each animal (these may be pure cotton buds). Label the swab envelope or container with the name / microchip number of the animal being sampled. Remove swab and rub the inside of the cheek firmly for 5-10 seconds but be careful not to injure the cheek. Wave the swab in the air for several seconds to air dry before inserting them back in the labelled envelope. Use ONE envelope per dog. Bacterial swabs may be used but must **not be placed in transport medium.**

FTA cards: Blood may be collected on FTA cards. Please contact the laboratory to order a card with sampling instructions. Cost per FTA card R63-00 (incl.)

Clean the outer edge of the ear on the inside with water and a clean cotton swab. With a sterile needle, prick the cleaned area until a drop of blood appears. Press the tip of the card to the drop of blood. A small amount of blood (± 5mm²) is required. Do not touch the tip of the card that is used to collect the blood sample. Ensure that the blood is distributed evenly and that it penetrates the full thickness of the FTA paper and is, therefore, visible on both sides of the paper. Leave the card open for about 15 minutes in a clean, cool environment to allow the blood to dry. Close the card and add the animal ID and / or microchip number to the card. Place the card into an envelope. Do not allow blood from different animals to contact the same card and keep the cards separated until the blood spot has dried completely. The dry card must be kept in a cool place, out of direct sunlight and at room temperature. Use a new sterile needle for each animal.

PARENTAGE DETAILS:

Dog ID	Mother ID and DNA Number (if previously tested)	Father ID and DNA Number (if previously tested)

 <u>PERMISSION</u> (to provide information 	tion to a registering body):			
,	(Name in full) agree to allow	w the Veterinary Genetics Labor	atory to provide DNA numbers a	and parentage results, pertaining to
Name and microchip number of dog /s) _				
			, to the re	egistering body for the breed
specified. Signed:	on	·		

COST OF TESTING:

TEST REQUIRED:	COST (Vat incl):
DNA Profile (per dog) 1 – 10 dogs submitted	R235-00
DNA Profile (per dog) >10 dogs submitted	R200-00
Parentage Verification (litter fee) *	R1750-00

^{*}Litter fee includes sire, dam and 6 or more pups. Add R235-00/sire for each additional sire.

Please note: Test results will only be made available after receipt of all relevant samples and full payment.

A DNA certificate will be provided to the owner indicated above at no additional cost.

Α	CC	O	JNT	INF	OR	MA	TIO	N:
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Owner/ Company			
Address:			
Tel:	Fax:	Cell:	
E-mail:			
VAT number:			

NO TESTING WILL BE DONE UNTIL FULL PAYMENT HAS BEEN RECEIVED. PLEASE EMAIL PROOF OF PAYMENT TO: vglpayments@gmail.com

Direct deposits may be made into the following account (Please send the proof of payment with the samples or via email – the samples will not be tested without proof of payment):

Bank: ABSA
Account number: 2140000038
Branch: 335545 (Hatfield)

Reference: Owner's name and AB916

Stored samples: The samples / or DNA extracts will be stored indefinitely in the reference library of the VGL. Every effort will be made to ensure that the samples are maintained in the condition submitted. All samples are kept on behalf of the "owner" as specified in the space provided. Samples will only be used as specified by the "owner" on this form unless ceded to the VGL or other party in writing by the owner. If a request for use of the samples arises in the future or the owner requests further testing, this request must be made in writing and the permission of the "owner" obtained.

DISPATCH OF SAMPLES:

Samples should be sent in by the most rapid means possible. Avoid sending samples late in the week or prior to statutory holidays. Samples can be sent by:

Courier to: Veterinary Genetics Laboratory Speed Service to: Veterinary Genetics Laboratory

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Onderstepoort
0110

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