

HINOCEROS SAMPLE SUBMISSION FORM
(MAKE EXTRA COPIES AS NEEDED)

Please fill out one form for sample collection date. Please make copies and send one to each researcher that receives samples.

SUBMITTER: _____

PHONE/FAX: _____

EMAIL: _____

SPECIES: _____
(If possible, please indicate subspecies; e.g., eastern or southern black rhinoceros)

SEX: _____ ANIMAL NAME: _____

IDENTIFICATION NUMBER: _____ (Studbook number is preferred)

DATE OF BIRTH (MON/DAY/YR): _____
(If unknown, give approx. age)

DATE SAMPLE COLLECTED (MON/DAY/YR): _____

SAMPLE COLLECTION INFORMATION: (check all that apply)
 serum hep. plasma EDTA plasma
 EDTA whole blood hep whole blood other: specify _____

Volume _____ Tissue(s) _____

Processed within: <2 hrs 2-12 hrs >12 hrs
Sample storage: frozen immediately refrigerated room temp.
 other: specify _____

Sample collected: live animal post-mortem

REASON SAMPLE COLLECTED (ROUTINE EXAM, ILL, ETC):

OTHER RELEVANT INFORMATION:

If you have questions, please call Michele Miller @ 561-833-7130 ext 224 or Eric Miller @ 314-781-0900 ext. 483.

Mail sample to: Palm Beach Zoo, 1301 Summit Blvd, West Palm Beach, FL 33405, ATTN: Dr. Michele Miller; please write on box REFRIGERATE IMMEDIATELY