HESKA Veterinary Diagnostic Laboratories

Sex:

male

female

Clinic ID:	Owner (Last):	(First):
Clinic Name:	Patient Name:	DOB:
All		

Address: feline Species: canine

Breed: LAB USE ONLY **Blood Collection** Spayed/Neutered: Doctor: Date: yes no unknown RT ST

Canine/Feline ALLERCEPT® (Environmental) Panel (2.0 ml serum) ALLERCEPT Food* Panel **BOTH** Environmental & Food (1.0 ml serum) Regional immunotherapy recommendation is based on clinic's location. If pet's primary **FOOD ONLY**

location is different, please provide pet's state and zip code (3.0 ml serum)

//> HESK'A

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ALLERGY PATIENT HISTORY

Section A – Home Environmental Exposures

Are there any other pets in household: Yes No If yes, what type:

Does the pet have fleas or a history of flea infestation: Have there been any recent environmental changes:

Section B – Medical Information

Age of onset of clinical signs: Are clinical signs primarily: Dermatologic Respiratory Gastrointestinal

Describe the major complaint:

Otitis Pododermatitis Select all that apply: Scabs Crusts **Papules Pustules**

> Skin Erythema Pyoderma Seborrhea Malassezia **Pruritus** Alopecia

Parasites (type):

City, State, Zip:

Acute or chronic: Is the disease intermittent or constant:

Non Seasonal Seasonal During what months is the disease most severe: fall Are clinical signs: winter spring summer

Other diagnosed medical problems: What is your differential diagnosis:

Type of Diagnostic	Date Performed	Results
Skin scrapings		
Surface cytology/biopsy		
Dermatophyte culture		
Thyroid testing		
ACTH stimulation		
Dietary elimination trial		Food & response:
Other		

Symptomatic Treatments Used	Drug Name	Last Date Administered	Effectiveness (better, worse, no change)		
Corticosteroids			Better	Worse	No change
Antihistamines			Better	Worse	No change
Shampoo/rinse			Better	Worse	No change
Antibiotics			Better	Worse	No change
Immunotherapy			Better	Worse	No change
Other			Better	Worse	No change

Send this form, serum sample, additional laboratory reports, pictures, etc., to Heska Corporation, 3760 Rocky Mountain Avenue, Loveland, Colorado 80538

Inquiries for diagnostic testing, sample submission, patient reprints, or case consultation, call Heska's Medical and Technical Consultants at 1-800-G0 HESKA (1-800-464-3752), option 5.

*Heska, in agreement with the American College of Veterinary Dermatology, does not recommend IgE testing for foods. A compliant exclusionary diet trial, followed by provocative re-challenge, is recommended for animals suspected of suffering from

All samples become the sole and exclusive property of Heska Corporation upon receipt.