

REQUEST FOR SPLIT SAMPLE ANALYSIS



Laboratory response is due within _____ business days of receipt of this request

TO BE COMPLETED BY PARTY SUBMITTING REQUEST: *Select from the drop-down* If you selected
Other:

DATE OF REQUEST:				
RACING AUTHORITY:				
RACING AUTHORITY CONTACT:	Name: e-mail:			
DRUG / ANALYTE FOR ANALYSIS:				
ANALYSIS REQUESTED:	Qualitative <small>(no concentration)</small>	Quantitative <small>(estimated concentration reported)</small>		
REGULATORY THRESHOLD: <i>(If applicable)</i>				
REQUIRED SENSITIVITY:				
MATRIX TO BE ANALYZED: <i>(Indicate all to be submitted for analysis)</i>	Blood-SERUM	Blood-PLASMA	URINE	HAIR
HAIR ANALYSIS: Sample collected by: Regulatory Veterinarian Other: _____	Mane Tail <small>(choose one)</small>	Pulled Cut <small>(choose one)</small>	Segmental Analysis YES NO	Sample length: _____ IN.
HYDROLYSIS USED IN PRIMARY ANALYSIS:	YES		NO	
SAMPLE CONDITION:	Refrigerated	Frozen	Other:	
SAMPLE AGE: <i>(interval post-collection)</i>	< 60 days	61-120 days	>120 days	
PARTY RESPONSIBLE FOR PAYMENT:	Trainer / Owner	Racing Authority	Other:	

TO BE COMPLETED BY RESPONDING LABORATORY

LABORATORY:			
LABORATORY CONTACT:			
LABORATORY RESPONSE:	AGREE DECLINE		
Justification, if declined:	TO PERFORM REQUESTED ANALYSIS		

PRICING AND REMITTANCE INSTRUCTIONS:			
PROJECTED TURN-AROUND-TIME:			Hair
MINIMUM SAMPLE REQUIREMENT:	Serum / Plasma _____ mls	Urine _____ mls	Length _____ in. Weight: ≥ 100 mg.
SHIPPING ADDRESS AND INSTRUCTIONS:			