

OptiGen Cataract Research Sample

INSTRUCTIONS:

In addition to this completed form, please also send the following information (if you have not already done so). We don't mind receiving 2 copies of this information...that works much better than not receiving any.

- The dog's pedigree. If close relatives of the dog are known to have the same disease, please indicate that on the pedigree.
- If more than one sample is being sent please indicate if/how the samples are related.
- Any/all available eye exams or other diagnostic reports on the dog, particularly the most recent one that describes the cataract. A drawing of the cataract (showing location and shape) is most helpful.

Please see Instructions & Information for sample collection and shipping details <http://www.optigen.com>
Ship sample(s) to OptiGen, 767 Warren Road, Suite 300, Ithaca, NY 14850.

OWNER or CONSULTING VETERINARIAN WHO IS SUBMITTING THIS SAMPLE

Name: first _____ initial _____ last _____
Address: _____
City: _____ State/Province: _____
Country: _____ Zip/Postal Code: _____
Day Phone: _____ Evening Phone: _____
Fax: _____ Email: _____

DOG IDENTIFICATION (Indicate "N/A" if question not applicable)

Breed: _____ Call Name: _____
Registry: _____
Registered Name: _____
Registration #: _____
Birthdate: ____/____/____ (mon/day/yr) Sex: ___Female ___Male
Tattoo/Chip#: _____
CERF#/Other Eye Registry#: _____
Registered Name of Sire: _____
Registered Number of Sire: _____
Registered Name of Dam: _____
Registered Number of Dam: _____

DISEASE HISTORY

Date of last exam by an ophthalmologist (mon/day/yr): ____/____/____ or ___ never examined
Comments: Please describe when the cataract was first diagnosed and when the last NORMAL exam for the dog occurred prior to diagnosis.

All samples submitted to Optigen become the property of Optigen and may be used for internal quality control and/or research purposes.