



**FORMS**  
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**Confidentiality and Terms of Service Agreement**

This Confidentiality Agreement (this "**Agreement**") is made effective this \_\_\_\_ day of \_\_\_\_, 200\_, between VCA Cenvet, Inc., doing business as ANTECH Diagnostics, a California corporation ("**ANTECH Diagnostics**"), and \_\_\_\_\_ ("**Client**").

1. For purposes of this Agreement, the term "**Confidential Information**" includes, without limitation, (i) information, materials, data, protocols, reports, samples, chemical formulas, business plans or other information not known to the public which are disclosed by Client to ANTECH Diagnostics; (ii) Standard Operating Procedures (SOP), reports, pricing information, customer contacts, emails, letters, records, personnel information and inspection information which are disclosed by ANTECH Diagnostics; (iii) any information proprietary to either party. Confidential Information will not be deemed to include information that (i) is or becomes available in the public domain, other than as a result of an unauthorized disclosure by the receiving party, or (ii) is not acquired from the disclosing party or any other person known by the receiving party to be subject to a confidentiality agreement with the disclosing party.

2. As a condition to the disclosure of any Confidential Information, the receiving party agrees (i) to keep the Confidential Information confidential, (ii) to utilize the Confidential Information solely for the purpose of conducting business between the parties, and (iii) not to disclose any Confidential Information to any persons other than the receiving party's officers, directors, employees, agents, affiliates and advisors (collectively "**Representatives**") who are directly working on or who are consulted in connection with this matter. Disclosure of Confidential Information by the receiving party will not be deemed to be a breach of this Agreement if such disclosure is made with the consent of the disclosing party or pursuant to a subpoena or order issued by a court of competent jurisdiction or by a judicial or administrative or legislative body or committee; provided that, upon receipt by the receiving party of any subpoena or order covering Confidential Information, the receiving party will promptly notify the disclosing party of such subpoena or order. The receiving party shall be liable for breaches of this letter agreement by its Representatives.

3. Client agrees not to use the name ANTECH Diagnostics in any circumstances that would cause harm to ANTECH Diagnostics' reputation or business practices. Publication of any methodology or the name ANTECH Diagnostics in a professional journal must be agreed upon in writing.

4. ANTECH Diagnostics accepts responsibility for the sample integrity only after receipt of the sample at the ANTECH Diagnostics facility. ANTECH Diagnostics is not responsible for loss or damage in transit to the facility or improper sample collection or shipment. ANTECH Diagnostics solely warrants the accuracy of results for samples sent to its facility as scheduled. ANTECH Diagnostics accepts no responsibility, either expressed or implied, for liability of indirect loss or damage, other than the liability of the cost of the test performed by ANTECH Diagnostics. This liability will not exceed the amount paid by the client to ANTECH Diagnostics for the analysis of the sample.

5. All interpretive reports regarding safety assessments are based on the scientific knowledge and good faith effort of ANTECH Diagnostics personnel and are provided as a service. Such reports are based on clinical pathology information and do not reflect all information regarding the subject matter of such report. All determinations regarding the safety of any drug are the responsibility of the client and should be made based on all data available to the client. Notwithstanding anything to the contrary contained herein, no report or other service provided hereunder shall be interpreted to indicate that a joint venture between the parties exists.

6. Clinical pathology samples submitted to ANTECH Diagnostics are considered to be unstable. Samples may be kept from between seven (7) and thirty (30) days, depending on the sample type. Samples may be returned at an additional cost or destroyed after this defined storage time. Original data may be copied and returned to the client. The copy will be retained for five (5) years.

7. This Agreement shall be governed by and construed in accordance with the laws of the State of California, without application of the conflict of laws principles thereof. This Agreement shall be binding jointly and severally on each of the parties, their heirs, successors, or assigns. In the event litigation arises out of this Agreement, the prevailing party shall be entitled to recover from the non-prevailing party its reasonable attorneys' fees and costs. This Agreement may only be amended by a written instrument signed by all of the parties hereto. This Agreement may be signed in counterpart and by facsimile signature, which in either case shall be fully effective and binding.

IN WITNESS WHEREOF, this Agreement has been executed as of the date first set forth above.

**VCA Cenvet, Inc.**

\_\_\_\_\_  
By: Douglas A. Neptun

Its: Laboratory Director

\_\_\_\_\_  
\_\_\_\_\_  
By: \_\_\_\_\_

Its: \_\_\_\_\_



## Procedure for Sending Saturday Samples

This procedure is not routine and you must have prior approval of the Laboratory Director before Saturday deliveries are accepted.

Samples should be sent via FedEx only.

The airbill for FedEx should be completed as follows:  
*(if you use a computer generated form this will not work, you must use a manual form)*

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### SECTION 3

Send To:  
David Brown  
ANTECH® Diagnostics  
2311 Englert Drive  
Durham, NC 27713  
Phone: (919) 630-0874

Check box "HOLD Saturday at FedEx Location"

### SECTION 4A

Check box "FedEx Priority Overnight"

### SECTION 5

Complete as required

### SECTION 6

Check SATURDAY Delivery

### SECTION 7

Complete as required

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Fax the samples Alert Form to (919) 277-0825 before 4:00pm EST with the FedEx airbill number. Alternatively, you may e-mail the Alert Form with FedEx airbill number to either [david.brown@antechmail.com](mailto:david.brown@antechmail.com) or [cecilia.long@antechmail.com](mailto:cecilia.long@antechmail.com). If this number is not provided, we cannot pick up the samples.

**DO NOT SEND SAMPLES ON A SATURDAY PRIOR TO A HOLIDAY.**

**ANTECH® GLP**  
600 Airport Blvd. Suite 500 | Morrisville, NC 27560  
919.277.0822 | Fax: 919.277.0825



### Sample Alert Notice

Date: \_\_\_\_\_

#### Shipping Information:

Study #: _____
Contact Person: _____
Phone: _____
# Pages Faxed: _____
Airbill #s: _____
_____
_____

#### Samples/Tests:

Number of Samples/	Tests (circle)
____ Serum	Chemistry Panel Special Chem Tests
____ Plasma	Coag/Special Chem
____ Whole Blood	CBC/Special Chem
____ Urines	Urinalysis/Special Chem
____ Other	
<u>Special Request:</u> _____	

**Before Shipping  
Complete and FAX To:  
(919) 277-0825**

#### Reports:

<input type="checkbox"/> Standard (as applicable) Toxicology Clinical Trial
<input type="checkbox"/> Custom (see below)
<input type="checkbox"/> Clinical Trial with Re Range
<input type="checkbox"/> Toxicology with Mean & SD
<input type="checkbox"/> Excel File (Non-GLP)
<input type="checkbox"/> Word File
_____
e-mail address

#### Notes/Special Request: Detail Below

_____
_____
_____
_____
_____

\*Custom reports are available with previous arrangements only. Please contact the lab when scheduling the study.

ANTECH® Diagnostics  
600 Airpoty Blvd. Suite 500  
Morrisville, NC 27560  
Lab (919) 277-0822

**Final Submission** \_\_\_\_\_  
(for this study)



### Sample Testing Requisition

Protocol: \_\_\_\_\_ Time Period: \_\_\_\_\_

Collection Date: \_\_\_\_\_ Species: \_\_\_\_\_

Tests: \_\_\_\_\_

*Note: If group and/or sex are the same use arrow, initial and date of entry.  
If collection dates are different or collection times are required, ask for customized requisition.*

Group	Sex	Animal ID	Accession # (Lab Use Only)	Group	Sex	Animal ID	Accession # (Lab Use Only)

**CLIENT**

Inventoried by: \_\_\_\_\_

Date: \_\_\_\_\_

**ANTECH® LAB**

Accessioned by: \_\_\_\_\_

Date: \_\_\_\_\_

**ANTECH® GLP**

600 Airport Blvd. Suite 500 | Morrisville, NC 27560

919.277.0822 | Fax: 919.277.0825



### Sample Testing Requisition

Protocol: \_\_\_\_\_ Time Period: \_\_\_\_\_ Species: \_\_\_\_\_

Tests: \_\_\_\_\_

*Note: If group and/or sex are the same use arrow, initial and date of entry.  
If collection dates are different or collection times are required, ask for customized requisition.*

Group	Sex	Animal ID	Collection Date	Accession # (Lab Use Only)

Client: \_\_\_\_\_

ANTECH Lab: \_\_\_\_\_

Inventoried By: \_\_\_\_\_

Accessioned By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_



### Sample Testing Requisition

Protocol: \_\_\_\_\_

Species: \_\_\_\_\_

Tests: \_\_\_\_\_

*Note: If group and/or sex are the same use arrow, initial and date of entry.  
If collection dates are different or collection times are required, ask for customized requisition.*

Group	Sex	Animal ID	Collection Time Period	Collection Date/Time	Accession # (Lab Use Only)

Client: \_\_\_\_\_

ANTECH Lab: \_\_\_\_\_

Inventoried By: \_\_\_\_\_

Accessioned By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_



## Testing Volume Requirements

### Hematology

500 uL EDTA Whole blood + slide made at site.  
**Do not freeze!**

Complete Blood Count	Mean Platelet Volume (stable 8 hours)
Red Cell Count	Red Cell Distribution Width
Hemoglobin	
Hematocrit	
Mean Corpuscular Volume (MCV)	
Mean Corpuscular Hemoglobin (MCH)	
Mean Corpuscular Hemoglobin Concentration (MCHC)	
Platelet Count	
Leukocyte Count	
Leukocyte Differential	
RBC Morphology	

Reticulocyte Count

500uL of whole blood - or -  
Special stained cells -2 slides

### Coagulation

Prothrombin Time (PT)	500 µL frozen citrate plasma1
Activated Partial Prothrombin Time (APTT)	500 µL frozen citrate plasma1
Fibrinogen	500 µL frozen citrate plasma1
Thrombin Time	500 µL frozen citrate plasma1
Fibrin Degredation Products (FDP) (Monkey)	500 µL frozen citrate plasma1
D-Dimer (Monkey, Dog) (Rat non-GLP)	200 µL frozen citrate plasma1

1. Sample must be collected in tube with ratio of 1 part sodium Citrate and 9 parts blood. Special tubes must be made for small volumes.



**Urinalysis**

2mL or entire specimen of urine refrigerated unspun. Provide total volume. Preferred collected over a timed period. Provide time period.

Appearance	Ketones*
Color	PH*
Osmolarity	Protein* (May not be accurate in many species)
Specific Gravity	Urobilinogen*
Bilirubin*	Casts
Blood*	Cells
Glucose*	Crystals

\*Assays performed as semiquantitative dipstick method

**Clinical Chemistry**

Minimum sample for one test 150 µL. Up to 20 tests can be performed on 350 µL of frozen serum. Separate from cells within 1 hour of collection.

Albumin	Chloride	Magnesium
Alkaline Phosphatase (ALP)	Cholesterol	Phosphorus
Alanine Aminotransferase (ALT)	Creatine Kinase (CK)	Potassium
Aspartate Aminotransferase (AST)	Creatinine	Sodium
Amylase	Gamma Glutamyl Transferase (GGT)	Triglycerides
Bilirubin, Direct	Glucose	Total Protein
Bilirubin, Total	Lactate Dehydrogenase (LD)	Urea Nitrogen
Calcium	Lipase	

Clinical Chemistry tests can be performed on urine samples as quantitative assays.

Indirect Bilirubin is a calculated parameter and requires Total and Direct Bilirubin. (No additional sample volume.) Urea/Creatinine Ratio, Anion Gap calculated.

Globulin and A/G ratio are calculated parameters and require Total Protein and Albumin. (No additional sample volume.)

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## Special Chemistry

Alkaline Phosphatase Isoenzymes	500 µL frozen serum (Non-GLP)
Aldolase	200 µL serum preferred, 100 µL minimum 13 µL pipetted
Angiotensin Converting Enzyme (ACE)	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Apolipoprotein (A-1, A-2, B, E, Lp(a))	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Bile Acids	200 µL serum preferred, 100 µL minimum 15 µL pipetted
CK Isoenzymes	500 µL serum preferred, 250 µL minimum
Cholinesterase (Non-EPA)	200 µL serum preferred, 100 µL minimum 50 µL pipetted 500 µL of EDTA whole blood
CH50 Total Complement	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Complement Bb (Monkey)	200 µL serum or EDTA Plasma preferred, 50 µL minimum 10 µL pipetted
C3 Complement (Monkey)	200 µL serum preferred, 100 µL minimum 25 µL pipetted
C4 Complement (Monkey)	200 µL serum preferred, 100 µL minimum 25 µL pipetted
C-Reactive Protein (CRP)	100 uL serum preferred, 50 uL minimum.
Erythropoietin (EPO)	250 µL serum preferred, 200µL minimum, 100µL pipetted
Ferritin	200 µL serum preferred, 100 µL minimum 20 µL pipetted
Free Fatty Acids	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Free Hemoglobin	200 µL Heparinized plasma preferred, 100 µL minimum 25 µL pipetted. No vacuum tubes, use syringe.
Fructosamine	200 µL serum preferred, 100 µL minimum 25 µL pipetted
GLDH	200 µL serum preferred, 100 µL minimum 35 µL pipetted
HDL Cholesterol	200 µL serum preferred, 100 µL minimum 2 µL pipetted
Haptoglobin	200 µL serum preferred, 100 µL minimum 50 µL pipetted
HbA1C	200 µL EDTA whole blood, 100 µL minimum
Homocystine	200 µL serum preferred, 100 µL minimum 18 µL pipetted
Hydroxybutarate	200 µL serum preferred, 100 µL minimum 9 µL pipetted
Immunoglobulin A	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Immunoglobulin E	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Immunoglobulin G	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Immunoglobulin M	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Inulin	100 µL of serum or heparinized plasma, 200 µL urine
Iron	200 µL serum preferred, 100 µL minimum 12 µL pipetted
LD Isoenzymes	500 µL serum room temperature, ship immediately, do not freeze.
LDL Cholesterol	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Lactic Acid	200 µL Fluoride Plasma, Whole blood - Prepare 1 part blood and 1 part 8% perchlotic acid precipitate. Freeze supernatant.

Leptin	100 uL serum preferred, 50 uL minimum
Alpha 2_ Macroglobulin	100 uL serum preferred, 50 uL minimum
Myoglobin	200 µL serum preferred, 100 µL minimum 25 µL pipetted
NAG	200 µL urine unpreserved preferred, 100 µL minimum 25 µL pipetted
5'-Nucleotidase	200 µL serum preferred, 100 µL minimum 5 µL pipetted
p-Aminohippuric Acid (PAH)	100 µL of serum or heparinized plasma, 200 µL urine
Phospholipids	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Protein Electrophoresis	500 µL serum
Sorbitol Dehydrogenase (SDH)	200 µL serum preferred, 100 µL minimum 25 µL pipetted
Tranferrin	100 uL (Monkey), 50 uL rat, rabbit
Unsaturated Iron Binding capacity (UIBC)	200 µL serum preferred, 100 µL minimum 8 µL pipetted

### Immunoassays

Adrenocorticotrophic Hormone (ACTH)	200 µL EDTA plasma preferred, 100 µL minimum 75 µL pipetted. Collect in cold siliconized tube, separate and freeze immediately.
Aldosterone	500 µL serum preferred, 150 µL minimum 100 µL pipetted
Antidiuretic Hormone (ADH)	750 µL EDTA plasma preferred, 500 µL minimum 400 µL pipetted
Calcitonin	Rat - 500 µL of serum preferred, 250 µL minimum, 200 µL pipetted. Non-Rodents - 500 µL of serum preferred, 200 µL minimum, 75 µL pipetted.
Catacholamines	500 µL EDTA plasma, 250 µL minimum 200 µL pipetted
Corticosterone	200 µL serum preferred, 150 µL minimum 50 µL pipetted
Cortisol	200 µL serum preferred, 120 µL minimum 10 µL pipetted
C-Peptide	200 µL serum preferred, 120 µL minimum 20 µL pipetted
DHEA	500 µL serum preferred, 150 µL minimum 100 µL pipetted
DHEA Sulfate	500 µL serum preferred, 100 µL minimum 25 µL pipetted
Dihydrotestosterone	200 µL serum preferred, 100 µL minimum 50 µL pipetted
Estradiol	500 µL serum preferred, 300 µL minimum 250 µL pipetted
Folic Acid	500 µL Heparinized Plasma preferred, 250 µL minimum 200 µL pipetted For Whole Blood - Record Hematocrit. 100 µL of blood in 2 mL of 1% ascorbic acid (fresh) Freeze immediately.
Follical Stimulating Hormone (FSH)	500 µL serum preferred, 150 µL minimum 100 µL pipetted
Gastrin	300 µL serum preferred, 200 µL minimum 100 µL pipetted
Glucagon	500 µL EDTA Plasma with 5000 U Trasylol/10 mL of blood, 250 µL Minimum

α GST	Preserved urine sample.
Growth Hormone	500 µL serum preferred, 200 µL minimum 100 µL pipetted
Histamine	250 µL EDTA plasma, 100 µL minimum Freeze immediately.
Insulin-Like growth Factor (IGF-1)	Rat - 100 µL serum preferred, 50 µL minimum 10 µL pipetted. NHP - 100 µL serum preferred, 50 µL minimum 20 µL pipetted.
Insulin	100 µL serum preferred EDTA or heparin acceptable, 50 µL minimum 25 µL pipetted;
Leutenizing hormone (LH)	500 µL serum preferred, 150 µL minimum 100 µL pipetted
Leptin	500 µL serum preferred, 150 µL minimum 100 µL pipetted
N-telopeptide	Serum - 100 µL preferred, 75 µL minimum 50 µL pipetted Urine - 500 µL preferred, 50 µL minimum 25 µL pipetted
Osteocalcin	Rat - 100 µL serum preferred (Heparin acceptable), 50 µL minimum 20 vL pipetted. NHP - 100 µL serum preferred, 50 µL minimum 10 µL pipetted.
Parathyroid Hormone (PTH-intact)	Rat - 500 µL serum preferred, 250 µL minimum 200 µL pipetted Non-Rodent - 200 µL serum preferred, 150 µL minimum 50 µL pipetted
Pro-BNP	200 µL serum preferred, 150 µL minimum 100 µL pipetted
Progesterone	200 µL serum preferred, 125 µL minimum 25 µL pipetted No gel separators
Prolactin	500 µL serum preferred, 200 µL minimum 100 µL pipetted Canine - 100 µL serum preferred, 50 µL minimum 25 µL pipetted
Renin	150 µL serum preferred 100 µL minimum 50 µL pipetted
Reverse T3	150 µL serum preferred (Heparin acceptable), 125 µL minimum 100 µL pipetted
Thyroid Stimulating Hormone (TSH)	500 µL serum preferred, 150 µL minimum 100 µL pipetted
Testosterone	150 µL serum preferred (Heparin acceptable), 120 µL minimum 50 µL pipetted
Thyroxine (T4)	125 µL serum preferred (Heparin acceptable), 115 µL minimum 25 µL pipetted
Free T3	200 µL serum preferred, 150 µL minimum 100 uL pipetted
Free T4	200 µL serum preferred, 100 µL minimum 50 uL pipetted
Tri-iodothyronine (T3)	150 µL serum preferred (Heparin acceptable), 125 µL minimum 100 µL pipetted
T3 Uptake	500 µL serum preferred, 200 µL minimum
Troponin I (Cardiac, Skeletal)	175 µL serum preferred (Heparin acceptable), 150 µL minimum 50 µL pipetted
Vitamin B12	250 µL serum preferred (Heparin acceptable), 200 µL minimum 200 µL pipetted
Vitamin D 1,25 OH	500 µL serum preferred (Heparin acceptable), 250 µL minimum 250 µL pipetted

## Reference Ranges

Reference ranges are not provided with test results. The philosophy of ANTECH Diagnostics® GLP is that concurrent controls of matched sex, age, supplier, sample site collection and fasting status best reflect the current metabolic status of the animals. Data is collected from samples submitted for analyses and from literature. These ranges can be supplied as available.

## Methodology

The methodologies used at ANTECH Diagnostics® GLP are considered proprietary information. General information about the methodology will be provided to clients with signed confidentiality agreements. Interpretive reports also contain general method descriptions.

### General Methods

Hematology – Siemens Advia 120 Multispecies Hematology System

Coagulation – Sysmex CA1500 Coagulation System

Urinalysis – Siemens – Clinitek Advantus System

Manual specific gravity by refractometer

Osmolality by Advanced Osmometer

Clinical Chemistry – Beckman/Olympus 640e Clinical Chemistry System

Immunoassays – Vary by analyte - measured by Siemens Immulite analyzer, Cobra Packard Gamma Counter for RIA methods or Molecular Devices Microplate Reader.

**ANTECH® GLP**

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## Collection of Samples

A purple top tube contains an anticoagulant that is used for hematology determinations. A blue top tube contains citrate for collecting samples for coagulation tests. A red top tube with a pale yellow gel in the bottom has no anticoagulant or preservative.

Pre-label each tube with the sample ID and date of collection. Be sure that the information on the requisition matches this data.

If you collect the sample in a syringe, be very careful in filling the tubes from the syringe. It is best to remove the needle and the tops of the tubes to fill each tube. Do not switch tops on the tubes. Do not fill the tubes by injecting the blood through the needle into the tube. This procedure destroys red cells and invalidates some chemistry tests.

Fill the purple top tube first with the appropriate approximately of blood (depending on the size 2, 3, or 5 mL). Cap the tube immediately with the purple top, be sure the cap is on tightly and mix the tube at least 5 times by gentle inversion of the tube. Do not shake the tube.

Fill the blue top tube with the required amount of blood. For vacuum tubes, these tubes have an automatic fill volume. If you fill it from a syringe, you must know the final level of blood and anticoagulant. This blood/anticoagulant ratio is important in analysis of the plasma. For rodents, you must make custom tubes for small volumes. This requires a ratio of 9 parts blood to 1 part anticoagulant. The sample must be well mixed and then centrifuged at approximately 3000 rpm for 10-15 minutes. The plasma must be removed and placed into a labeled transport tube. This must be marked as plasma, since you can not tell plasma from serum in transport tubes. The transport tube should be frozen and shipped on dry ice for analysis.

Fill the red top tube with the rest of the blood, at least 2 mL. Replace the red cap and be sure that is on the tube tightly. Let this tube sit for 30 minutes at room temperature (but not longer than 1 hour). Spin the tube in the centrifuge at 3000 rpm for 10 minutes. Check the tube to be sure that the serum is separated from the red cells by the solid gel. If red cells are on top of the gel, the sample may need to be re-spun.

If the red top does not have a gel separator, the serum must be transferred to a transport tube. Be sure the transport tube has the appropriate ID information.