|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Study ID**(ex. A003) | **Owner Last Name**(write “N/A”, if shelter) | **Dog's Name** | **Gender** | **Date Illness Onset** (mm/dd/yy) | **Lepto Rapid Test #1****(Date: m/dd/yy)** | **Lepto Rapid Test #2\*****(Date: m/dd/yy)** | **Specimens Collected for Shipment**Select all that apply.**(Date: m/dd/yy)** |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |
| *Place ID label here* |   |   |  ☐ M  ☐ F ☐ MC ☐ FS |   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   |  **Date:** \_\_\_/\_\_\_/\_\_\_  ☐ Negative ☐ Positive   | **Date:** \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_☐ Blood ☐ Kidney Tissue ☐ Serum ☐ Kidney Culture☐ Urine (cysto) ☐ Urine (free catch)  |

\*Lepto Rapid Test #2: Perform test #2 if the first lepto rapid test was negative and blood was collected <7 days after symptom onset.

**Gender:** M = male MC = male, castrated

 F = female FS = female, spayed

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