Sample Submission Form

For office use only

Animal Health Trust
the science behind animal welfare

SAMPLE SUBMISSION FOR GENETIC RESEARCH

PLEASE USE BLOCK LETTERS

Breed…… Coat colour……..

KC Registered Name and Number of dog……...

……..... Sex…….…… Date of Birth. (D)…... (M)…… (Y)…….....

Owner's Name……..

Address……..

……

Email address (if available):

……

Please enclose:

- ❑ Swabs or blood sample (please preserve 5ml blood sample in an EDTA tube)
- ❑ 5-generation pedigree of the dog whose sample is enclosed.
- ❑ Any relevant information with regard to the clinical status of the dog for inherited disease.
  - o i.e. The affected or unaffected status, dates of diagnosis, copies of eye certificates, etc.

The above information is necessary for the sample to be used for research purposes. It is also important to inform the AHT of any significant health changes that occur after the sample has been submitted.

I hereby declare that the sample submitted for testing is from the dog described above. I accept that the DNA sample becomes the property of the Animal Health Trust and may be used in future research.

Signature ……..Date…….

DNA sample, Sample Submission Form, Pedigrees and Health Certificates should be sent to:
Dr. Cathryn Mellersh, Animal Health Trust, Lanwades Park, Kentford, Newmarket, Suffolk, CB8 7UU, UK

PLEASE SEE REVERSE FOR SWABBING INSTRUCTIONS

Instructions for taking and submitting a buccal swab

1. The samples should not be taken within two hours of the dog eating, to obtain a clean sample.

2. Two non-sterile swabs are provided for each individual dog to be tested.

3. Try and avoid any or excessive contact with the brush end, ideally but not necessarily, by wearing latex or vinyl gloves to reduce the possibilities of contamination.

4. Roll the first swab firmly on the inside of the dog's cheek at least **20** times on each side of the mouth, ensuring the brush is moved across the entire cheek surface.

5. Briefly air dry the swab for approximately 5-10 minutes and place directly into the Swab Envelope provided.

6. Repeat steps 3-5 with the second swab and seal the Swab Envelope.

7. Label the Swab Envelope clearly with the appropriate KC registered name and number. If these are not available, label with the name given on the Sample Submission form. Please also state the breed, sex, and birth date of the animal.

8. Fill in the Sample Submission form. It is imperative that the information given here is accurate.

9. Return the sealed Swab Envelope along with the completed Sample Submission form, and copies of the dog's pedigree and relevant health certificates using the return addressed envelope provided.

SAMPLES MUST BE RETURNED AS SOON AS POSSIBLE AFTER THE SWABBING PROCESS IS COMPLETED, VIA FIRST CLASS MAIL, TO ENSURE THE QUALITY OF THE SAMPLES ON ARRIVAL AT THE ANIMAL HEALTH TRUST.

PLEASE SEE REVERSE FOR SAMPLE SUBISSION FORM