



FOR OFFICIAL USE ONLY		
Submission No. _____	Dog ID No. _____	Urine No. _____

# Non-Type 1 Cystinuria Marker DNA Test for Mastiff-Type Breeds

## Owner Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
 Daytime Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Co-Owners' Names: \_\_\_\_\_  
 Send Additional Report by e-mail to Veterinarian

## Veterinarian Information (Provide only if report is to be sent to your veterinarian, by e-mail only)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Clinic Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## Dog Information

Registered Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
 Call Name: \_\_\_\_\_ Registration #: \_\_\_\_\_  AKC  Other: \_\_\_\_\_  
 Birthdate (mm/dd/yy): \_\_\_\_\_ Sex:  Male  Female Neutered?:  No  Yes Date: \_\_\_\_\_  
 Sire's Reg. Name \_\_\_\_\_ Sire's Registration #: \_\_\_\_\_  
 Dam's Reg. Name \_\_\_\_\_ Dam's Registration #: \_\_\_\_\_  
 Prior Urine Nitroprusside Testing: (give result and date/test number if available) \_\_\_\_\_  
 Prior Blood Sample Submitted: (give date of submission if available mm/dd/yy) \_\_\_\_\_

## Sample Information

Date of Sample Collection(mm/dd/yy): \_\_\_\_\_  Relative Affected/ Relationship: \_\_\_\_\_  
 Samples Included:  Blood (purple top tube) OR  Cheek brushes (two) AND  Urine

## Authorization

My signature below certifies that I am the owner of this dog. To the best of my knowledge, the information I have supplied is accurate. I understand that the sample I have submitted may be used for further research to develop additional genetic tests for cystinuria or other inherited diseases in dogs.

Owner's Signature: \_\_\_\_\_ Date (mm/dd/yy): \_\_\_\_\_

## Payment Information

**Please submit Payment for each sample submitted (US Dollars):**

- \$140 Individual (Each individual sample submitted).
- \$120 Clinic Rate (Preapproval required; 20 or more tests submitted together - results sent to each individual owner).
- \$100 /puppy Litter Rate (3 or more littermate tests submitted together, all results sent to one breeder/owner. Maximum \$600/litter.)

FOR OFFICIAL USE ONLY: Transaction Date
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### Check your payment method below:

- Check/Money Order (US only) to: Trustees of the University of Pennsylvania (write "Cystinuria DNA test" in memo)
- VISA  MasterCard Credit Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature: \_\_\_\_\_ Name on Card: \_\_\_\_\_

The "Non-Type 1 Cystinuria Marker DNA Test for Mastiff-Type Breeds" form is for submitting a sample for DNA testing to the University of Pennsylvania. Feel free to duplicate and distribute this form and instructions to others.

PLEASE ALLOW 6-8 WEEKS FOR RESULTS TO BE PROCESSED

Last update 1/3/13



## **Cystinuria Sample Submission Instructions**

### **Blood Sample Collection (performed by a veterinary clinician or nurse)**

1. Label EDTA (purple top) tube with owner's last name and animal's name (or AKC#)
2. Draw a 2-5 ml blood sample. (It is safe to draw 4 ml from a 1 lb/454 g dog.)
3. The blood sample must be kept cold but not frozen.
4. Complete required submission form and mail with sample, along with a copy of the dog's registration.
5. Mail EDTA purple top tube by overnight or **2-day** delivery. (DO NOT use US Postal service.) Your veterinarian may have special Styrofoam containers or cardboard mailers to send blood tubes. Please place tubes in a Ziplock™-type sealable bag, then in bubble wrap for protection. Avoid collecting and mailing samples late in the week to prevent samples sitting in the mail over the weekend.

### **Cheek (Cytology) Brush Collection**

NOTE: DNA testing results are more reliable using a blood sample.

To receive cytology brushes, send a **self-addressed, stamped, business envelope FOR EACH DOG** to:

Michael Raducha  
Ryan Veterinary Hospital, Rm. 4022  
University of Pennsylvania  
3900 Delancey St.  
Philadelphia, PA 19104-6010

1. Two brushes are needed for each dog tested.
2. **To avoid contamination by food, do not feed the dog for a minimum of three (3) hours before sample collection.**
3. Ask a second person to gently restrain the dog's head as you collect the sample, if necessary.
4. Wash your hands before you collect the samples.
5. **If you are collecting samples from more than one dog, collect samples from one dog at a time, and always wash your hands between dogs.**
6. Label the envelopes that contain the cheek swab brushes with the owner's name AND the dog's name.
7. Open the end of the swab package that shows the word, "**peel**", printed on it. Be careful not to touch the brush end as you remove the swab.
8. Insert the brush ends between the dog's gums and the inside of the cheek. Briskly rub the brush on the surface of the inside of the cheek for **15-20 seconds** to pick up cheek cells. **Make sure that the brush is in contact with the cheek and not just the saliva.**
9. **Allow the brush to air dry, return the brush to its original package, and tape the opened ends shut.**
10. **Repeat steps 3-5 for the other brush.**
11. Secure the brushes in a **separate labeled envelope for each dog.**
12. Complete the required submission form for each dog (printed or typed) and mail with the sample.

### **Urine Collection**

Urine testing is included as part of the Non-Type 1 Cystinuria Marker DNA Test for Mastiff-Type Breeds. Urine testing is required for complete results on intact male dogs over 2 years of age. Collect urine as a free catch while the dog is urinating. A new, clean disposable pie plate or clean disposable cup is a convenient collection vessel. Urine can then be transferred to a standard urine collection/transport tube, available from a veterinarian's or physician's office. Please send between 5-10 cc of urine. If sample must be held for greater than 24 hours, please freeze the sample after placing the urine tubes in Ziploc™-type sealable plastic bags (in case the tubes break during freezing). Urine must be shipped chilled with frozen freezer packs in an insulated container with overnight delivery. Do NOT use US Postal Service. Track the package and have the shipping company send an email notification to [caiff@vet.upenn.edu](mailto:caiff@vet.upenn.edu) so we can make sure your package has arrived in the laboratory.

**Ship sample(s) to:** Dr. Paula Henthorn / Cystinuria DNA Test  
Ryan Veterinary Hospital, Rm. 4027  
University of Pennsylvania  
3900 Delancey St.  
Philadelphia PA, 19104-6010  
Phone No. (for FEDEX) 215-898-5703

ALL signed reports are e-mailed to the owner.

**Have you included?**  Signed submission form  Copy of dog's registration form  Payment (US DOLLARS)  
 Blood or two cheek brush samples  Urine specimen  Frozen freezer pack

**NOTE: Please Do NOT submit samples that will arrive on weekends or between Christmas and New Years Day.**

PLEASE ALLOW 6-8 WEEKS FOR RESULTS TO BE PROCESSED

Last update 1/3/13