

# Request for Immunohistochemistry

University of Tennessee  
 College of Veterinary Medicine  
 Department of Pathobiology  
 www.vet.utk.edu/immunochem/

### Mailing Address

2407 River Drive, Room A119  
 Knoxville, TN 37996-4542

For questions, call: LaDonna Mrkonjich  
 865-974-1593

### Patient Information

Patient Name \_\_\_\_\_ Medical Records # \_\_\_\_\_ Species \_\_\_\_\_

Circle One : Bx Nx T R Pathology Number \_\_\_\_\_ Tissue \_\_\_\_\_

Pathologist/Resident/Clinician \_\_\_\_\_

Brief Clinical History	Histopath Diagnosis
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### Billing Information

In-House Responsible Service \_\_\_\_\_ (eg Oncology, Medicine, Surgery)

Outside Referring Vet \_\_\_\_\_ (Address)

Research \_\_\_\_\_ (Acct. #)

**Antibodies-Check Below** Cost: Individual \$45 3-Panel Run\$120 5-Panel Run\$200 Total Cost \_\_\_\_\_

CD3	T-Cell	c,f,e	Factor VIII (Von Willebrand factor)	c,f
CD79a	B-Cell	c,f,e	Melan-A	c
CD18	Histiocyte	c,f	S100	c,f
Lysozyme		c,f	NSE(Neuron specific enolase)	c,f
C-kit (CD117)		c	Synaptophysin	c,f
Cytokeratin-AE1/AE3		c,f,e	GFAP (Glial fibrillary acidic protein)	c,f
Vimentin		c,f,e	ER	c
Desmin		c,f	PR	c
Smooth Muscle Actin		c,f	Cox-2	c,f
Ki-67 (clone MIB-1)		c	PCNA (Proliferating cell nuclear antigen)	c
			AgNOR (Nucleolar organizer region-silver stain)	

\*c=canine,f=feline,e=equine

Comments on IHC

Diagnosis

Signature of Pathologist \_\_\_\_\_

### LAB USE ONLY

Date In \_\_\_\_\_ Date Out \_\_\_\_\_

Completed By \_\_\_\_\_

Run # \_\_\_\_\_

Order# \_\_\_\_\_

Acc# \_\_\_\_\_

**Note: Pathologists please return completed forms to IHC Lab.**