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| Livershunt Research Swab Submission Form**Request DNA Diagnostic****University Clinic of Pet Medicine** |
| **Animal Data****Animal TypeBreed****Registered Name****Date of Birth****Sex****KC Reg. No.****Sire:****Dam:** | DogIrish Wolfhound  Male / Female    | **Owner Data**NameAddressPost CodeCountryEmail: |      United Kingdom  |
| **How is this dog related to Livershunt** | Affected ⬜ Sire ⬜ Dam ⬜ |
| Indication |  |
|  | As Part of Research Project Yes ☑No ⬜Prof. J. RothuizenExclusively used for this purpose. |
| Date Swab Taken |   |
|  | All individual information will be used strictly confidentially by the researchers and not be disclosed to any other party. I (owner) agree that isolated DNA can be used for research purposes only.Signature (Owner)Date  |

Please return completed form to:

Attn. Frank Steenbeek,
Utrecht University Faculty of Veterinary Medicine, Pet Biochemical Lab, Yalelaan 104, 3584 CM Utrecht, The Netherlands.