

Canadian Animal Blood Bank Inc.
AB 71 – 2055 Notre Dame Avenue
Winnipeg, MB R3H 0J9

Phone: (204) 632-2586
Fax: (204) 632-4859



BLOOD TYPING REQUISITION

Owner Name: _____ **Pet Name:** _____

Owner Address: _____ **Species:** _____

_____ **Breed:** _____

Age (yrs): _____

Requested by: _____ **DVM**

Clinic _____

Clinic Address: _____ **Phone:** _____

_____ **Fax:** _____

Date sample drawn: _____ **By (initials):** _____

1. 1 mL of fresh (less than 1 week old) whole blood drawn in EDTA is required for testing. Store sample in fridge.
2. In Winnipeg, courier service available Monday to Friday. Please call the Canadian Animal Blood Bank to arrange pickup (or use your preferred courier). Samples may be mailed in sturdy containers. Avoid outside mailboxes.
3. Invoice will be issued with result hardcopy.

Blood Bank Use Only

Test method used/ manufacturer, lot#, expiry date:

Results:

Comments:

Date: _____ Tech: _____

Issued: Invoice# _____ Chart label Tag Tag # _____