

Stern's Laboratory Sample Submission Information

Sample submission requirements:

- 1.) An EDTA blood sample (2-3ml in a purple top tube)
- 2.) A 3 generation pedigree if available
- 3.) A copy of the cardiologist's echocardiogram report
- 4.) Filled out enrollment form

Please mail samples to:

**Stern Lab c/o Eric Ontiveros
UC Davis School of Veterinary Medicine
Dept. of Medicine and Epidemiology
2108 Tupper Hall
One Shields Ave
Davis, CA 95616**

Blood drawn does not need to be mailed back with an ice pack or be shipped overnight. Samples can be shipped via standard mail, FedEx, or UPS. Please send your samples in a padded package with the pedigree, veterinary report, and enrollment form.

Contact Information

Principal Investigator

Joshua Stern

Laboratory Personnel

Eric Ontiveros

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(530) 752-4892

SUBMISSION FORM FOR SAS DNA GENETIC RESEARCH

Canine Details: (Owner to Complete)

KC Registered Name: _____

Call Name: _____

KC Registered No.: _____ Which KC?: _____

Breed: _____ Sex: _____ Date of Birth: _____

Clinical Details: (Please include all required information in the shipment. **Please read the comment on the bottom of the form**)

Cardiologist Name: _____ Cardiology Exam Date: _____

Was sedation used? _____ Does the dog have a heart murmur? _____ If so, what grade? _____

Is *Aortic Insufficiency* or *Aortic Regurgitation* mentioned on the report? _____

Is *Mitral Insufficiency* or *Mitral Regurgitation* mentioned on the report? _____

Left Ventricle Measurements (*LV posterior* or *LV free wall in diastole*; *Interventricular septum in diastole usually in mm or cm*):

LVPWd: _____ IVSd: _____

Maximal Aortic Outflow tract velocity in meters/second, by subcostal continuous wave approach:

Normal (<1.9 m/s) _____ m/s **Equivocal** (1.9-2.5 m/s) _____ m/s **Affected** (>2.5 m/s) _____ m/s

Maximal Pulmonic Outflow tract velocity in meters per second:

Normal (<1.5 m/s) _____ m/s **Equivocal** (1.5-2.0 m/s) _____ m/s **Affected** (>2.0 m/s) _____ m/s

Family History of SAS or PS?: _____

Enclosed: (Owner to Complete)

___ Blood sample (3-5ml in an EDTA tube)

___ 3 to 5 generation pedigree

___ Copy of the cardiologist echocardiogram report

Return Address:
Stern Lab (c/o Eric Ontiveros)
UC Davis School of Veterinary Medicine
2108 Tupper Hall
One Shields Ave
Davis, CA 95616

Owner Name: _____ Email _____ Phone: _____

I hereby consent that the sample submitted for testing is of the dog described above. I accept that the designated institution undertaking the SAS/PS Research has my permission to use this sample for testing. I understand that the designated institution will not publish either my dog's name or my details.

Signature: _____ Date: _____

**Enrollment by other ACVIM Cardiology Diplomats is permitted. In order to utilize echocardiographic screening data from other centers the following information must be provided: Aortic flow velocity in m/sec obtained by continuous wave Doppler from a subcostal window. The presence or absence of mitral valve regurgitation and structural changes must be noted. The pulmonic flow velocity by continuous wave Doppler must be provided. An assessment of heart function must be included. The presence or absence and relative severity of left ventricular hypertrophy and aortic insufficiency must be noted. Questions regarding these requirements can be directed to: sterngenetics@ucdavis.edu
Please include official echocardiogram report with this form**