Canine Cyclosporine Pharmacodynamic Assay (Immune Function via PCR Assay for IL-2) Please type in information and then print it. If form is filled in by hand, please use only capital letters to fill the blanks.

Veterinarian Personal Information

Name and Clinic Address	Telephone	Fax	Email

Name and Clinic Address			Telephone		Fax		Email				
Report results via (chose one	e): 1	Email		Fax							
Patient Information											
Dog's Name						Owner's Name					
Case/Ref. Number	Breed		Age (Age (Years)		Weight (Kg)		Gender (M/F) Neu		tered (Y/N)	
_				g ((g (g)					
Current Diagnosis											
Current History (please fill in all the necessary information) NOTE: Medication history goes in following section.											
Changes from previous hist (if previous samples submitted please fill in all significant chan	,										
Clinical Signs Controlled?	In Remission? (Y/N, plus extra details if needed)										
Current Treatment											
Drug Name (excluding cycl	osporine)	Dose (n	ng) Frequ	iency	Drug N	lame			Dose (mg)) Frequency	
1.			Every	hrs	6.					Everyhrs	
2.			Every	hrs	7.					Everyhrs	
3.			Every	hrs	8.					Everyhrs	
4.			Every	hrs	9.					Everyhrs	
5.			Every	hrs	10.					Everyhrs	
Sample Information			•		·						
Date of Collection (m/d/y)		Ti	me (am/pm)			How	Many H	I <u>ours</u> AFTER C	yclosporine .	Administration?	
Cyclosporine Current Treat	ment (chec	k relevan	t box):								
Atopica® Neoral®				Sand	Sandimmune®			Compounded	Generic		
Monufacturer	ultramicr	onized)?	Yes		No			Don't Knov	V		
Manufacturer Compounding Pharmacy (d	nly for com	mounded c	vclosnorine)								
Dose (mg/kg)	Frequency			Start Date (m/d							
······································]	Every	_hrs								
Any Side-effects Observed? (If yes, please cite):	Yes 🗆	No 🗆									

- Sample Required: Minimum of 3 mL of unspun, whole blood needed per sample in a lithium-heparinized, or sodium-heparinized (orange-top, or green-top) tube ONLY. Please do not use EDTA tubes. Blood beyond 3mL is always appreciated.
- Cost of the assay is \$125 per submission.
- Samples should be submitted at least one week after commencing cyclosporine therapy or one week after making a cyclosporine dosage adjustment.
- Sample can be submitted earlier, at any time during first week of dosing, but please contact our clinicians first to discuss.
- For dogs on twice daily dosing, we request a single <u>peak</u> sample be submitted (2-3 hours post-dosing).
- For dogs on once a day dosing, we request a <u>peak</u> (2-3 hours post dosing) as well as a <u>trough</u> sample (right before the next dosage) in order to determine the amount of immune suppression and recovery that is occurring in the individual animal during the dosing interval. (\$125 for both samples)
- Sample should be chilled but not frozen, so sample is best submitted double-bagged with an icepack in an insulated container and shipped within a Styrofoam box.
- Mailed samples should be shipped for overnight delivery via UPS, or FedEx, as samples must be processed within 48 hours of blood collection. If it's an option, please do not use USPS.
- Mailed samples should be received by our lab Tuesday through Thursday. Samples should not be received on Monday, or Friday or be sent during holidays.
- Results are available typically by late Thursday afternoons of the week after the sample arrives. We will contact the veterinarian with results.
- You do not need to set up an account prior to submission of samples. Invoices will be mailed to you at the end of each month.
- We can only accept samples from dogs. We cannot use this assay in samples from cats.

Shipping Address: Diagnostic Laboratory Services

Attn: Archer/Mackin Pharmacodynamic Laboratory
Mississippi State University College of Vet Medicine
240 Wise Center Prive

240 Wise Center Drive Mississippi State, MS 39762

CONTACT

Santosh Kumar T K, Senior Research Associate: skt50@msstate.edu; (662) 325-1439 (laboratory) (662) 312-8836

Please feel free to contact us if you have any questions regarding sample submission, or results.

CLINICIANS

Dr. Todd Archer, Associate Professor: <u>tarcher@cvm.msstate.edu</u>; (662) 325-1226

Dr. Andrew Mackin, Professor and Department Head: mackin@cvm.msstate.edu; (662) 418-3277