



MISSISSIPPI STATE UNIVERSITY
College of Veterinary Medicine



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

Report results via (chose one): Email Fax

Patient Information

Dog's Name			Owner's Name		
Case/Ref. Number	Breed	Age (Years)	Weight (Kg)	Gender (M/F)	Neutered (Y/N)
Current Diagnosis					
Current History (please fill in all the necessary information) <i>NOTE: Medication history goes in following section.</i>					
Changes from previous history? (if previous samples submitted, please fill in all significant changes)					
Clinical Signs Controlled? (Y/N)			In Remission? (Y/N, plus extra details if needed)		

Current Treatment

Drug Name (excluding cyclosporine)	Dose (mg)	Frequency	Drug Name	Dose (mg)	Frequency
1.		Every ___ hrs	6.		Every ___ hrs
2.		Every ___ hrs	7.		Every ___ hrs
3.		Every ___ hrs	8.		Every ___ hrs
4.		Every ___ hrs	9.		Every ___ hrs
5.		Every ___ hrs	10.		Every ___ hrs

Sample Information

Date of Collection (m/d/y)	Time (am/pm)	How Many Hours AFTER Cyclosporine Administration?

Cyclosporine Current Treatment (check relevant box):

<i>Atopica</i> ®	<i>Neoral</i> ®	<i>Sandimmune</i> ®	Compounded	Generic
Modified (microemulsified, ultramicrozoned)?		Yes	No	Don't Know
Manufacturer				
Compounding Pharmacy (only for compounded cyclosporine)				
Dose (mg/kg)	Frequency	Start Date (m/d/y)		
	Every ___ hrs			
Any Side-effects Observed? Yes <input type="checkbox"/> No <input type="checkbox"/>				
(If yes, please cite):				

- *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 peak sample be submitted (2-3 hours post-dosing).*
- *For dogs on once a day dosing, we request a peak (2-3 hours post dosing) as well as a trough 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 Drive
Mississippi State, MS 39762*

CONTACT:

Lakshmi Narayanan, PhD

Senior Research Associate

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Please contact Lakshmi directly with any questions regarding sample submission or results.

CLINICIANS

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

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