



dr. van haeringen laboratorium b.v.

SUBMISSION FORM GENETIC PROPERTIES

Please fill out this form completely.

Sender of sample

Name*		Phone	
Adress*		E-mail	
City*		Telefax	
Zip code*		VAT reg. number	
Country*		Client number	

* obligatory

Requested analysis

Cattle

- 534 Beta Casein A1, A2
- 535 Beta Casein A1, A2, A3, B, C
- 525 Beta Lactoglobulin
- 530 Kappa Casein
- 520 BLAD
- 550 CVM
- 340 Dexter Achondrodysplasia
- 330 DUMPS
- 350 Double muscling
- 300 Freemartinism
- 617 Mulefoot
- 310 Translocation 1/29¹⁾
- 900 Red factor
- 901 Telstar factor
- 536 Fishy off-flavour
- 541 Protoporphyrin

Horse

- 903 Tobiano factor
- 904 Red-black factor
- 713 Cream dilution factor
- 705 HYPP
- 706 Icterus
- 902 OVERO
- 704 SCID
- 310 Karyotyping¹⁾
- Cat**
- 714 FeLV
- 715 FIV
- 711 PKD
- 712 Bloodgroup determination

Pig

- 578 A-FABP
- 577 H-FABP
- 580 Karyotyping¹⁾
- 579 RN
- 576 PSS
- 575 Gentec-IGF2
- 581 E-coli F4 ab/ac
- Bird**
- 720 Chlamydia psittaci²⁾
- 718 PBF²⁾
- 719 Polyoma²⁾
- 302 Sex determination
- Sheep**
- 905 Scrapie susceptibility
- 906 Booroola gene

Dog

- 701 Coppertoxicosis
- 723 MDR1
- Dog USA³⁾**
- 709 CLAD
- 710 CEA
- 702 GM1
- 900 Coat colour
- 707 Narcolepsy
- 700 PRA
- 722 VWF
- 717 PFK
- 721 CL
- Other**
- 302 Sex determ. Hyena
- 999 Sex determ. Sloth
- 999 Sex determ. Ant eater
- 999 Sex determ. Capybara

1) For this test fresh blood is required. Contact VHL before submission.

2) Submission only by veterinarian

3) For this test additional instructions are necessary; please contact VHL.

Animal information

Breed		Date of Birth	
Name		Sex	
Registration number		Coat colour	
CHIP / Tattoo		Nose colour (dog)	
VHL-ID (if known)			

Remarks: Bitte senden Sie eine Kopie des Ergebnisses an den DVD / Please send copy of result to German Dexter Association (Clientnr. 3871).

- Please use one form per sample
- Mark sample with complete registration number or name

Herewith I confirm that the submission form has been filled out correctly and that I have received and accepted the General Conditions VHL 2006.

City _____ Date _____

Name _____ Signature _____

