

Gluck/Fenway Friesian Genetic Research Initiative

One or two 10-12 ml draw blood tubes with EDTA (purple top) or acid-citrate-dextrose (ACD yellow top) anticoagulant will provide plenty of DNA.

The blood may be stored in the refrigerator if it cannot be shipped right away but try to ship it within 3 days of collection. Blood must be shipped in a leak proof container-veterinarians often have foam blood tube shippers to prevent breakage. Place the shipper in a plastic bag or place the blood tubes in a plastic bag before packing them. If you don't have blood tube shippers, use a regular box but pack as you would if you were shipping any glass item, and again, put the tubes in a ziplock bag. **Insert copy of registration papers and following horse/owner submission form in bag with sample.**

It is not necessary to include a cool pack if the samples are shipped by a 1-3 day service.

Ship to the address below:

Kathryn T. Graves, PhD
Associate Clinical Professor
GENETIC TESTING AT GLUCK
341 Gluck Equine Research Center
University of Kentucky
Lexington, KY 40546-0099
PH: 859-218-1193
<https://getgluck.ca.uky.edu/>

Copy of horse's registration papers must also be submitted with form.

Horse's Name _____
Registration Number _____ Registry _____

Age _____ Weight _____ Height _____
Tattoo/Brand _____ Other Markings _____

Gender _____ If gelded, date of castration _____

If mare, in foal Y/N Due date _____

If a mare, has she had any foals? If yes, please list name and registration number below:

When did symptoms start? _____

Any known full siblings or half siblings? ____ Yes ____ No ____ Unknown

If yes, please list sibling's name and registration number if available:

Full Sibling _____

Full Sibling _____

Half Sibling _____

Half Sibling _____

Owner's Name _____

Phone - Home _____ Cell _____

Email _____

Address _____

City _____ State _____ Zip Code _____

Current Veterinarian _____

Phone _____ Email _____

Owner agrees to include access to all diagnostics



Research Sample Submission Form

Genetic Testing at Gluck/ 108 Gluck Equine Research Center/Lexington
KY/ 40546-0099
859-218-1165

Horse's Name or ID (registered names are not required)

Breed: FRIESIAN

Owner's Name: _____

Address: _____

Phone: _____ Email: _____

STUDY: Genetic Basis of Megaesophagus and Aortic Aneurysm in Friesian Horses

I certify that I am the owner of the above horse and that I voluntarily submit material from this animal to be used for the purpose of research at the University of Kentucky. I understand that I shall have no claim to monetary compensation should use of this sample result in commercial testing applications. Confidentiality will be strictly maintained for all submitted samples.

X _____ Date: _____