

# Feline Hypertrophic Cardiomyopathy (HCM) Genetic Testing

Send this form with swabs or an EDTA blood tube to:

**Veterinary Cardiac Genetics Lab**  
**NCSU CVM**  
**1060 William Moore Drive, Room 228**  
**Raleigh, NC 27607**



Visit our website at:

<https://cvm.ncsu.edu/genetics/submit-dna-testing/>  
 To request swab collection kits, please visit:  
<https://cvm.ncsu.edu/genetics/cheek-swab-request/>

Submitted by:  Owner/Breeder  Veterinary Clinic

Please indicate what sample type you are submitting:

- Submitting SWABS:** Please submit 2 swabs per dog. After swabbing the dog's cheek, please return swab to package and label with the SAME name written on this form. Please **DO NOT TAPE** swabs to submission forms.
- Submitting BLOOD:** Provide a labeled EDTA tube with 1-3 mls of blood (double package to prevent spillage). The blood can be shipped at room temperature. The DNA is very stable and does not require refrigeration for our purposes.

*Additional forms and information can be found at <https://cvm.ncsu.edu/genetics/submit-dna-testing/>*

Maine Coon Mutation  Ragdoll Mutation  Both tests

		F <input type="checkbox"/> FS <input type="checkbox"/> M <input type="checkbox"/> MC <input type="checkbox"/>	
Cat's Name (registered or call name)	ID # (optional)	Gender (please check one)	D.O.B. or age
Owner Name	Business Name (if sample is being submitted by breeder or veterinarian)		
Address	City	State/Province	Zip Code
Phone Number	Fax Number (optional)	Email Address - Results will be sent by email <b>PLEASE PRINT CLEARLY</b>	

**Price per cat for single Maine Coon or Ragdoll test: \$35.00    Price per cat for MC/RD combo test: \$60.00**

**PAYMENT OPTIONS:**

**If paying by CREDIT CARD:** Please use our university payment web site:  
<https://controller.ofa.ncsu.edu/cash-services/non-student-credit-card-payments/>

Once on the website you only need to fill out the **required** fields:  
 -Payment Purpose: You **MUST** enter "**Cardiac Genetics**" in the Payment Purpose field\*  
 Please include printed confirmation page with samples or provide confirmation number:

**Amount:** \$ \_\_\_\_\_ - **Payment Confirmation #:** \_\_\_\_\_

**If paying by CHECK:**  
 Please make checks out to "NCSU Cardiac Genetics".  
 Checks can be stapled to top left corner of this form and sent in with sample

**\*\*\*If you are not seeing results in your inbox, please check your spam folder.\*\*\***



**Optional:**  
 Has this cat or any direct relative of this cat ever been diagnosed with HCM? \_\_\_\_\_

**Date of last echo:** \_\_\_\_\_ **IVSd:** \_\_\_\_\_ **LVIDd:** \_\_\_\_\_ **LVIDs:** \_\_\_\_\_ **FS%:** \_\_\_\_\_