

**Jack-Parson-Russell Terrier**  
**Neonatal Ataxia (NNA) Testing Request**  
**For DNA samples already in the collection at the University of Missouri**

**REQUESTING A NNA DNA TEST** – To order a NNA test for a Jack Russell, Parson Russell, or Russell Terrier that has been sampled previously for research projects or DNA banking at the University of Missouri-Columbia or thru the CHIC DNA repository (via blood sample), please follow these steps:

- 1) **Complete the form on the following page.** You may have supplied some of this info when the sample was originally submitted, but we ask that you take this opportunity to update the current status of this dog. If you did not send a pedigree copy when the original sample was submitted, please include that information as well.
- 2) **Choose how you want the results reported to you.** Please note that there is an additional charge for reports to be faxed or sent by surface mail.  
Result ONLY via email (no report certificate) ----- fee = \$25.00  
Report & certificate sent via email ----- fee = \$35.00  
Report & certificate sent via FAX or surface mail --- fee = \$45.00

**NOTE: If you plan to report the results to OFA for listing on their open database, you will need the report with certificate – the results only email (first option) will not be acceptable.**

- 3) **Send** the form, and a check or money order for the appropriate amount of US funds, payable to “University of Missouri”, or credit card info, to this address;

Dr. Gary Johnson – NNA Testing  
320 Connaway Hall  
University of Missouri  
Columbia, MO 65211

If paying by credit card, you may scan and email the request form to [HansenL@missouri.edu](mailto:HansenL@missouri.edu), or fax to 573-884-5414, and call us at 573-884-3712 with credit card information – please do NOT email or fax credit card numbers, it is not secure!

Please allow about 2 weeks turnaround time from the day requests arrive at our lab. We are not able to accommodate rush orders for this test. Please plan appropriately if testing potential breeding stock.

**PLEASE NOTE!** – This order form is ONLY to be used to request NNA test results for dogs for which a DNA sample from a blood sample is **ALREADY IN THE COLLECTION at the University of Missouri-Columbia** as of June 1, 2019. Samples sent to other laboratories are not eligible. Blood samples sent for the CHIC DNA Repository ARE eligible, swab samples sent for the CHIC DNA Repository or from previous testing via OFA are NOT eligible, tail or tissue samples are NOT eligible.

To test dogs NOT already sampled at UMC, there are 2 options:

- 1) Puppies that are suspected to be affected with NNA are eligible for a free DNA test thru December 31, 2019. Please contact Liz Hansen – [HansenL@missouri.edu](mailto:HansenL@missouri.edu) or 573-884-3712 for further information and submission requirements.
- 2) Send a blood sample, frozen semen, or frozen tissue to the UMC lab. Please contact Liz Hansen – [HansenL@missouri.edu](mailto:HansenL@missouri.edu) – for instructions and form.

**If you need clarification**, or have any questions about any of these procedures, please contact Liz Hansen by email ([HansenL@missouri.edu](mailto:HansenL@missouri.edu)), phone (573-884-3712), or regular mail (321 Connaway Hall, University of Missouri, Columbia, MO 65211).

**Thank you** for your cooperation and participation!

# NNA TEST REQUEST FOR SAMPLES IN UMC COLLECTION

Sample was: Blood - other \_\_\_\_\_

Breed: Jack – Parson - Russell Terrier

Registered Name \_\_\_\_\_

Call name \_\_\_\_\_

Reg# \_\_\_\_\_ Birth Date \_\_\_\_\_

Male / Female - - Intact / Neutered

Microchip or Tattoo: \_\_\_\_\_

Color \_\_\_\_\_

**Test Being Requested: NNA – neonatal ataxia**

Owner: name \_\_\_\_\_

Veterinarian \_\_\_\_\_

address \_\_\_\_\_

address \_\_\_\_\_

city-st-zip \_\_\_\_\_

city-st-zip \_\_\_\_\_

phone (day) \_\_\_\_\_

phone \_\_\_\_\_

phone (eve) \_\_\_\_\_

cell \_\_\_\_\_

Fax \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**\*\*\*\*Results are reported via email – please provide complete, legible email address!!\*\*\*\***

**Report test results to (please circle):** Owner    Veterinarian    Both

Does this dog exhibit any of the following conditions? (*Please attach history for any Yes answer*)

Y - N Allergies

Y - N Digestive difficulties

Y - N Arthritis

Y - N Heart Problems

Y - N Autoimmune Disorders

Y - N Hernia (where? \_\_\_\_\_ )

Y - N Bite or Tooth Abnormalities

Y - N Reproductive Problems

Y - N Cancer / Tumors

Y - N Seizures

Y - N Cataracts / Vision Problems

Y - N Skin / Coat Problems

Y - N Deafness / Hearing Impaired

Y - N Skeletal Abnormalities (Hip Dysplasia, etc.)

Y - N Hindlimb weakness/paralysis

Y - N Temperament Problems (shy, aggressive, etc.)

other (please list): \_\_\_\_\_

Comments / Questions / Concerns? \_\_\_\_\_

I understand that the results of this test will be reported only to the owner listed on this form and to the veterinarian (if requested) listed here, via email or FAX; and I have supplied complete and accurate information, to the best of my knowledge.

Signed: \_\_\_\_\_

date \_\_\_\_\_

**PAYMENT INFORMATION:**  Check or money order payable to “University of Missouri” enclosed

OR  Charge to VISA-MC-Discover-AmEx Card# \_\_\_\_\_

Cardholder name: \_\_\_\_\_ Exp Date: \_\_\_\_\_