

Instructions for Online Autopsy Submissions

The following tutorial provides step-by-step instructions to access our online portal which enables your practice to submit autopsy requests directly to the OSU CMV Pathology department.

Several important things to note when submitting autopsies and talking with the owner:

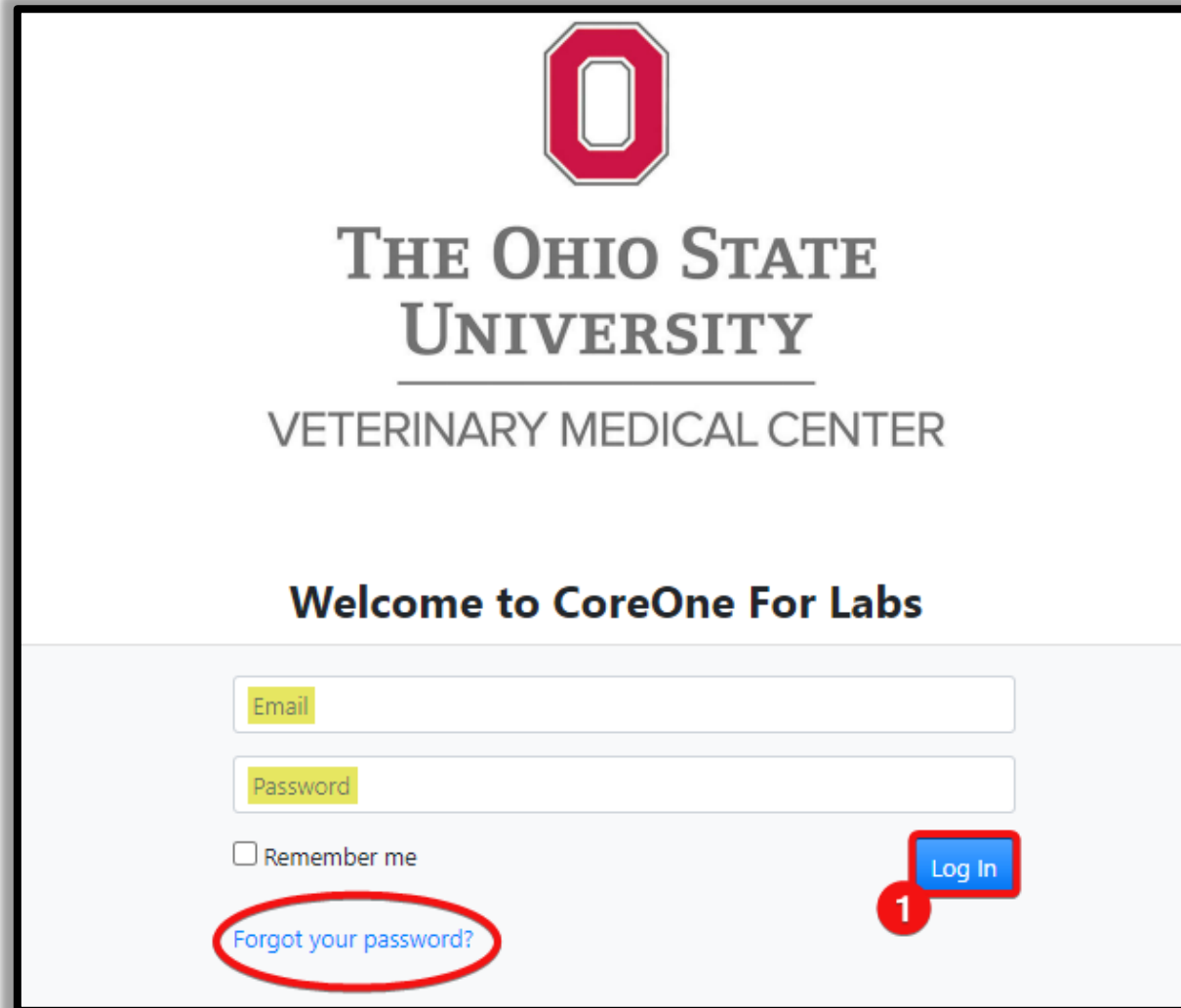
- The Veterinary Medical Center will bill the referring clinic for the cost of the autopsy, so you will be responsible for collecting all fees from your client. (see pricing sheet https://vet.osu.edu/vmc/sites/default/files/images/external_autopsy_fees_7-2023_proof1.pdf). The VMC cannot accept payment directly from an owner.
- No bodies can be accepted without an online submission, so please complete the submission prior to the transport of the body.
- For all submissions you must indicate an aftercare choice (private vs. communal). No keepsakes (pawprints, fur clippings, mane and tail, etc.) are available from our cremation provider following autopsy due to biosecurity concerns. Therefore, those must be collected by your clinic prior to transport if that is something that the owner desires.
- Results will be released to the practice. If the veterinarian has questions regarding results, please reach out to the Pathology department via email at osuappath@cvm.osu.edu or call 614-292-5661.
- Questions or difficulty logging in, please email CVM-OSUVETReferral@osu.edu M - F, 8 a.m. – 5 p.m. or call 614-292-3551, anytime to speak with a member of the Client Services team.

Thank you for your support of our programs!

Follow the steps on how to submit an *autopsy request* on the CoreOne Portal.

Step 1: To log in, enter your clinic's email and password. Then click “*Log In*”.

If logging in for the first time or if password has been forgotten, click “*Forgot your password?*”



THE OHIO STATE
UNIVERSITY

VETERINARY MEDICAL CENTER

Welcome to CoreOne For Labs

Email

Password

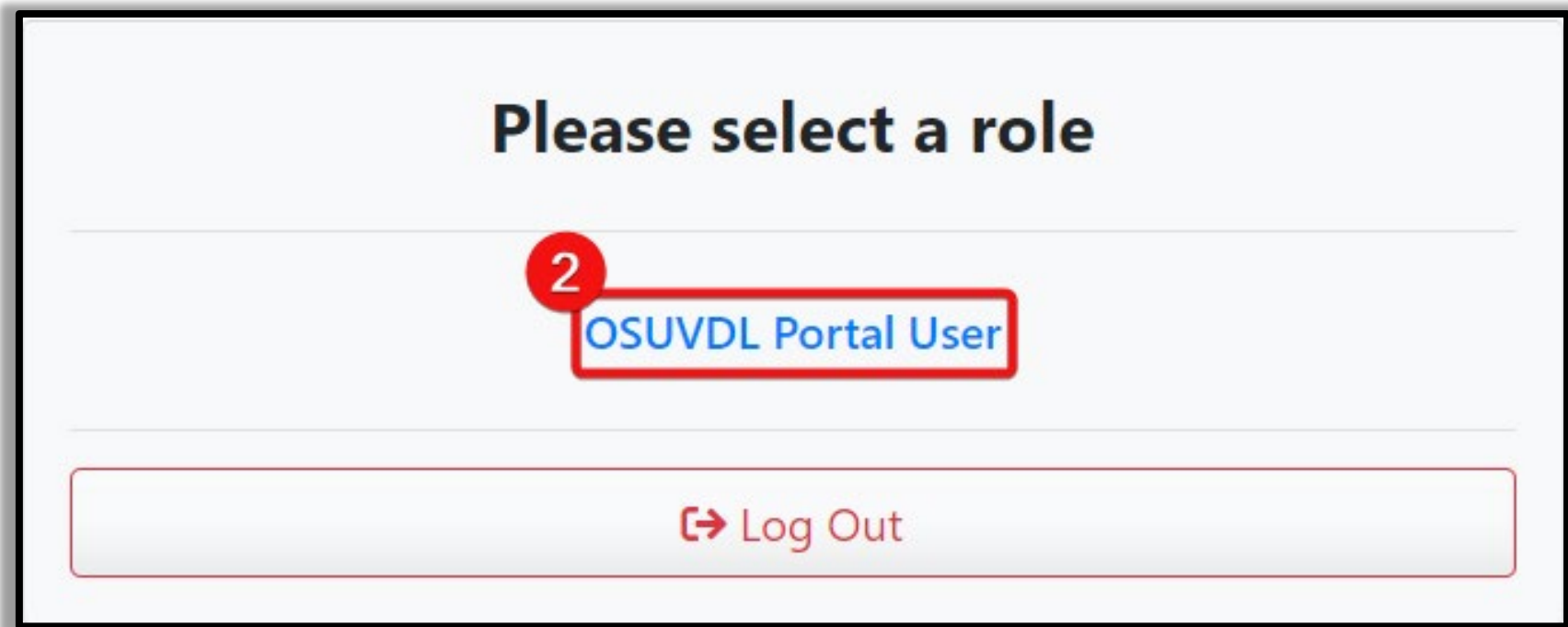
☐ Remember me

[Forgot your password?](#)

Log In

1

Step 2: If prompted to select a role, click on
“OSUVDL Portal User”.



Please select a role

2

OSUVDL Portal User

↪ Log Out

The image shows a web interface for selecting a role. At the top, the text 'Please select a role' is displayed in a bold, dark font. Below this, there is a list of roles. The role 'OSUVDL Portal User' is highlighted with a red rectangular border, and a red circle with the number '2' is placed to its left, indicating it is the correct choice for Step 2. At the bottom of the interface, there is a button labeled '↪ Log Out' in a red font.

Step 3: After logging in you will see a home screen as pictured below. Please click on “Submissions” which is circled in red. *Please note that this is a change.*

ohio.labs.tracefirst.com

Ohio State University Clinical Diagnostic Laboratories - Production PORTAL

OSUVDL Portal User | testtesterson1234@gmail.com

Home

Submissions

Animal Upload

Test Catalog

Help

TEST TESTERSON

1 To Be Submitted

0 Currently In Progress

0

0

Most Recent Submissions

Reference #	# Specimens	Status	Requested Tests
-------------	-------------	--------	-----------------

Most Recent Attachments

No attached documents

Filename	Size	Actions
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Step 3b. Next, select the “Bulk Upload Submission” button. (NEW) This will then open a form that you can enter your patient and owner’s information.

Ohio State University Clinical Diagnostic Laboratories - Production PORTAL

OSUVDL Portal User testtesterson1234@gmail.com

[Home](#) [Submissions](#) [Animal Upload](#) [Test Catalog](#) [Help](#)

Submissions

Bulk Upload Submission

New

Created after to Created before

Select test

Select Vet

Search

Filter

Started (1)

Submitted (0)

Lab Complete (0)

Displaying 1 Accessions

Reference number	Owner	# of Animals	Date Created	Receiving Lab	Status
2401113		0	January 11, 2024 02:28 PM		Started

Step 4: Under “*Submission details*” section, use the drop-down menu in the “*Receiving Lab*” text box and select “*OSU VMC Clinical Laboratories (C)*”.

Submission: 232051 Started

Back

Submission details

Receiving Lab *

OSU VMC Clinical Laboratories (C)

OSU VMC Dublin (D)

OSU VMC Marysville (M)

Spectrum of Care Clinic (S)

Check for Gross Autopsy

Previous Accession #

Carrier

Carrier Reference Number

Owner

> Owner Details

Veterinarian ⓘ

Attention Veterinarian ⓘ

Animals In Group

Comment

Leave a comment

Add Single Animal

Upload Multiple Animals

Upload Attachments

Save

Step 5: Click on the “*Owner Details*” drop down button.

Step 6: Enter all the known *owner’s information*.

Step 7: Click “+ *Add Single Animal*” button.

The screenshot shows a web form for adding a single animal. The form is divided into several sections. The top section is titled "Owner Details" and is highlighted with a red box and a red circle with the number 5. Below this is a search bar labeled "Search Existing Owner". The main section is a form for entering owner information, highlighted with a red box and a red circle with the number 6. This section includes fields for Name, Email, Phone, Fax, Address line 1, Address line 2, City, County, State, ZIP, Country, Latitude, Longitude, and Premises Number. The bottom section is for adding a single animal, highlighted with a red box and a red circle with the number 7. This section includes a button labeled "+ Add Single Animal", a button labeled "Upload Multiple Animals", and a button labeled "Upload Attachments".

Owner Details

Search Existing Owner

Name Bobby Knight

Email buckeye.1@osu.edu

Phone 123-456-7890

Fax

Address line 1 1925 Coffey Road

Address line 2

City Columbus

County

State Ohio

ZIP 43210

Country UNITED STATES (US)

Latitude

Longitude

Premises Number

Veterinarian

Attention Veterinarian

Animals In Group

Comment

+ Add Single Animal

Upload Multiple Animals

Upload Attachments

Step 8: Under “*Signalment*” section, type patient’s first and last name in “Number/Name” text box.

Use the drop-down menus to select patients required “*Species/Breed*” and “*Sex Code*”.

Animal Details

The Submission Type indicates the type of samples submitted

Submission Origin Type

Animal

▼ Signalment

8

Tag type

Number/Name

Brutus Knight

Note: To add secondary names/IDs for this animal, use the Add New Tag button. Additional animals must be entered individually using the Add Single Animal or Upload Multiple Animals buttons

+ Add New Tag

Species/Breed *

Canine :: Labrador Retriever

Sex Code *

Male Castrated (MC)

Age

12 Years

Weight

80 Lbs

Next

> Clinical History

Save

Step 9: Click on the “*Clinical History*” drop-down menu button.

Step 10: In the text box, enter the Clinical History of patient including any **risks of rabies, zoonotic diseases or recent chemotherapy use**.
Check the boxes beside “*Legal*” or “*Insured*” if applicable.

Step 11: Click the “*Save*” button.

The screenshot shows a web form for entering clinical history. A red box labeled '9' highlights the 'Clinical History' dropdown menu at the top left. Another red box labeled '10' encompasses the main text input area for 'Clinical History', 'Clinical Diagnosis', 'Illness Date', 'Death Date', and 'Treatment'. A third red box labeled '11' highlights the 'Save' button at the bottom right. The form contains the following data: 'Clinical History' is set to 'Clinical History'; 'Clinical Diagnosis' is 'Unknown.'; 'Illness Date' is '07/20/2023'; 'Death Date' is '07/24/2023'; 'Treatment' is 'Patient was euthanized at clinic.'; 'Legal' is checked; and 'Insured' is unchecked. A 'Back' button is located at the bottom left.

▼ Clinical History		
Clinical History	Patient arrived to clinic two days ago, was lethargic, not eating and not drinking. Owner noted patient was acting normal and then all of sudden appeared sick.	
Clinical Diagnosis	Unknown.	
Illness Date	07/20/2023	Death Date 07/24/2023
Treatment	Patient was euthanized at clinic.	
Legal	<input checked="" type="checkbox"/>	Insured <input type="checkbox"/>
Back	Save	

Step 12: Scroll to bottom of page and click on the “+ *Add Specimen*” button.

+ Add Single Animal

+ Add Specimen To All Animal/Groups

+ Add Tests To All Animal/Groups

Upload Multiple Animals

Upload Attachments

Animal Name: Brutus Knight

Edit

Delete

Breed	Canine :: Labrador Retriever
Sex Code	Male Castrated (MC)
Age:	Weight:

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+ Autopsy Record

+ Add Specimen

Duplicate Animal

Step 13: Click on the “*Specimen*” drop down menu and enter in all the required information:

“*Specimen Type- Animal (Animal)*”, the “*Transport Medium- Bag (Bag)*” and the “*Collection Date*”.

The screenshot shows a web form titled "Specimen Details" with a close button (X) in the top right corner. A red circle with the number "13" is positioned to the left of a red rectangular box that encloses the "Specimen" section of the form. This section includes the following fields:

- Specimen Type ***: A dropdown menu with "Animal (Animal)" selected. The label is circled in red.
- Specimen Type Description**: A text input field.
- Name**: A text input field.
- Transport Medium ***: A dropdown menu with "Bag (Bag)" selected. The label is circled in red.
- Collection Date ***: A date picker field showing "07/24/2023". The label is circled in red.
- Condition**: A dropdown menu.
- Temperature**: A text input field with radio buttons for "°C" (selected) and "°F".
- Weight**: A text input field with radio buttons for "g" (selected) and "units".

Below the red box, there is a "Next" button and a "Request Tests" link. At the bottom right of the form, there is a blue "Save" button.

Step 14: Click on the “*Request Test*” drop down menu and in text box, start typing “*autopsy*”. Then select the desired test based on your submission and *private vs. communal aftercare* options.

Note: “External” means the autopsy is coming from an outside clinic.

Step 15: Click the “*Save*” button.

Specimen Details

> Specimen

▼ Request Tests

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aut

AP. Autopsy - Preliminary Report (1025)

AP. Autopsy-EQ Non-Patient (89365)

AP. Autopsy-FA Non-Patient (89364)

AP. Autopsy-SA Non-Active Patient (and other <125 lbs.) (89363)

AP. External Autopsy - Equine > 125 lbs. Partial Private Cremation. (89377)

External Autopsy - Canine/Feline & Other < 125 lbs with communal cremation (89373)

External Autopsy - Canine/Feline with private cremation (89374)


Add Test

15

Save

**Step 16: If any, click “*Upload Attachments*” to add medical records/photos.
Then, click the “*Save*” button.**

[+ Add Single Animal](#) [+ Add Specimen To All Animal/Groups](#) [+ Add Tests To All Animal/Groups](#) [+ Upload Multiple Animals](#) [+ Upload Attachments](#)

 **Animal Name: Brutus Knight**

[Edit](#) [Delete](#)

Breed	Canine :: Labrador Retriever
Sex Code	Male Castrated (MC)
Age:	Weight:

>>Specimen: Animal



>>Specimen Name:

[Add/Edit Tests](#) [Edit](#) [Delete](#)

>>Specimen: Animal

>>Specimen Name:

[Add/Edit Tests](#) [Edit](#) [Delete](#)

  External Autopsy - Canine/Feline & Other < 125 lbs with communal cremation (89373)

[+Autopsy Record](#) | [+Add Specimen](#) | [Duplicate Animal](#)

16

Save

Step 17: Review your submission details. Then click the “*Complete Submission*” button.

This button can be found in either the bottom or top right corner of the page.

Submission Review

232051

Edit

Complete Submission

17

Started

Submission Valid

Dispatched

Received

In Progress

Finalized

Accession Info

Receiving Lab

OSU VMC Clinical Laboratories (C)

Gross Autopsy

No

Export Case

No

Previous Accession #

Carrier

Owner

Owner #

Name

Bobby Knight

Email

buckeyey.1@osu.edu

Phone/ Fax #

(123) 456-7890 / No Fax #

Address line 1

1925 Coggey Road

City/ State/ ZIP

Columbus 43210

Country

UNITED STATES

Client

Name

Becky B Test

Phone/ Fax #

No Phone# / No Fax #

Address line 1

5060 Dierker Apt D

City/ State/ ZIP

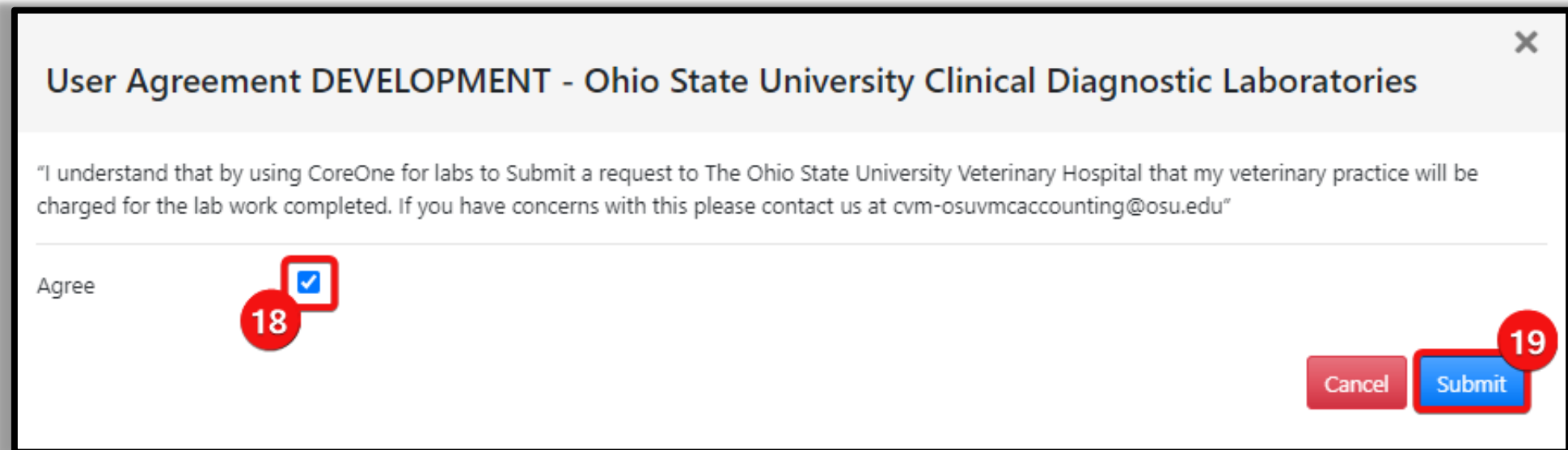
Columbus OH 43220

Country

UNITED STATES

Step 18: Read the User Agreement and click in the box to check mark “*Agree*”.
The veterinary clinic will be billed for the autopsy submission, not the owner.

Step 19: Click “Submit” button”.



User Agreement DEVELOPMENT - Ohio State University Clinical Diagnostic Laboratories

"I understand that by using CoreOne for labs to Submit a request to The Ohio State University Veterinary Hospital that my veterinary practice will be charged for the lab work completed. If you have concerns with this please contact us at cvm-osuvmcaccounting@osu.edu"

Agree ☒ **18**

Cancel **Submit** **19**

(Optional) Step 20: Click on “Print PDF” to print the submission request form.

Note: Once a submission has been made, the status will be set to “*Dispatched*”. Edits/Cancellation can still be done when the request is in this status.

Submission Successful

Print PDF

20

Submissions

New

Submitted after

to

Submitted before

Select test

Select Vet

Search

Filter

Started (0)

Submitted (2)

Lab Complete (4)

Displaying all 2 Accessions

Reference number	Owner	# of Animals	Date Submitted	Receiving Lab	Status	Invoices
232051	Bobby Knight	1	July 25, 2023 02:09 PM	OSU VMC Clinical Laboratories (C)	Dispatched	<div>CopyEditCancel</div>

Autopsy request forms can be printed to provide a copy to the owner.
Printed form is **NOT** required when dropping off the specimen at the hospital.

		Submission Form Ohio State University VMC
<small>All samples submitted to Ohio State University VMC for testing become the property of the agency and may be tested as part of state/federal surveillance programs, utilized for research purposes and/or development of new assays. Ohio State University VMC is unable to return samples to the client unless prior arrangements are made and approved by the agency Director or designee.</small>		
Submitted To: Address: 601 Vernon L Tharp Street Columbus, Ohio 43210 Ph: 614-292-3551 Ph: 614-292-1360	Submitted By: Address: 601 Vernon L Tharp Street Columbus, Ohio 43210 Ph: 614-292-3551 Ph: 614-292-1360	Pre Accession Ref# 232051
Owner: Bobby Knight Research Agreement #: Address: 1925 Coggey Road City: Columbus State: ZIP: 43210 Email: buckeyey.1@osu.edu Phone #: 123-456-7890 Fax #:	Account #: OSU_C015148 Clinic: Becky B Test Address: 5060 Dierker Apt D City: Columbus State: OH ZIP: 43220 Phone #: Fax #:	Accession # Client PO # Assignments Opened By Carrier Date Received Comment
Veterinarian: Attention Veterinarian: Gross Autopsy: No Export Case: No Attachments: Portal_Submission_Form_232051.pdf		
ANIMAL(S)		
ANIMAL #1 IDs: Brutus Knight Sex: Male Castrated (MC) Breed: Canine :: Labrador Retriever Age: Legal: Yes Insured: No Specimen #1 Specimen Name: Specimen Type: Animal (Animal) Transport Medium: Bag (Bag) Collection Date: 07/24/2023 Temperature: Requested Tests: No requested tests Specimen #2 Specimen Name: Specimen Type: Animal (Animal) Transport Medium: Bag (Bag) Collection Date: 07/25/2023 Temperature: Requested Tests: - External Autopsy - Canine/Feline & Other < 125 lbs with communal cremation (89373)		
Clinical History History: Patient arrived to clinic two days ago, was lethargic, not eating and not drinking. Owner noted patient was acting normal and then all of sudden appeared sick. Diagnosis: Unknown. Treatment: Patient was euthanized at clinic. Illness Date: July 20, 2023 Death Date: July 24, 2023		



Difficulty logging in: email CVM-OSUVETReferral@osu.edu or call 614-292-3551.
Questions regarding test results: email Pathology Department at osuappath@cvm.osu.edu or call 614-292-5661.