

*Equine reference ranges, interpretive reports and recommendations are based on a properly prepared hair sample — be sure that the hair is clean and dry before cutting it.*

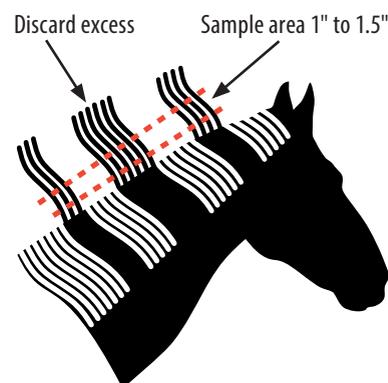
## Hair Sampling Instructions

*Sampling scissors should be high grade stainless steel or plastic to avoid micro contamination of the hair. This factor cannot be emphasized enough in order to avoid reporting inaccurate test results. Using a plated scissors (even a new one) will contaminate hair specimen with many of the metallic elements.*

**LOCATION:** The sample should be taken in small portions from several areas of the lower section of the horse's mane.

**LENGTH:** Cut hair as close to the skin as possible. The length of hair submitted should not exceed 1 ½ inches. Retain the proximal portion (closest to skin, see sample area in illustration) as it reflects the most recent metabolic activity. Discard the distal excess.

**AMOUNT:** The amount of hair necessary for an accurate elemental assay is 125 mg, or about one tablespoon full. Put sample into a **clean** paper envelope or plastic bag.



## What does it cost?

**Fee:** \$125

What you get:

1. Equine hair Tissue Mineral Analysis (hTMA) lab test results,
2. Nutrient mineral supplement recommendations.  
(The cost of purchasing supplements varies per dog and is not included in the fee)
3. Equine feeding information.

Option. Consultation with medically trained hTMA clinician: \$20 per 1/4 hour (via in-office, phone, email, or Skype).

## Instructions

Mail forms and hair sample to:

**Health Elite Clinic**  
34785 Fire Tower Road  
Bayfield, WI 54814

## Payment Options

1. Send a personal check with your mailed sample.  
— or —
2. Pay online with credit card - click "Square" below:



■ Information

Today's Date:.....

Please check if this is your horse's initial hTMA:

If this is a re-test, provide your previous LAB#:.....

Your Name:.....

Address:.....

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City:.....

State/Prov:..... Zip/Postal Code:.....

Phone:.....

eMail:.....

■ Animal Identification

Horse's name:.....

Breed:..... Age:.....

Stud:  Gelding:  Mare:  Filly:  Colt:

■ Primary Nutrition

Food:.....

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Supplemental Food:.....

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Supplements:.....

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■ Physical Activity

Type of work, performance or athletic activities:.....

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■ Current Medications

Is the horse currently taking anti-inflammatory drugs:  No  Yes

Is the horse currently taking analgesics (pain relief):  No  Yes

List current medications, and reason for taking each:

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■ Health Concerns

Describe:.....

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