

General Submission Form

UTAH VETERINARY DIAGNOSTIC LABORATORY

Utah State University and Utah Department of Agriculture and Food

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Laboratory use only

Accession No.: _____
Case Coordinator: _____
 Drop off FedEx UPS USPS MAIL
Accessioned by: _____
Date received: _____
Account name: _____
Amount: _____
Date paid: _____
Cold pack Yes, No, Melted, Fixed Fridge

Results to: Clinic Veterinarian Owner Other _____
Results by: Mail Fax _____ E-mail _____ Legal Case?
Individual to be billed: Clinic Veterinarian Owner Other _____

Veterinarian: _____
Clinic: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ FAX: _____

Owner: _____
Business: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

Species: _____ Breed: _____ SEX: M, F, Neutered Spayed Animals Age: _____

Animal ID/Name: _____ Sample type(s): _____ Sample No. _____
(For multiple animals, please provide a list)

Clinical history: _____

Test(s) requested: Tests as indicated below* Tests at pathologists' discretion

*The UVDL reserves the right to modify tests requested for more efficient case work-up and/or to send specimens to outside laboratories

Commonly requested tests listed below; please inquire for assays not listed

MOLECULAR:

- Avian influenza (AI) matrix qPCR
 - H5 H7 qPCR
- Avian paramyxovirus qPCR
- Bovine abortion panel (BVD & IBR)
- Bovine respiratory panel (BVD, IBR, BRSV, PI3 & coronavirus)
- Bovine Viral Diarrhea (BVD) qPCR
- Bovine enteric panel
 - Calf (rotavirus, coronavirus, E. coli F5, cryptosporidium, & Salmonella spp.)
 - Adult (coronavirus, BVD, Johne's & Salmonella spp., fecal flotation)
- Equine respiratory panel (EHV) qPCR (EHV-1, EHV-4, Influenza A virus)
- Equine herpesvirus (EHV) qPCR
 - EHV-1 EHV-1&4
- Johne's disease qPCR
- Tritrichomonas foetus qPCR
 - Pooled Individual
- Other: _____

PARASITOLOGY:

- Cryptosporidiosis
- Fecal flotation Egg count
- Giardia spp. ELISA
- Other: _____

PATHOLOGY:

- Field necropsy histopathology
- Necropsy
- Surgical biopsy
- Rabies
- CWD Scrapie IHC
- Other: _____

SERVICES:

- Cremation Incineration Disp.

BACTERIOLOGY:

- Aerobic culture
- Anaerobic culture
- Antimicrobial susceptibility
- Campylobacter culture
- Fungal culture
- Maldit-tof ID
- Milk culture
- Salmonella culture
- Water culture
- Other: _____

CLINICAL PATHOLOGY:

Please use Clinical Pathology Submission form

SEROLOGY:

- Avian influenza
 - AGID ELISA FluDetect
- Bluetongue ELISA
- Bovine leukosis ELISA
- Brucella abortus
- Brucella canis IFA
- Brucella ovis ELISA
- Brucella melitensis
- BVD antigen ELISA
- CAE ELISA
- CWD ELISA
- EIA ELISA
- Johne's disease ELISA
- Piroplasmosis
 - T. equi B. caballi
- Pregnancy test ELISA
- West Nile virus ELISA
- Other: _____

SUPPLIES:

- Trich PBS tubes: Quantity: _____
- BHI tubes: Quantity: _____
- Empty tubes: Quantity: _____
- Other: _____

Submitted by: _____

For laboratory use only
Accession Verified by: Initials _____ Date: _____