



## DIAGNOSTIC TEST SUBMISSION FORM

<b>Veterinary Practice:</b>	<b>Owner Name:</b>
<b>Herd Veterinarian:</b>	<b>Sample Collection Date:</b>
<b>Results to Vet?</b> <input type="checkbox"/> FAX <input type="checkbox"/> EMAIL <input type="checkbox"/> NO	<b>Results to Owner?</b> <input type="checkbox"/> FAX <input type="checkbox"/> EMAIL <input type="checkbox"/> NO
<b>Veterinary Fax/Email:</b>	<b>Owner Fax/Email:</b>

### Please Check all Tests Required

### ANIMAL ID'S (include days bred for BioPRYN®)

#### SEROLOGY

- BioPRYN® pregnancy test
  - Bovine    Caprine    Ovine    Bison
- BVD (serum or ear notch)
- Johnes
- Bovine Leukosis
- Neospora

#### MILK SAMPLES - CULTURES

- Staph aureus (Screen Only)
- Mastitis (Major Pathogens)
  - Add on Coliform Speciation
  - Add on Sensitivities

#### MILK SAMPLES - ELISA

- Johnes
- Bovine Leukosis

#### FECAL SAMPLES

- Fecal Flotation
- Rota/Corona/Cryptosporidium
- E.coli K99
- Johnes Acid Fast Stain

#### CULTURE

- Tritrichomonas foetus

#### OTHER TESTS

- Bulk Water Test

#### SWINE TESTS

- PRRS (ELISA)
- Mycoplasma hyopneumoniae (ELISA)
- PRRS/Mycoplasma hyopneumoniae combo
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#### LAB USE ONLY

Date Received: \_\_\_\_\_ Submission #: \_\_\_\_\_

Form #: Lab-427

(updated May 23/2018)