



Mammalian Submission Form

Animal Diagnostic Laboratory
Penn State University
Wiley Lane
University Park, PA 16802
Ph: 814-863-0837 FAX: 814-865-3907

Accession No. _____
Data Entry _____
Case Coordinator _____
Date Submitted _____
FOR LABORATORY USE ONLY

<http://adl.psu.edu> adlhelp@psu.edu

Owner: _____
Farm/Business: _____
Address: _____

County: _____
Phone: _____
Report Distribution: Do not send
E-mail: _____
FAX _____ US Mail

Submitter: (if other than owner/veterinarian)
Name: _____
Address: _____

County: _____
Phone: _____
Report Distribution: Do not send
E-mail: _____
FAX _____ US Mail

Vet/Field Agent: _____
Business: _____
Address: _____

County: _____
Phone: _____
Report Distribution: Do not send
E-mail: _____
FAX _____ US Mail

Other: _____
Business: _____
Address: _____

County: _____
Phone: _____
Report Distribution: Do not send
E-mail: _____
FAX _____ US Mail

Bill to: Owner Vet Practice Submitter Other
Account number: _____

Collection Date: _____

Animal Information: Name/ID: _____
Bovine (cow) Caprine (goat) Cervine (deer/elk)
Equine (horse) Ovine (sheep) Porcine (pig)
Camelid (llama/alpaca) Other _____
Age: _____ Adult Juvenile Fetus
Date of Death: _____ Natural Destroyed
Breed: _____ Sex: _____
Production Type: _____

Specimens Submitted:
(indicate number submitted)
Animal/Fetus _____
Blood: Serum/clotted _____
Anticoagulated _____
Feces _____
Fluid (type) _____
Head only _____
Tissue, fixed _____
Tissue Fresh _____
Other _____

Additional Animal Information:

Name	Age	Sex	Name	Age	Sex

Select One:

Necropsy or test at laboratory discretion: Indicate level of testing desired

Tier 1

Tier 2, please choose one:

I do not want testing beyond Tier 2

I approve testing beyond Tier 2. Additional testing is charged per test.

See website for complete pricing information (<http://adl.psu.edu>)

If no preference is marked, testing will be done at the discretion of the pathologist

History:

Perform only test(s) requested: please proceed to page 3 for test selection

A submission of specimens for diagnostic purposes constitutes your acknowledgement that some tests may be performed at other laboratories

For a complete list of available tests, see the website <http://adl.psu.edu>

Bacteriology/Mycology

Aerobic culture	Johne's (M. avium paratuberculosis)
Anaerobic culture	PCR Culture
C. perfringens toxin typing	Leptospira sp. PCR
Clostridium spp. FA (Blackleg screen)	Salmonella
E. coli	Sensitivity testing
Fungal culture	Other _____

Histopathology H&E Other _____

Parasitology

Cryptosporidium ELISA	Giardia ELISA	Lungworm	Fecal Flotation (McMaster)
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Serology

Bovine Viral Diarrhea Virus SN (antibody)	Bovine Leukosis Virus ELISA
Infectious Bovine Rhinotracheitis Virus SN	Johne's ELISA
Equine Herpes Virus 1 SN	Neospora ELISA
Brucellosis	Parainfluenza 3 Virus HI
Swine Influenza Virus HI	Other _____
Bovine Pre-purchase Panel (BLV, pi BVD, Johne's, Neospora)	
Bovine Respiratory Panel (BVD, BRSV, IBR, PI3)	
Bovine Reproductive Panel (BVD, IBR, Leptospira, Neospora)	
Porcine Reproductive Panel (Leptospira, Parvovirus, PRRS, Pseudorabies)	

Toxicology

Minerals (Complete)	Selenium
Minerals (Nutritional screen)	Vitamin E
Mycotoxins (foodstuffs only)	Other _____

Virology Please inquire for additional tests not listed below

<u>BVDV:</u> Ag ELISA (serum or Fresh ear notch)	pi Microplate VI	PCR	PCR Pooled
<u>Chlamydomphila spp.</u> PCR			
<u>Coronavirus</u> Bovine (enteric or respiratory)	Porcine (enteric or respiratory)		
<u>Equine Herpesvirus</u> PCR (EHV 1)	VI (EHV 1, 4)	<u>PRRS</u> PCR	VI
<u>Infectious Bovine Rhinotracheitis</u>	PCR VI	<u>Rabies</u>	
<u>Parainfluenza Virus VI</u>		<u>Rotavirus</u> ELISA (feces)	
<u>Porcine Circovirus</u> PCR VI		<u>Swine Influenza</u> PCR	
<u>Porcine Parvovirus</u> PCR VI		<u>TGEV</u> PCR	
Other _____			

Submission forms and additional information are available at <http://adl.psu.edu>