



Pennsylvania Animal Diagnostic Laboratory System Supplemental Blood Tube Identification Form

University of Pennsylvania
New Bolton Center
382 West Street Road
Kennett Square, PA
19348 (610) 925-6725

Pennsylvania State University
Animal Diagnostic Laboratory
Wiley Lane
University Park, PA 16802
(814) 863-0837

Pennsylvania Department of
Agriculture
Pennsylvania Veterinary
Laboratory
2305 North Cameron Street
Harrisburg, PA 17110-9408
(717) 787-8808

This form is only to be used in conjunction with the Avian Sample Submission Form PD AVIAN FORM 01

Accession # _____

Date Submitted: _____ Sample Collector: _____

Location Number: _____ Flock ID: _____

Blood Tube Identification*

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

*Please write the band number **or** sample # in the space corresponding to sample location in box.

Blood Tube Identification*

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

Box # _____ Pen/House # _____ Species _____

*Please write the band number (sample #) in the space corresponding to sample location in box.