

Application of examination: Direct samples (Blood, pharynx, fur, feces)

Date:

MicroBioS No. /
added by the Lab

Client:	Invoice to:	Client
Address:	other:	
Phone/FAX:	Report to:	
E-mail:		
PO-No.:		

Reference No.	No. sampled animals			Control examination (KU)
Animal No. /ID	Age			Entrance examination (EU)
Species/ strain	Sex	m:	f:	Special examination (SU)
Facility/origin	Sentinel	Yes:	No:	Quarantine (QU)

Sample material (please tick where appropriate):

<input type="checkbox"/>	Pharynx swab for Bact.	<input type="checkbox"/>	Pharynx swab for PCR	<input type="checkbox"/>	Blood (DBS; Dry Blood Spot)	<input type="checkbox"/>	Blood / Serum
<input type="checkbox"/>	Feces for Bact.	<input type="checkbox"/>	Feces for PCR	<input type="checkbox"/>	Fur swab (Sticky swab)	<input type="checkbox"/>	
<input type="checkbox"/>	Others:						

Analysis request (please tick where appropriate):

FELASA-2014-Packages:

<input type="checkbox"/>	Quarterly Bact.-Profile	(Includes: pharynx bacteriology, blood serology, feces PCR (excl. <i>Helicob.</i>), fur PCR)	PLUS Optional: Feces PCR Helicobacter (please tick below)
<input type="checkbox"/>	Quarterly PCR-Profile	(Includes: pharynx PCR, blood serology, feces PCR (excl. <i>Helicob.</i>), fur PCR)	
<input type="checkbox"/>	Yearly Bact.-Profile	(Includes: pharynx bacteriology, blood serology, feces PCR (excl. <i>Helicob.</i>), fur PCR)	
<input type="checkbox"/>	Yearly PCR-Profile	(Includes: pharynx PCR, blood serology, feces PCR (excl. <i>Helicob.</i>), fur PCR)	

Single analyses:

<input type="checkbox"/>	Pharynx bacteriology	<input type="checkbox"/>	Pharynx PCR (quarterly)	<input type="checkbox"/>	Pharynx PCR (yearly)	<input type="checkbox"/>	Fur PCR (Ectoparasites)
<input type="checkbox"/>	Feces PCR (Protozoa)	<input type="checkbox"/>	Feces PCR (Spirochoculus)	<input type="checkbox"/>	Feces PCR (Helicob.+Diff.)	<input type="checkbox"/>	Feces PCR (Helicob, no Diff.)
<input type="checkbox"/>	Feces PCR (Helminths)	<input type="checkbox"/>	Feces bacteriology	<input type="checkbox"/>	Blood serology (quarterly)	<input type="checkbox"/>	Blood serology (yearly)
<input type="checkbox"/>	Others:						

Abbreviations: Bact. = Bacteriology; Helicob. = Helicobacter sp.; Diff. = Differentiation

Remarks: Is the animal in experiment yes no

Reason for examination:
Observed symptoms:
Others:

Sample identification	Room/cage	Animal number/ animal ID	Age in weeks (w) Months (m), years (y)	Remarks

Date / Signature: