AVIAN HEALTH SUBMISSION FORM

Indiana Animal Disease Diagnostic Laboratories

ADDL at Purdue University

406 S University St West Lafayette, IN 47907-2065 P: 765-494-7440 F: 765-494-9181

Heeke ADDL - SIPAC

11367 E Purdue Farm Road Dubois, IN 47527-9666 P: 812-678-3401 F: 812-678-3412

ADDL USE ON	LY # PAGES:	
DELIVERED:	ARRIVED:	CONDITION:
■ UPS	Chilled	Good
☐ FedEx	Frozen	■ Broken Jar
□ DHL	Room Temp	Leaked
USPS	Cold Pack	
Exp Mail	Dry Ice	
☐ Drop-Off	None	

If you are submitting an entire body for necropsy, CF.929 Necropsy Submission Form must be used
HPAI samples for tesing related to a control area, CF.901 Commercial Poultry Incident Form must be used

VETERINARIAN:	ANIMAL:	W				
Name Site/Farm/Unit						
Indiana License # Flock #/ID						
Clinic						
	City, State ZIP					
City, State ZIP	Site/Farm/Unit Phone					
Phone Fax		- m				
Results: Fax Email	Promise ID					
Additional Email Results:	PREMISE ID					
OWNER:	BARCODE	Reason:				
Name		☐ NPIP☐ Healthy Monitoring				
Address		☐ Depopulation Testing				
City, State ZIP	_	General Diagnostic				
	Purdue Fund	Interstate Movement Movement Date:				
Bill to Third Party (Name/Phone)						
HISTORY: Clinical Problem: Respiratory Enteric Age day wk mo yr # On Site # In Affected Gro	□ Neurologic □ Reproductive □ Other up # Sick # Dead Breed	Type: Backyard Breeder Broiler Caged bird Chicken Duck Game bird Layer Raptor Turkey Wild bird				
Differential Diagnosis or Disease(s) Suspected		Other				
Histopathology Serology (see page 2)						
Diagnostician Discretion (ADDL Diagnostician will select tests, based on history provided); Diagnostic Budget						
If no tests are marked, 'Diagnostician Discretion' will be assumed. SAMPLES SUBMITTED: Please visit www.addl.purdue.edu for current sample submission guideline						
SAMPLES SUBMITTED:	Please visit www.addi.purdue.edu for curren	t sample submission guidelines				

Formalin Date Taken Fresh, Sex ID/Tube Animal ID Breed Age Sample Type chilled fixed П П 2 3 4 5 6 7 8 9

The owner of the animal or any agent acting with the express authority of the owner agrees that the specimens have been submitted to ADDL and will be handled by ADDL in accordance with ADDL testing procedures, policies, and fees. This handling will include all specified testing and safe disposal of the animal's remains. Specimens and derived isolates become the property of the Indiana ADDL and may be used for teaching or research purposes. The owner expressly consents to such use. In addition to the testing specified above, additional testing may be done: 1) to meet state or federal surveillance programs, 2) by order of state or federal animal health officials, or 3) when a Foreign Animal Disease is suspected. This form only lists frequently requested tests. For the complete list of tests, consult the ADDL Fee Schedule.

AVIAN HEALTH SUBMISSION FORM PG. 2 Indiana Animal Disease Diagnostic Laboratories

All requested tests will be run on all samples, unless otherwise indicated in the "ID #s" field (e.g. \ \pi 1 - 4 \text{ Aerobic Culture } \ \pi \ 5 \text{ Salmonella (PCR))

	<u>VETERINARIAN</u> :
	Name
	OWNER:
	Name
_	GCV

	12 % Hela (e.g. 11 1 Merobie eartain	sumonena (i city)	Nan	1e	
AVIAN INFLUENZA (AI) TESTING UVIROLOGY					
HPAI samples for tesing related to a control area, CF.901 Commercial Poultry Incident Form must be used.			oc):		
		List suspected virus(es): Electron Microscopy (EM)			
☐ Sa	mples have been pooled according to USDA	•	Electron W	icroscopy (Livi)	
	☐ 3mL BHI pool of 5 swabs ☐ 5.5mL BH	II pool of 11 swabs	Other:		
\Box _	Avian Influenza Virus (PCR)	Avian Influenza Virus (AGID)	TOXICOLOG	iY	
	Al Antigen Capture (Heeke Only)	Avian Influenza Virus (ELISA)	List suspected toxin	(s)/toxicant(s):	
	ACTERIOLOGY Save Isolate				
List su	spected pathogen(s):		Anticoagul	ant	Phosphorus
Po	ol samples if possible (at the discretion of the	lab)	Arsenic		Selenium
\Box _	_	gal Culture	Bone Scree	n	Selenium/Vitamin E Screen
	Anaerobic Culture Salm	nonella Culture	Calcium		Sodium
		ne option below for SALMONELLA DDL website for further information.	Copper		Vitamin E
\Box	Campyiobacter Culture		GC/MS Tox	icant Screen	Water Quality Screen
<u> </u>		Serogrouping	☐ Heavy Met	al Screen	Zinc
<u>Ц</u>		Serotyping (NVSL)	Lead		
	PARASITOLOGY		☐ Mycotoxin	Screen (AFB, DON,	ZEA)
LISUSU	spected parasite(s):		Single Myc	otoxin:	
<u>Ц</u> _	Fecal flotation, Qualitative	5 I C II	Othor		
니	 -	Fecal exam, Sedimentation	Other.		
	4 — -	Parasite identification			
	MOLECULAR DIAGNOSTICS	_			y Coronavirus (PCR) - TCV
\sqcup_{-}	Astrovirus (PCR)	Hemorrhagic Enteri	itis Virus (PCR) - HEV	Turkey	Coronavirus S-Gene Sequencing (PCR)
\Box_{-}	Avian Metapneumovirus (PCR) - AMPV	<i>Mycoplasma</i> spp. (P	PCR)	TCV/C	ocholosma anatis Duplex (PCR)
\square_{-}	Avian Rotavirus A & D (PCR)	Mycoplasma gallise	epticum (PCR) - MG	TCV/H	EV Duplex (PCR)
\square_{-}	Avibacterium paragallinarum (PCR)	☐ Mycoplasma synovi	iae (PCR) - MS	West I	Nile Virus (PCR) - WNV
\Box_{-}	Bordetella avium (PCR) - BA	☐ MG/MS Duplex (PC	CR)	<u>Avian Panel</u>	<u>s</u>
\square_{-}	Chlamydia psittaci (PCR)	MI/MM Duplex (PC	CR)	Avian	Protozoa PCR Panel
\Box _	Cochlosoma anatis (PCR) - CA	Newcastle Disease	Virus (PCR) - NDV	(H. me	eleagridis, T. gallinae, T. gallinarum)
	Egg Drop Syndrome 1976 (PCR) - EDS	Ornithobacterium rh	hinotracheale (PCR)-C	ORTAvian_	Respiratory PCR Panel
	Infectious Bronchitis Virus (PCR) - IBV	Reovirus (PCR) [ente			MG, IBV, ILT, NDV)
	Other	☐ Salmonella spp. (PC	•	<u> </u>	<u> Enteric Viral PCR Panel</u>
<u> </u>					otavirus A & D, Astrovirus, Reovirus, TCV
	EROLOGY Date Bled:	# Samples:	NPIP Testing	Same day results	Rush fee will be applied if samples are not tested on a standard testing
	AMPV ELISA (C,T)				day. Information about testing days is available on the ADDL website.
	BA ELISA (T)	AI AGID (C,T)	.	MG HI	
_	HE ELISA (T)	AI ELISA (C,T)	ō □_	MS HI	MOVEMENT AND EXPORT
P G	☐ MG ELISA (T)	MG ELISA (C,T)	Mail Out	NDV HI	Movement Date:
P.	MG/MS ELISA (C,T)	MG PAT (C,T)	≥ □_	Salmonella TT	Results Needed By:
Heeke (SIPAC)	☐ MG ELISA (T) ☐ MG/MS ELISA (C,T) ☐ NDV ELISA (T)	MS ELISA (C,T)			· · · · · · · · · · · · · · · · · · ·
ek k	ORT ELISA (C,T)	Salmonella PAT (C)			
Ĭ	REO ELISA (C)	☐ ISPA T-12 Program		Other:	
	Salmonella PAT (C)	Validated Species Key	-		
	TCV IFA (T)	C - Chicken T - Turkey			
		,			