

## Annex

### Pan-Canadian reportable information required for SARS-CoV-2 animal testing

#### Veterinarian information

Veterinary Practitioner's Name	
Practitioner's Municipality	
Practitioner's Telephone Number	
Province	
Provincial/Territorial CVO has recommended testing	<input type="checkbox"/> Yes <input type="checkbox"/> No

#### Animal location information

Municipality (where animal is located)	
Postal Code (where animal is located)	
Owner has been informed that results and non-identifying information will be shared with provincial, territorial and federal authorities and may be reported to the World Organisation for Animal Health (OIE)	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Animal information

Animal identification (name, id number)	
Specimen submitted	
Animal Species	
Animal Type (companion, zoo, backyard, other)	
Breed	
Gender	
Age	
Reason for Testing	
Presence of clinical signs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
If yes, indicate clinical signs	
Date of onset of clinical signs	
Who collected the sample?	<input type="checkbox"/> Veterinarian <input type="checkbox"/> Animal Health Technician <input type="checkbox"/> Other (specify)
Date sample collected	

### Laboratory submission information

Laboratory	
Date specimen received	
Date of diagnosis / test	
Lab Reference Number	
Testing method	
Test result	
Laboratory contact name	
Laboratory contact phone number	

### Additional epidemiological information

Does the animal being tested spend time outside without supervision?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Other animals in household	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
List species and number of animals	

Indicate if other animals display clinical signs and dates of onset.	
Humans in household affected by COVID	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Was the animal exposed to a person with a positive COVID-19 test?	
Was the animal exposed to a person with a clinical diagnosis of COVID-19 by a health care professional?	
Was the animal exposed to a person with self-assessed symptoms of COVID-19 infection?	
Date of symptom onset for person tested, clinically diagnosed or self-assessed as COVID-19 positive.	
Symptoms of person tested, clinically diagnosed or self-assessed as COVID-19 positive.	
Nature of the relationship between the animal and the person tested, clinically diagnosed or self-assessed as COVID-19 positive (for example, member of the same household, visitor to the household, etc.)	