BOVINE SUBMISSION FORM



Ministry of Agriculture and Food ANIMAL HEALTH CENTRE BC Ministry of Agriculture and Food 1767 Angus Campbell Rd. Abbotsford BC, V3G 2M3 www.gov.bc.ca/animalhealthcentre AAVLD—Accredited Laboratory 604-556-3003 1-800-661-9903 Fax: 604-556-3010 Email: PAHB@gov.bc.ca

FOR LAB USE ONLY	ENTERED:	VERIFIED: DATE:	_ SENT:	_ CASE #:	COORD:				
3	* Please ensure all requi	red information (in red with *) is	completed. Samples with i	ncomplete for	ms will not be tested.				
CLIENT REFE	RENCE #:		ECTED ON: SUBMITTED ON: YY/MM/DD) (YYYY/MM/DD)						
□ Insurance Claim □ Possible Litigation □ Rehab/Rescue SUSPECT FAD/ZOONOTIC AGENT:									
* SUBMITTED	BY: Owner Vet Clini	c \Box Other (Fill out info \rightarrow)	SUBMITTER AND/OR BILLING: ACCOUNT #:						
* BILL TO:	🛛 Owner 🗖 Vet Clini	c \Box Other (Fill out info \rightarrow)	NAME:						
* REPORTS TO: [†] Owner Vet Clinic Other (Fill out info \rightarrow)			ADDRESS:						
	ports will be sent by email (or fax) to reliminary reports will be sent to Vet 0	CITY:	PROVINCE:						
	REPORT EMAIL:		POSTAL CODE:	ONE:					
ADDITIONAL REPORT EMAIL:			EMAIL / FAX:						
* OWNER: PRI		PREMISE ID:	VETERINARIAN: ACCOUNT #		ACCOUNT #:				
FARM NAME:			VET CLINIC:		1				
* ADDRESS:			ADDRESS:						
* CITY:		* PROVINCE:	CITY:		PROVINCE:				
* POSTAL CO	DE:	* PHONE:	POSTAL CODE:	I	PHONE:				
EMAIL / FAX:			EMAIL / FAX:						
* PHYSICAL I	OCATION OF ANIMALS:	OWNER/FARM ADDRESS	(AS ABOVE)		CATION (SPECIFY BELOW)				
ADDRESS:			CITY:		POSTAL CODE:				
* BREED:		* AGE: 🛛 [о □ ₩ □ м □ ү * ѕе	X: 🗆 M 🗆	F M/N F/S UNKNOWN				
ANIMAL ID/NAME: * CCIA TAG NO. (whole animal only):									
USE/TYPE OF ANIMAL (select one):									
TOTAL # OF ANIMALS IN GROUP (numbers only): # SICK: # DEAD:									
* EUTHANIZE		S – SPECIFY METHOD:	DATE ANIMAL DIED: (YYYY/MM/DD)						
TREATMENTS:									
Unknown None Antibiotics Fluids Anti-inflammatories Other (<i>Please specify in History section</i>)									
VACCINATION STATUS: Unknown None Vaccinated (Specify):									
REASON FOR	R SUBMISSION (select one):	Diagnostic Investigation	Monitoring/Surveillance						
Research/Special Project (if different than Ref.#): Other (Specify):									
PRIMARY PROBLEM (select one): Death/Mortality/Moribund General Illness Poor Production									
Decreased food/Water intake Abortion Gas			stroenteric/Diarrhea	sculoskeletal	Neoplasia				
	Reproductive	Respiratory	Urinary D Oth	· ·	ify in History section)				
SAMPLE SOURCE (select one): Individual Multi-individual Pooled Environmental Other									
HISTORY: D	JRCE (select one):	L Individual L Multi-individual I							

Diagnostic Packag On tissues collected outside of the AHC, includes up to 5 ancitary tests as deemed appropriate by the pathologist's discretion Include additional tests at pathologist's discretion (additional fees may apply) Parasitology [•] Samples Serology Parasitology [•] Samples [•] Samples Bothew > Mycobacterium parabuberculosis ELISA Parasitology [•] Samples [•] Samples Bitw - Bovine Leukenia Virus ELISA Baermann (Lingworm) Fixed Tissues Bitw - Insciola Bovine Tista Baermann (Lingworm) Fixed Tissues Bitw - Insciola Bovine Tista Chaits Baermann (Lingworm) Fixed Tissues Is Rue - Infectious Bovine Tistanchaitilis ELISA Baermann (Lingworm) Frees Frees Of feer - Collab burnetit ELISA Histopathology Whole Blood Urine Borogle APril (CFIA form SAT3 also required) BPI3-vn - Bovine Viral Diarthea Virus 3 VN Bacteriology Diard Assert Respiratory Synchytal Virus 1 VN Diard Assert Respiratory Synchytal Virus 2 VN B	* Please ensure all required information (in red with *) is completed. Samples with incomplete forms will not be tested.											
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Neurologic Examination Add spinal cord exam to necropsy (additional fees may apply) Include additional tests at pathologist's discretion (additional fees may apply) Parasitology Samples Section (Samples) Seriology Parasitology Parasitology Samples Section (Samples) Sol - Salmonalia Dublin ELISA Fecal Floatation Whole Animal Felu Johne's - Mycobacterium paratuberculosis ELISA Modified McMaster's (Fecal Egg Count) Fixed Tissues Image: Samples Fecal Tissues IBR - Infectious Bovine Rhinotrachelits ELISA Baermann (Lungworm) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Parasite Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Panel Panel Panel (Float +/- McMaster's) Fresh Tissues Image: Sample Panel Panel Panel (Float +/- McMaster's) Fre		·	0 1									
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Serology Parasitology Samples * Sent # Received # SD - Salmonella Dublin <i>ELISA</i>	Neurologic Examination Add spinal cord exam to necropsy (additional fees apply) – brain is included in standard necropsy at pathologist's discretion											
SD - Salmonella Dublin <i>ELISA</i> Fecal Floatation Whole Animal Image: Constraint of the constraint o												
Johne's - Mycobacterium paratuberculosis <i>ELISA</i> Modified McMaster's (<i>Fecal Egg Count</i>) Fetus Image: Count of the culture of	Serology	Parasitology	* Samples	* Sent #	Received #							
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BVD - Bovine Viral Diarrhea ELISA Histopathology Serum Image: Seru	BLV – Bovine Leukemia Virus ELISA	Baermann (Lungworm)	Fixed Tissues									
NEO - Neospora caninum <i>ELISA</i> Histopathology Serum Image: Serum </td <td>□ IBR – Infectious Bovine Rhinotracheitis ELISA</td> <td>Strongyle Parasite Panel (Float +/- McMaster's)</td> <td>Fresh Tissues</td> <td></td> <td></td>	□ IBR – Infectious Bovine Rhinotracheitis ELISA	Strongyle Parasite Panel (Float +/- McMaster's)	Fresh Tissues									
C forver - Coxiella burnetii ELISA IHC: Feces Image: Constraint of the constrain	BVD – Bovine Viral Diarrhea <i>ELISA</i>	Histopathology	Whole Blood									
BTV - Blue Tongue Virus <i>ELISA</i> Other Histo: Urine Image: Constraint of the second of the seco	□ NEO – Neospora caninum ELISA	Histopathology	Serum									
C. Diff - Clostridium difficile toxin A&B ELISA Virology: (for full list of available isolation tests see fee guide) Milk	Q fever – Coxiella burnetti <i>ELISA</i>	IHC:	Feces									
Brucella BPAT (CFIA form 5473 also required) BPI3-vn – Bovine Parainfluenza Virus 3 V/N Viral Media Swab Image: Constraint of the system	BTV – Blue Tongue Virus <i>ELISA</i>	Other Histo:	Urine									
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Other Sero: BRC-vn – Bovine Respiratory Coronavirus VN Bacti Media Swab	Brucella BPAT (CFIA form 5473 also required)	BPI3-vn – Bovine Parainfluenza Virus 3 VN	Viral Media Swab									
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Aerobic culture only BVD2-vn – Bovine Viral Diarrhea Virus 2 VN Anaerobic culture only (includes C. perfringens detection) IgG – Immunoglobulin-Bovine IgM RID Clostridial FAT (includes anaerobic culture) IgM – Immunoglobulin-Bovine IgG RID Check off tissue types below Clostridium perfringens toxin typing IBR-vn – Infectious Bovine Rhinotracheitis Virus VN Fresh Formalized Cryptosporidium spp. (direct smear) Virus Isolation for: Brain Brain Brain Fungal culture only Other Viro: Lung Lung Lung Listeria monocytogenes isolation Calf Scours Package Kidney Kidney Spleen Other Bacti: salmonella culture Spleen Spleen Spleen Spleen Molecular Diagnostics (PCR) ILEPTO – Leptospira spp. Intestine Intestine Intestine BPV – Bovine Papillomavirus LEPTO – Leptospira spp. Muscle Muscle Placenta Placenta BP3 – Bovine Parainfluenza3Virus MCF – Malignant Catarrhal Fever Other: Other: Other: BP3 – Bovine Parvovirus UMB – Mycobacterium Consensus Immediater Immediater Immediater	Bacteriology	1	Dry Swab									
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Molecular Diagnostics (PCR) Intestine Intestine BCV – Bovine Coronavirus LEPTO – Leptospira spp. Muscle Muscle BHV T4 – Bovine Herpesvirus 4 LIST – Listeria monocytogenes Placenta Placenta BPV – Bovine Papillomavirus MCF – Malignant Catarrhal Fever Other: Other: BP13 – Bovine Parainfluenza3Virus MTB – Mycobacterium bovis Image: Consensus Image: Consensus												
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BPI3 – Bovine Parainfluenza3Virus MTB – Mycobacterium bovis Bparv – Bovine Parvovirus UMB – Mycobacterium Consensus	BHV T4 – Bovine Herpesvirus 4		1 1		nta							
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L BRSV – Bovine Respiratory Syncytial Virus L MB – Mycoplasma bovis	BRSV – Bovine Respiratory Syncytial Virus II MB – Mycoplasma bovis											
Please view our full list of tests												
	CHL – Chlamydophila abortus		available in our fee guide at www.gov.bc.ca/animalhealthcentre									
	CRY – Cryptosporidium spp.		_									
	□ IBR – Infectious Bovine Rhinotracheitis (Bovine Herpesvirus 1) □ TF – Tritrichomonas foetus		If you have questions regarding testing or type of samples to submit,									
PTR - Johne's Disease (Mycohacterium paretulers) UPD - Ureanlasma diversum please call 604-556-3003		_	please cal	1 604-556-30	4-556-3003							
Other PCR: Other PCR:			or email PA	ипв@gov.bo	.ca							

* **IMPORTANT PLEASE READ**: By signing this form, the submitter acknowledges and agrees: 1) Specimens submitted are cremated on site following testing and ashes will not be returned. 2) Personal information supplied by the submitter is collected by His Majesty The King in right of B.C. as represented by the Minister of Agriculture and Food (AF) under s. 26(c) of the Freedom of Information and Protection of Privacy Act, for completing the requested testing and analysis. Such personal information will be used and disclosed only in accordance with that Act and the Animal Health Act. The submitter can direct any questions on personal information to PAHB@gov.bc.ca. 3) AF may use information related to food-producing animal testing for the summarized statistical survillance of production animal health in B.C. 4) In the event of a suspected reportable, notifiable or foreign animal disease, the AHC must comply with relevant laws by confirming the diagnosis and notifying the appropriate agrencies. 5) The AHC may send the specimen submitted to an external third-party laboratory for required testing at the discretion of the Case Coordinator, unless otherwise directed by the client.