



Animal Disease Diagnostic Laboratory
 8995 East Main Street
 Reynoldsburg, Ohio 43068
 Phone: (614) 728-6220
 Fax: (614) 728-6303

Have a question?
 Send us an email:
animal@agri.ohio.gov

ADDL SAMPLE SUBMISSION FORM

Vet License # _____ Clinic Premises # _____
 Date collected _____ Date shipped _____
 Submitter's Name _____
 Clinic Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____

Premises # _____
 Owner's Name _____
 Farm Name _____
 Address _____
 City _____ State _____ Zip _____
 County _____
 Phone _____ FAX _____
 Bill will be sent to the clinic.

RESULTS

Email Address _____
 FAX _____
 Mail _____

Diagnostic sample
 Export sample Country : _____

Program sample: PRV Brucella NPPI Johne's EIA (EIA requests must be accompanied by form 0251) CWD

Cattle Cat Herd/Flock ID _____ Grower House # _____ Layer/Finisher # _____
 Horse Turkey
 Swine Chicken Epidemiologic Info: # in herd/flock _____ # in group _____ # sick _____ # dead _____
 Sheep Psittacine
 Goat Ratite Date died _____ Euth? Yes No Abortion: trimester _____ Age of Dam _____
 Dog Other: _____

History (clinical signs, nutrition, housing, vaccination, treatments, production level, related accessions, etc.):

(Continue on back if necessary)

Disease(s) or condition(s) suspected: _____ Request antimicrobial susceptibility on bacterial pathogens.
 I authorize the ADDL to use discretion to perform appropriate tests.

Sample Data:

| NO. | ANIMAL ID | BREED | SEX | AGE | QTY | SPECIMEN | TEST(S) REQUESTED |
|-----|-----------|-------|-----|-----|-----|----------|-------------------|
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| 10 | | | | | | | |

I certify that I have collected these samples and officially identified the animals indicated.

History (continued on Page 2)

 Signature of Licensed Veterinarian

Accredited

(Please use for multiple animal submissions)

Owner _____

Sample Data:

| NO. | ANIMAL ID | BREED | SEX | AGE | QTY | SPECIMEN | TEST(S) REQUESTED |
|-----|-----------|-------|-----|-----|-----|----------|-------------------|
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Additional Comments / Notes:

I certify that I have collected these samples and officially identified the animals indicated.

(Use as many pages as necessary)

Signature of Licensed Veterinarian

Accredited