



Request for Diagnostic and Laboratory Services

4807 G Street
Omaha, NE 68117
Tel: (402) 331-5106 Fax: (402) 331-3776
Email: pvosales@pahc.com

FOR PAHC USE ONLY
Case No: _____
Date Received: _____
Received By: _____

Clinic / Company: _____

Farm / Herd: _____

Veterinarian: _____

Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

City: _____ State: _____ Zip Code: _____

Owner Telephone: _____

Clinic Phone: _____ / Fax: _____

Clinic Email: _____

Species: _____ Age: _____ Breed: _____ % Affected: _____ Mortality: _____

PORCINE: # of Animals: _____ Operation Type: Sow Nursery Finisher Wean-to-Finish Farrow-to-Finish

BOVINE: # of Animals: _____ Operation Type: Dairy Heifer Grower Beef Cow/Calf Backgrounder Feedlot

AVIAN: # of Animals: _____ Operation Type: Layers Breeder Broiler Turkey Others

History / Clinical Signs: _____

Vaccination / Treatment History: _____

Necropsy Findings: _____

Samples Submitted: _____

Comments: _____

Tests Requested:

- Laboratory Discretion
- Bacterial Culture
- Susceptibility
- Mycoplasma Isolation (Porcine or Bovine)
- Virus Isolation

Other Testing:

- A. suis Dendrogram
- Clostridium perfringens Toxin Titers
- Moraxella Dendrogram

Molecular Biology PCR:

- E. coli Pilus and Toxin Gene Detection
- Mycoplasma (hyopneumoniae, hyohrinis, hyosymoviae, bovis, bovoculi, others)
- Mycoplasma hyorhinis VLP Genes
- Streptococcus suis Virulence Factors
- APP / A. suis Toxin Gene Detection

- Swine Influenza Virus
- Rotavirus
- PRRS
- PED
- Pasturella multocida Toxin Gene Detection

Please phone / fax preliminary findings Please send final results only (default)
Please forward copy of report to: _____

All isolates will be retained for Autogenous Vaccine Production
See reverse side for additional Sample Submission Suggestions

Suggestions for Sample Submissions

Respiratory: Whole lung lobes showing lesions, heart with pericardial sac

CNS/Meningitis: Whole head; swab taken through the foramen magnum for animals greater than 60 lbs

Scours: Entire intestine from animals less than 30 lbs; swabs from jejunum, ileum, colon (do not freeze samples!)

Additional tissue: Whole liver, kidney, spleen

Rhinitis: snout or nasal swabs (amies charcoal media)

Breeding Disorders: vaginal swab with transport media

Mastitis: Clean catch milk sample (refrigerate or freeze before submission)

Swollen joints: Whole leg; swab taken of joint cavity

Pinkeye: Culturette swabs

Rotavirus: Entire small intestine from animals weighing less than 30 lbs freeze then submit on ice; 10 mL of intestinal contents

Packaging of Samples

All samples should be double bagged in Ziploc bags and the bags should be labeled with the animal ID number, date of collection, producer name, and veterinarian name.

Phibro Submission sheet should be fill out and place in a Ziploc bag with the bag placed in shipping container separated from the tissue to prevent blood and fluids from coming in to contact with the form.

Tissue should be chilled or frozen if possible prior to shipment with the exception of intestine which should be chilled only.

Ice packs should be wrapped in paper and placed strategically around the tissues.