

INFLUENZA A IN LIVESTOCK SUBMISSION FORM



**Wisconsin Veterinary
Diagnostic Laboratory**
UNIVERSITY OF WISCONSIN-MADISON
www.wvdl.wisc.edu
E-mail form to: submissions@wvdl.wisc.edu

Ship to:

WVDL - MADISON LAB

445 Easterday Lane
Madison, WI 53706
PH: (800) 608-8387
FAX: (608) 504-2594



LABEL

OWNER*

Farm Name _____
Address* _____
City* _____
State*/Zip* _____
Premises ID* _____
Phone/Email* _____
Date samples taken* _____
Date samples shipped* _____

*Required field(s)

VETERINARIAN*

License No.* _____
Clinic _____
Clinic Acct. No. _____
Address* _____
City* _____
State* /Zip* _____
Clinic Premise ID _____
E-MAIL* _____
Phone* _____ FAX* _____

Sample Type

Test Request

Reason For Testing (required)

Milk:

Healthy Individual
Fresh Cow
Bulk Tank
String Sample
Tanker Truck
Sick Cow(s)
Pasteurized Product

Influenza A PCR
(32330)
Influenza A ELISA - Serum
(40615)
Influenza A ELISA - Milk
(40628)

**Please note that ELISA testing
is not valid for interstate
movement or for exhibition.

Commercial Product Monitoring - CP
Interstate Movement - IM
Surveillance Testing (no illness) - H
Exhibition (Show, Fair, Rodeo, etc) - H
Sick Animals - Please contact DATCP @ 608-224-4872 - EE

Other:

Nasal Swab
Serum

Premises ID is required for USDA funding to cover testing

Veterinarian signature is required

Official ID	Sample Type	Species	Breed	Sex	Age	Collection Date
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

Submitting Veterinarian's Signature*

(Signature indicates that specimen(s) were collected by or under the supervision of the signing veterinarian.)

