

SEROLOGY AND REGULATORY SUBMISSION FORM



**Wisconsin Veterinary
Diagnostic Laboratory**
UNIVERSITY OF WISCONSIN-MADISON

www.wvdl.wisc.edu

Email: submissions@wvdl.wisc.edu

MADISON
445 Easterday Lane
Madison, WI 53706-1253
PH: (800) 608-8387
FAX: (608) 504-2594

BARRON ®
1521 E. Guy Ave
Barron, WI 54812-0097
PH: (800) 771-8387
FAX: (715) 449-5052

Lab Use Only

Owner/Producer/Business
Name _____
Address _____
City _____ State/Zip _____
Premises ID _____ Phone _____
Email _____
Email results to owner

Bill to: Client Third Party Client
Third Party Account # _____

Also Email Results to Third Party: _____

Client _____ **Account #** _____
Veterinarian _____
Clinic/Company _____
Address _____
City _____ State/Zip _____
Phone _____ Fax _____
Update Client Result Emails
New Client Emails _____

Submission Reference: _____ **Date Sampled** _____

Abortion Testing (serum) **Test Animal(s) #**
All will be tested if left blank
 Lepto MAT 6 – 1:100 (20548) _____ to _____
 Neospora cELISA (20717) _____ to _____
 BHV-1(IBR) SN (40056) _____ to _____
 BVD 1 & 2 SN (40108) _____ to _____

Serology (serum)
ⓑ CL ELISA (20340) _____ to _____
ⓑ SRLV (OPP/CAE) cELISA (20327) _____ to _____
 Anaplasma cELISA (20093) _____ to _____
 Brucellosis BAPA (20210) _____ to _____
 Brucellosis Card (20223) _____ to _____
 Brucellosis FPA (20236) _____ to _____
 Brucellosis STT (20249) _____ to _____
 BHV-1(IBR) cELISA (40004) _____ to _____
 BHV-1(IBR) SN – Endpoint (40056) _____ to _____
 BHV-1(IBR) SN OIE (40069) _____ to _____
 BHV-1(IBR) SN OIE – Endpoint (40082) _____ to _____
 BLV AGID (20158) _____ to _____
 BLV cELISA (20171) _____ to _____
 BTV AGID (20262) _____ to _____
 BTV cELIA (20275) _____ to _____
 BVD ACE (20301) _____ to _____
 BVD P80 ELISA (40017) _____ to _____
 BVD 1 & 2 SN (40108) _____ to _____
 BVD 1 & 2 SN – Endpoint (40121) _____ to _____
 C. burnetii (Q-Fever) CF (20782) _____ to _____
 C. burnetii (Q-Fever) ELISA (20795) _____ to _____
 EHD AGID (20353) _____ to _____
 EHD cELISA (20366) _____ to _____
 EHD 1 & 2 SN (40134) _____ to _____
 EHD 1 & 2 SN – Endpoint (40147) _____ to _____
 MAP (Johne's) ELISA (20470) _____ to _____
 Lepto MAT Canine (20860) _____ to _____

Testing Information **Date Shipped** _____
 Export to _____
 International Movement **Interstate Movement**
 Herd Certification **Pre-purchase**
 Semi-Annual **Surveillance**
 Sale **Screen**
 Abortion **Diagnostic**
 Other _____

Serology cont. (serum) **Test Animal(s) #**
 Lepto MAT 5 – 1:100 (20522) _____ to _____
 Lepto MAT 5 – 1:400 (20535) _____ to _____
 Lepto MAT 6 – 1:400 (20561) _____ to _____
 Lepto. autumnalis MAT (20002) _____ to _____
 Lepto. sejiro MAT (20496) _____ to _____
 Salmonella Dublin ELISA (20808) _____ to _____
 VS (NJ & IND) SN (40160) _____ to _____

Molecular
 Anaplasma PCR (30016) [WB] _____ to _____
 BHV-1(IBR) PCR (30250) [Swab] _____ to _____
 BLV PCR (30302) [WB] _____ to _____
 BTV & EHD PCR (32447) [WB] _____ to _____
 BVD PCR Individual (30484) [WB, EN, SR] _____ to _____
 BVD PCR Pooled (30523) [WB, EN, SR, NS] _____ to _____

Virus Isolation
 BVD VI – 1 Pass (40394) [Serum] _____ to _____
 BVD VI – 2 Pass (40407) [Serum] _____ to _____
 BVD VI (40199) [WB] _____ to _____
 BTV VI (84633 NVSL Referral) [WB] _____ to _____
 EHD VI (84646 NVSL Referral) [WB] _____ to _____

Specimen Key: [WB] – Whole Blood; [EN] – Ear Notch; [SR] – Serum;
[NS] – Nasal Swab

Submitting Veterinarian's Signature _____
*Signature indicates that specimen(s) were collected by or under the supervision of the signing veterinarian. Please visit our website for our submission guidelines.

Tests with a ⓑ are performed at Barron lab. All other tests are performed at Madison lab.

SEROLOGY AND REGULATORY SUBMISSION FORM, cont



Clinic _____ Owner Name _____

Animal Information _____

If submitting more than 10 animals please use the Multiple Animal Spreadsheet for animal information instead of these fields

Animal IDs	Species	Breed	Sex	Age	Sample Date
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____	_____
11. _____	_____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____	_____
13. _____	_____	_____	_____	_____	_____
14. _____	_____	_____	_____	_____	_____
15. _____	_____	_____	_____	_____	_____
16. _____	_____	_____	_____	_____	_____
17. _____	_____	_____	_____	_____	_____
18. _____	_____	_____	_____	_____	_____
19. _____	_____	_____	_____	_____	_____
20. _____	_____	_____	_____	_____	_____
21. _____	_____	_____	_____	_____	_____
22. _____	_____	_____	_____	_____	_____
23. _____	_____	_____	_____	_____	_____
24. _____	_____	_____	_____	_____	_____
25. _____	_____	_____	_____	_____	_____
26. _____	_____	_____	_____	_____	_____
27. _____	_____	_____	_____	_____	_____
28. _____	_____	_____	_____	_____	_____
29. _____	_____	_____	_____	_____	_____
30. _____	_____	_____	_____	_____	_____

Opened By Sample Condition: Good Broken Leaked
 Temp: Cool/Ice Pack Warm
 Ser _____ On Clot
 WB _____ EN _____

Lab Use Only