New Jersey Department of Agriculture  
Division of Animal Health  
Animal Health Diagnostic Laboratory  
Phone: (609) 406-6999  Fax: (609) 671-6414

GENERAL SPECIMEN SUBMISSION FORM

(Specimens submitted for testing become property of the laboratory and may be tested as part of Federal or State surveillance programs. Please contact the laboratory to discuss if private cremation of animal remains is desired.)

Please PRINT FULL name, fill out address and phone #

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<thead>
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<th>Submitter</th>
<th>Owner</th>
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Animal Identification (Use Continuation Form for additional specimens / history)

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<tr>
<th>Animal or Sample ID</th>
<th>Species</th>
<th>Breed</th>
<th>Sex</th>
<th>Age</th>
<th>Tests Requested (Check below or indicate on line provided)</th>
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Bovine
- Blue tongue AGID
- Bovine Leucosis AGID
- Brucellosis card
- Brucellosis tube
- BVD PCR
- BVD SN
- IBD SN
- Johne’s ELISA
- Johne’s PCR
- Johne’s feline culture
- Johne’s rapid liquid culture

Caprine
- CAE AGID
- CL Serology
- OPP AGID

Porcine
- Influenza A PCR
- Influenza HI

Avian
- AI PCR
- AI AGID
- APMV-1 PCR
- Mycoplasma
- Pullorum microtiter

Fish (Water Temperature__________)
- Fish Health Certification
- KHV PCR
- Virus Isolation

Equine
- CEM
- EEE IgM ELISA
- EIA AGID
- EIA ELISA
- EHV1 SN
- EHV1 PCR
- EVA SN
- Equine influenza HI
- Equine neurologic panel (EEE ELISA, WNV ELISA, EHV-1 SN)
- PHF IFA
- PHF PCR
- Strep equi / zooepidemicus PCR
- West Nile Virus IgM ELISA

Canine
- Influenza A PCR
- Influenza HI (canine)
- Influenza A AGID

Multiple species
- Aerobic Culture & Sensitivity
- Anaerobic Culture
- Campylobacter
- Cytology, Slide Specimen:
- EEE PCR
- Fungal culture
- Mycology
- Influenza PCR
- Listeria
- Leptospira MAT 6 serovars
- Lyme ELISA
- Lyme Western blot
- Mycobacterium / Acid Fast Bacteria
- Necropsy
- Salmonella
- Virus Isolation Please specify virus:
- West Nile Virus PCR

Other Tests____________________________

ANTIBIOTIC TREATMENT WITHIN 72 HR: □ Yes □ No
If yes, list_________________________________
Specimen Description:

Type and Quantity of Specimens:

- Blood, EDTA Qty:  
- Carcass Qty:  
- Feces Qty:  
- Fluid Qty:  
- Hair Qty:  
- Serum Qty:  
- Slide Qty:  
- Swab Qty:  
- Tissue fresh Qty:  
- Tissue fixed Qty:  
- Other Qty:  

Testing Purpose:

- Clinical  
- Regulatory  
- Surveillance  
- Import  
- Export  

Country of Destination:

Type of flock/herd:  
Size of flock/herd:  
Number sick:  
Number sampled:  

Surgical Pathology:

1. Location
2. Size and shape
3. Color, texture and presence of capsule
4. Growth pattern (expansion, invasion, pedunculation, etc.)
5. Duration Rate of Growth
6. Evidence of hemorrhage, necrosis or suppuration
7. Previous Case no.

Indicate skin lesion site on above drawing

History / Provisional Diagnosis:

If necropsy:  
- Natural Death  
- Euthanasia  
Date & time of death:

Space provided for additional information:

Supplies Requested:

- Accession Forms #  
- Specimen Bags #  
- Other:  

Send Results by:

- Mail  
- E-Mail  
- Phone  
- Fax  
- Other:

Would you like partial results reported?  
- Yes  
- No

U.S. Postal Address  

Contact Information

New Jersey Department of Agriculture  
Animal Health Diagnostic Laboratory  
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Trenton NJ 08625  

New Jersey Department of Agriculture  
Animal Health Diagnostic Laboratory, NJPHEAL  
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Website: www.state.nj.us/agriculture