



Alabama Veterinary Diagnostic Laboratory System

www.labs.alabama.gov

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|--|---|--|---|
| ☐ Thompson Bishop Sparks
State Diagnostic Lab
890 Simms Rd.
Auburn, AL 36832
Ph: (334) 844-4987
Fax: (334) 844-7206 | ☐ Mitchem-Sparks
Diagnostic Lab
1833 Industrial Blvd
Boaz, AL 35957
Ph: (256) 593-2995
Fax: (256) 593-2996 | ☐ Hinton Mitchem
Poultry Diagnostic Lab
1001 Industrial Dr.
Hanceville, AL 35077
Ph: (256) 352-8036
Fax: (256) 352-8038 | ☐ J. B. Taylor
Diagnostic Lab
495 State Road 203
Elba, AL 36323
Ph: (334) 897-6340
Fax: (334) 897-0272 |
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General Submission Form

Please check www.labs.alabama.gov for submission recommendations and our current fee schedule.

Some tests may be subcontracted/referred to qualified laboratories. Submitter will be contacted for permission if this will incur additional charges.

All submitted samples and sample data become property of ADAI. Remains of animals cannot be returned to clients, but cremation can be arranged by the client if desired.

Veterinarian		Owner	
Clinic		Business	
License#	Account#	County	Premise ID
Address		Address	
City	State	Zip	
Phone	Fax		
Fax	Email		
Email	Previous Case # (if applicable)		

Report to: ☐ Vet ☐ Own ☐ Other:	Bill to: ☐ Vet ☐ Own ☐ Other:
Report preference: ☐ email ☐ fax ☐ mail	Bill preference: ☐ email ☐ fax ☐ mail

Results will be shared only with client(s) checked in the "Report to" section; however, results may also be shared with the vet/clinic listed unless client requests otherwise. For multiple animals use the multiple animal continuation form. Animal ID numbers for deer or deer heads submitted will be shared with ADCNR.

Specimen: ☐ Whole body ☐ Fresh Tissue ☐ Fixed Tissue ☐ Blood ☐ Serum ☐ Urine ☐ Feed/Hay ☐ Other				
Animal Name or ID	Species	Breed	Test sections	Lab Use Only
Sex	Age ☐ Years ☐ Months ☐ Days		☐ Necropsy ☐ Practitioner Necropsy ☐ Disposal Only ☐ Histopathology ☐ Bacteriology ☐ Mycology ☐ Virology ☐ Molecular/PCR ☐ Serology ☐ Toxicology ☐ Parasitology ☐ Rabies, ADPH ☐ AUCVM ☐ CWD ☐ BSE ☐ Scrapie ☐ HOLD ☐ Other:	
History (diet, vaccine, nutrition, illnesses, herd, etc.):		Branch Lab Tests (Lab Use Only) ☐ Necropsy ☐ Practitioner Necropsy ☐ Bacteriology ☐ Mycology ☐ Serology ☐ Rabies, ADPH ☐ USDA ☐ BSE ☐ Scrapie ☐ HOLD ☐ Parasitology ☐ Other:		
Clinical signs/symptoms:				
Recent changes (diet, herd, travel, etc):				
Treatment/Medications:				
Diagnosis/differentials:				
#Herd____ #Sick____ #Dead:____				
Test request(s): Check back of form for test selection or write in space above. If no tests are requested, tests will be performed at the discretion of the pathologist. Necropsy fees include all in-house tests performed.				

IF NECROPSY: Date of death: _____ ☐ Died ☐ Euthanized Method of euthanasia: ☐ Barbiturate ☐ Other (specify) _____

IF RABIES SUSPECT: ☐ Rabies testing only ☐ Rabies testing plus necropsy ☐ Legal (+\$500 fee) ☐ Insured (+\$150 fee)

DISPOSAL: ☐ Routine disposal (included) ☐ Cremation (arranged & paid for by client) Cremation service: _____

Print Name _____ **Signature** _____ **Date** _____

Mammal Specimens & Tests				Accession #
Bacteriology/Mycology		Virology		
Specimen ☐ Lung ☐ Liver ☐ Kidney ☐ Spleen ☐ Sm. Intestine ☐ Lg. Intestine/Cecum ☐ Brain ☐ Muscle ☐ Lymph Node ☐ Urine ☐ Feces ☐ Swab ☐ Abscess/Lesion ☐ Cytology/impression slide ☐ Other: _____	Tests ☐ Aerobic culture/sensitivity ☐ Anaerobic culture ☐ Fungal culture ☐ Brucella culture ☐ Salmonella culture ☐ Campylobacter culture ☐ Johne's culture ☐ Listeria culture ☐ Listeria cold enrichment culture (brain only) ☐ Other: _____ Stains ☐ Cryptosporidium: Auramine-O acid fast stain ☐ Blackleg: Fluorescent antibody ☐ Other: _____ Instructions: _____	Specimen ☐ Lung ☐ Liver ☐ Kidney ☐ Spleen ☐ Brain ☐ Small intestine ☐ Lymph node ☐ Ear notch ☐ Retropharyngeal lymph nodes (fresh)* ☐ Obex (whole, fresh)* ☐ Ear tag w/skin* ☐ Feces ☐ Swab: _____ ☐ Other: _____	Feline ☐ Calicivirus FA ☐ Herpes (FVR-1) FA ☐ Panleukopenia virus FA Canine ☐ Coronavirus FA ☐ Adenovirus FA Cervid ☐ CWD ELISA* *CWD sampling procedures must be followed. Please call with questions.	Bovine ☐ Coronavirus FA ☐ Parainfluenza 3 FA ☐ BVD Ear Notch ELISA Ovine/ Caprine ☐ Contagious ecthyma FA Multiple species ☐ Rotavirus ELISA ☐ Other: _____ Instructions: _____
Toxicology		Molecular/PCR		
Specimen† ☐ Liver ☐ Kidney ☐ Stomach contents ☐ Serum ☐ Blood ☐ Vitreous Humor ☐ Aqueous Humor ☐ Feed ☐ Hay ☐ Other: _____ Instructions: _____	Tests ☐ Cyanide ☐ Ethylene glycol ☐ Insecticide screen* ☐ Rodenticide screen* ☐ Strychnine ☐ Arsenic ☐ Cadmium ☐ Calcium* ☐ Phosphorus ☐ Chromium ☐ Copper* ☐ Iron* ☐ Lead* ☐ Magnesium* ☐ Potassium ☐ Selenium* ☐ Salt (feed only) ☐ Zinc* ☐ Nitrate & Nitrite ☐ pH ☐ Mycotoxins(feed only): ☐ Aflatoxin ☐ Deoxynivalenol ☐ Fumonisin B1 ☐ Ochratoxin ☐ Ionophores (feed only) ☐ Feed visual exam ☐ Bone ash ☐ Urolith analysis ☐ Other: _____	Specimen ☐ Lung ☐ Liver ☐ Kidney ☐ Spleen ☐ Brain ☐ Intestine ☐ Lymph node ☐ Blood in EDTA (BVD, BT only) ☐ Swab: _____ ☐ Other: _____ Instructions: _____	Bovine/Ovine/Caprine ☐ BRSV ☐ BVDV ☐ IBR ☐ Bluetongue ☐ Tritrichomonas (bovine only) ☐ Anaplasma ☐ Theileria Porcine ☐ PEDV ☐ Swine influenza Cervid ☐ Bluetongue virus ☐ EHDV	Canine ☐ Herpesvirus ☐ Parvovirus ☐ Distemper virus ☐ Influenza Feline ☐ Coronavirus (FCoV) ☐ Influenza Equine ☐ EHV-1§ ☐ EVA ☐ Influenza ☐ EEE Multiple Species ☐ Mycoplasma ☐ Chlamydia ☐ Neospora ☐ Toxoplasma ☐ WNV
Serology		Histopathology (Necropsy)		
Porcine ☐ Brucella suis ☐ Pseudorabies Ovine/Caprine ☐ CAE ☐ Ovine progressive pleuropneumonia ☐ Johne's disease (caprine) Canine ☐ Brucella canis ☐ Leptospirosis panel Feline ☐ FELV & FIV	Bovine ☐ Bovine abortion panel ☐ Anaplasmosis ☐ Bluetongue virus ☐ Brucellosis (B. abortus) ☐ BVDV VN ☐ IBR ☐ Neosporosis ☐ Leptospirosis panel ☐ Bovine respiratory panel ☐ BVDV VN ☐ IBR ☐ PI-3 ☐ BRSV ☐ Bovine leukosis virus ☐ Johne's disease ☐ IgG (passive transfer) ☐ BVDV antigen capture ELISA (PI)	Equine ☐ EIA/Coggins (separate form) ☐ EVA ☐ EHV-1§ ☐ WNV Multiple Species ☐ Leptospirosis panel ☐ Bluetongue ☐ Brucella abortus/suis Instructions: _____	☐ Brain ☐ Lung ☐ Liver ☐ Kidney ☐ Heart ☐ Spleen ☐ Lymph Node ☐ Thymus ☐ Muscle ☐ Bone marrow ☐ Stomach ☐ Rumen ☐ Intestine ☐ Cecum ☐ Colon ☐ Tonsil ☐ Adrenal ☐ Thyroid ☐ Uterus ☐ Umbilicus ☐ Ovary ☐ Testicle ☐ Mammary ☐ Placenta ☐ Trachea ☐ U. bladder ☐ Other: _____ ☐ Other: _____	
		Parasitology ☐ Fecal flotation (centrifugation) ☐ Zinc Sulfate Flotation ☐ McMaster's Egg Count		

§Please note this EHV-1 test will not differentiate neurologic form from respiratory form; please call for more information.
 Indicate all submitted samples and the appropriate test section(s).