





## Mammalian Submission Form cont.

### Additional History Information

No. in Group: ____		No. (or %) Sick: ____		No. (or %) Dead: ____		Duration of Illness ____d ____w ____m	
Cattle:	<input type="checkbox"/> Dairy	<input type="checkbox"/> Cow/Calf	<input type="checkbox"/> Veal	<input type="checkbox"/> Feedlot			
Swine:	<input type="checkbox"/> Farrow	<input type="checkbox"/> Nursery	<input type="checkbox"/> Weaner	<input type="checkbox"/> Grower	<input type="checkbox"/> Feeder		
Horse:	<input type="checkbox"/> Racehorse	<input type="checkbox"/> Pleasure					
Ration Type: _____				Ration Amount: _____			
Ration Condition: _____				Duration Ration Provided: ____d ____w ____m			
Supplements/Vitamins/Minerals: _____				Water Source: _____			
Ration changed before the onset of symptoms? <input type="checkbox"/> Yes				Describe: _____			

### Specimen and Test Order:

Specimen (s)	Whole Animal ____ Blood ____ Fetus ____ Placenta ____	Date Collected: _____
Submitted:	Swabs ____ Feces ____ Milk ____ Water ____ Other _____	
Fresh Tissues:	Brain ____ Heart ____ Lung ____ Kidney ____ Placenta ____ Muscle ____	Date Collected: _____
	Stomach ____ Intestine ____ Liver ____ Spleen ____ Other _____	
Fixed Tissues:	Brain ____ Heart ____ Lung ____ Kidney ____ Placenta ____ Muscle ____	Date Collected: _____
	Stomach ____ Intestine ____ Liver ____ Spleen ____ Other _____	
General Test(s) Requested:		Specific Test(s) Requested:
<input type="checkbox"/> Necropsy	<input type="checkbox"/> Toxicology	<input type="checkbox"/> Serology
<input type="checkbox"/> Histology	<input type="checkbox"/> Virology	<input type="checkbox"/> PCR
<input type="checkbox"/> Bacteriology	<input type="checkbox"/> Parasitology	_____
		_____
		_____

*Specimens submitted to the AHC become the property of the AHC and are disposed of on site unless other arrangements are made. Information related to food-producing animal testing may be used by the Ministry of Agriculture and Lands for the purpose of summarized statistical surveillance of production animal health in BC. Personal details will not be disclosed, in accordance with the Freedom of Information and Protection of Privacy Act. In the event of a suspected reportable, notifiable or foreign animal disease, the AHC is obligated to comply with the federal Health of Animals and the provincial Animal Disease Control Acts by confirming the diagnosis and notifying the appropriate agencies.*

**Submitter's Signature:** \_\_\_\_\_