



Oregon Veterinary Diagnostic Laboratory
General Submission Form - Page 1 of 2

For VDL Use Only

Phone: 541-737-3261 Fax: 541-737-6817
Email: vet.diagnostic@oregonstate.edu
Website: http://vetmed.oregonstate.edu

Shipping/Courier Address
134 Magruder Hall
Corvallis OR 97331-8555

VDL Account # Dr DeBess Has your information changed? [] Owner Information - (if other than submitter)
Submitter: Owner:
Address: Address:
City: State Zip City: State Zip
Phone: Fax: Phone: Fax:
Email: Previous Accessions:
Reporting: E-mail Report [] Fax Report [] Mail Report [] Copy Results To:
Submitting Veterinarian: Email/Fax:

ANIMAL IDENTIFICATION—Use Multiple Animal ID Form if necessary

SEX: F=Female, FS=Spayed Female, M=Male, MC=Castrated Male, U=Unknown—AGE: Y=Years, M=Months, W=Weeks, D=Days; DOB=Date of Birth

Table with 6 columns: NO., NAME/IDENTIFIER NO., SPECIES, BREED, SEX, AGE/DOB. Rows 1-5.

Specimens Submitted - indicate number of each sample type Date Specimens Taken Date Specimens Submitted
Whole Animal # Blood, whole # Feces # Fluid (origin)
Fresh Tissue # Serum # Milk # Swab (origin)
Formalin Fixed Tissue # Plasma # Urine [] voided [] catheterized [] cystocentesis # Other (origin)

History: Please include clinical presentation, feed/husbandry changes, onset and duration of illness, treatments (include antibiotics), vaccinations.
Number of animals in this submission Total number of animals Number of sick animals Number of dead animals
Date of death / / Euthanized: Yes [] No []

Test requested: SARS-CoV-2 PCR, domestic animal. Approved by Dr. Tengelsen, PhD, DVM (State Public Health Veterinarian, Idaho), in consultation with Dr. Emilio DeBess from Oregon Health Authority.

VDL USE ONLY SHIPPING COLD PACK SPECIMEN CONDITION
Date Received: Courier Hand Delivered Yes No No ID on Samples
Rec'd By: FedEx US Mail Frozen Sample is leaking
Overnight/Weekend: Greyhound UPS: PP Next 2nd Thawed Other



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Owner/Submitter Name: _____

Please refer to our website for specific test and sample information or call the Oregon Veterinary Diagnostic Laboratory.
Please use the appropriate form: Clinical Pathology Submission Form, General Submission Form, Necropsy/Biopsy Submission Form

BACTERIAL DIAGNOSTICS	DIAGNOSTIC PANELS	VIRAL DIAGNOSTICS (continued)
<input type="checkbox"/> Acid-fast stain <input type="checkbox"/> Aerobic Culture** <input type="checkbox"/> **Antibiotic Sensitivity – per bacterial organism <input type="checkbox"/> Anaerobic Culture (requires aerobic culture) <input type="checkbox"/> Brucella canis RSAT <input type="checkbox"/> Brucella ovis ELISA <input type="checkbox"/> Campylobacter Culture <input type="checkbox"/> Chlamydia Gimenez Stain <input type="checkbox"/> Clostridial FA Exam <input type="checkbox"/> Clostridium difficile Toxin A & B ELISA <input type="checkbox"/> Clostridium perfringens culture ** <input type="checkbox"/> ** Add PCR genotyping if positive <input type="checkbox"/> Clostridium perfringens Enterotoxin ELISA <input type="checkbox"/> Escherichia coli K99 PCR <input type="checkbox"/> Epizootic Bovine Abortion (Foothill) PCR <input type="checkbox"/> Gram Stain <input type="checkbox"/> Johne's Disease (MAP) PCR <input type="checkbox"/> Leptospira Microagglutination <input type="checkbox"/> Leptospira spp. PCR <input type="checkbox"/> Listeria Culture <input type="checkbox"/> Microscopic Exam – Darkfield <input type="checkbox"/> Milk Culture – Standard ** <input type="checkbox"/> ** Antibiotic Sensitivity <input type="checkbox"/> Milk Culture - Mycoplasma only <input type="checkbox"/> Milk Culture - Staph only <input type="checkbox"/> Milk Culture – Standard Bulk Tank ** <input type="checkbox"/> ** Add Mycoplasma <input type="checkbox"/> ** Add Pasteurized plate count <input type="checkbox"/> Mycoplasma Culture <input type="checkbox"/> Mycoplasma bovis PCR <input type="checkbox"/> Mycoplasma haemolamae PCR <input type="checkbox"/> Mycoplasma spp. PCR <input type="checkbox"/> M. gallisepticum/M. synoviae PCR <input type="checkbox"/> Salmonella Culture <input type="checkbox"/> Salmonella spp. PCR** <input type="checkbox"/> **Add culture & serotyping if positive	<input type="checkbox"/> Ruminant & Camelid Scours/Diarrhea Panel (Includes PCR, Parasitology, Bacterial Culture) PCR PANELS <input type="checkbox"/> Porcine Diarrhea (PEDV, SDCoV, TGEV, PRV) <input type="checkbox"/> Respiratory Panel (Ruminant/Cam/Eq/Por) <input type="checkbox"/> Ruminant & Camelid Scours/Diarrhea PCR PARASITOLOGY <input type="checkbox"/> Cryptosporidium Exam <input type="checkbox"/> Cryptosporidium parvum PCR <input type="checkbox"/> Fecal Parasites - Baermann (Lungworms) <input type="checkbox"/> Fecal Parasites - McMaster (Flotation)** <input type="checkbox"/> **Haemonchus contortus ID <input type="checkbox"/> Fecal Parasites - Sedimentation (Flukes) <input type="checkbox"/> Fecal Parasites - Sugar Centrifugation** <input type="checkbox"/> **Haemonchus contortus ID <input type="checkbox"/> Fecal Parasites - Wet Mount Microscopic Exam <input type="checkbox"/> Giardia FA Exam <input type="checkbox"/> Giardia Iodine Mount <input type="checkbox"/> Heartworm (Modified Knott's) <input type="checkbox"/> Mite Exam <input type="checkbox"/> Neospora caninum ELISA <input type="checkbox"/> Trichomonas Culture <input type="checkbox"/> Trichomonas Pouch Exam VIRAL DIAGNOSTICS <input type="checkbox"/> Adenovirus FA Exam (Bovine/Equine) <input type="checkbox"/> Avian Influenza Virus PCR <input type="checkbox"/> Avian Paramyxovirus (APMV-1) & vNDV PCR <input type="checkbox"/> Bluetongue Virus (BTV) cELISA <input type="checkbox"/> BTV / Epizootic Hemorrhagic Disease PCR <input type="checkbox"/> Bovine Herpes Virus FA Exam (BHV-1, aka, IBR) <input type="checkbox"/> BHV type 1 PCR <input type="checkbox"/> BHV Serology (SN) <input type="checkbox"/> Bovine Coronavirus FA exam <input type="checkbox"/> Bovine Respiratory Syncytial Virus (BRSV) FA Exam <input type="checkbox"/> BRSV PCR <input type="checkbox"/> BRSV Serology (SN) <input type="checkbox"/> Bovine Viral Diarrhea Virus (BVDV) PCR <input type="checkbox"/> BVDV-1 Serology (SN) <input type="checkbox"/> BVDV-2 Serology (SN) <input type="checkbox"/> BVDV-PI Ag. Capture ELISA - ear notch or serum <input type="checkbox"/> BVDV FA <input type="checkbox"/> BVDV-PI PCR - pooled blood <input type="checkbox"/> BVDV-PI PCR - pooled ear notch <input type="checkbox"/> Canine Distemper FA Exam <input type="checkbox"/> Canine Herpesvirus-1 FA Exam <input type="checkbox"/> Caprine Arthritis-Encephalitis Virus (CAE) ELISA	<input type="checkbox"/> x Coronavirus PCR (Bovine/Camelid) <input type="checkbox"/> Electron Microscopy <input type="checkbox"/> Epizootic Hemorrhagic Disease (EHD) AGID <input type="checkbox"/> Equine Adenovirus FA Exam <input type="checkbox"/> Equine Adenovirus Serology (SN) <input type="checkbox"/> Equine Herpesvirus 1 (EHV-1) Serology (SN) <input type="checkbox"/> EHV-1 & 4 FA Exam <input type="checkbox"/> EHV-1 & 4 PCR (detects neuropathogenic EHV-1) <input type="checkbox"/> Equine Influenza Virus A1 (E. Inf-1) Serology (HI) <input type="checkbox"/> Equine Influenza Virus A2 (E. Inf-2) Serology (HI) <input type="checkbox"/> Equine Rhinitis-A (ERV-A) Serology (SN) <input type="checkbox"/> Equine Viral Arteritis (EVA) PCR <input type="checkbox"/> EVA Serology (SN) <input type="checkbox"/> Feline Herpesvirus-1 (FHV-1) FA Exam <input type="checkbox"/> Feline Infectious Peritonitis Virus (FIP) Serology (IFA) <input type="checkbox"/> Influenza-A Virus (Universal) PCR <input type="checkbox"/> Llama Adenovirus Serology (SN) <input type="checkbox"/> Ovine Progressive Pneumonia Virus (OPP) ELISA <input type="checkbox"/> Parainfluenza Virus-3 (PI-3) FA Exam <input type="checkbox"/> Parainfluenza Virus-3 (PI-3) PCR <input type="checkbox"/> Parainfluenza Virus-3 (PI-3) Serology (HI) <input type="checkbox"/> Porcine Parvovirus FA Exam <input type="checkbox"/> Potomac Horse Fever (PHF, N. risticii) Serology <input type="checkbox"/> Rabies Virus FA Exam <input type="checkbox"/> Rotavirus FA Exam <input type="checkbox"/> Rotavirus (Bovine - Group A) PCR <input type="checkbox"/> Swine Influenza Virus (IAV-S) w/subtyping PCR <input type="checkbox"/> Transmissible Gastroenteritis Virus (TGE) FA Exam <input type="checkbox"/> Virus Isolation <input type="checkbox"/> West Nile Virus (WNV) IgM ELISA <input type="checkbox"/> WNV nested PCR <input type="checkbox"/> WNV real-time PCR <input type="checkbox"/> WNV/WEE/SLE Mosquito PCR Panel FISH/AQUATIC DIAGNOSTICS <input type="checkbox"/> Aerobic Culture <input type="checkbox"/> Infectious Salmon Anemia Virus PCR <input type="checkbox"/> Koi Herpesvirus PCR <input type="checkbox"/> Mycobacterium PCR Panel <input type="checkbox"/> Pseudoloma neurophilia PCR <input type="checkbox"/> Viral Hemorrhagic Septicemia (VHS) PCR <input type="checkbox"/> Virus Isolation OTHER <input type="checkbox"/> Histopathology