



TDA Laboratories, LLC

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Date Sample Received _____

Opened By _____

Submission Form

Note: This is a 2-page form. Please fill out both pages completely and legibly.

Owner/Contact Name: _____

Business: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Clinic/Veterinarian: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Person to be Billed: Owner/Producer Veterinarian **Report Results to:** Owner/Producer Veterinarian

Send Results by : Fax Phone Email Mail

Species: Bovine Canine Feline Equine Camelid Other (specify) _____

Specimen(s) Submitted:

- Whole Blood Serum Milk Urine Feces Semen Fetus Tissue (specify)
- Culture plate/isolate Feed Water Swab (specify) Other (specify) _____

For multiple animal submissions, use 'Multiple Animal Identification Sheet'

| Animal Identification | Species | Breed | Sex | Age | Collection Date |
|-----------------------|---------|-------|-----|-----|-----------------|
| | | | | | |
| | | | | | |

History (include clinical signs, differential diagnoses, antibiotic use, vaccine history, duration, number of animals affected, etc.) If more space is needed, please attach an additional page.

For Lab Use Only

COOLANT RECORD Frozen Dry Ice Cold Pack None Comment _____

SAMPLE CONDITION Good Broken Leaked Warm Frozen Other _____

SHIPPING INFORMATION Mail FedEx Exp Mail UPS Courier Hand Delivered

Contact Name _____

- Blood:** Blood culture Total Blood Protein NEFA BHBA
 CBC - Standard CBC—Comprehensive

Chemistry Panels

- Comprehensive Diagnostic T4/Cholesterol Pre-Anesthetic
 Critical Care Equine Profile Plus ** Mammalian Liver ** Large Animal **

** Tests will require an additional 1–2 days

- CBC/ Biochem Comprehensive**

Fecal/Urine Urine Culture: Method of Collection: Cysto Catheter Free catch
 Other: _____

- Aerobic Anaerobic (Clostridium)
 Salmonella Fecal Float (Parasitology) Fecal Float (Centrifuge)
 Fecal Complete (includes: Float, Cytology and Giardia)

- Urinalysis** (includes: Specific Gravity, Dip Stick and Sediment)

- Aerobic ID and Susceptibility** **Anaerobic ID and Susceptibility**

Heartworm Feline Canine (includes: Heartworm, E. Canis & Lyme Disease)

- Heartworm Only
 Heartworm, E. Canis and Lyme Disease
 Heartworm, E. Canis, Lyme Disease and Anaplasmosis

- SNAP Giardia** **SNAP Parvo**

Milk: Culture Bacteria & Mycoplasma (*All bacteria identified*) Bacteria only
 Mycoplasma only Tank Sample Contagious only (*Staph aureus, Strep ag., Mycoplasma*)
 Milk Quality SCC PC PI LPC Coliform Count
(If more than one tests required, circle all.)

Antibiotic Susceptibility **Other antibiotics available upon request

- Small Animal** ** (includes: Amikacin, Amoxicillin/Clavamox, Cephalothin, Cefazolin, Doxycycline, Enrofloxacin, Erythromycin and Sulfasoxazole)
 Food Animal ** (includes: Ampicillin, Ceftiofur, Enrofloxacin, Florfenicol, Penicillin, Sulfa/Trimethoprim, Tetracycline and Tilmicosin)

- Residue Testing:** Milk/Urine Residue Testing (*Test used for potential slaughter animal also.*)
 Antibiotic residue test: Penicillin Tetracycline Sulfa Delvo
 SNAP Other: _____

- Johne's :** Milk/Serum—Elisa Direct Fecal—PCR

- BioPryn Pregnancy Test** (serum)

- Mycoplasma—PCR**

- BVD:** Ear notch/serum—Elisa Milk—PCR Milk—Elisa Ear notch/ Serum—PCR
 Composites—PCR Camelid serum/whole blood—PCR

- Tissue Culture** (Type/location) _____
Method of Collection _____

- Bedding Culture** **Bedding Culture with Myco**

- Abortion Screens** (Elisa) (*IBR, BVDV and BHV4*) **Respiratory Screens** (Elisa) (*IBR, BRSV, PI3, & Andenovirus 3*)

- Anaplasmosis** (Elisa) **Blue Tongue** (Elisa) **Neospora** (Elisa)

- Bovine Leukemia Virus** (Elisa) **Colostrum IgG** **Trichomonas**

- Stains:** Acid Fast (Cryptosporidium) Wright-Geisma Gram Dif Quick

- pH Analysis** (Type) **Water Analysis** **Ear Cytology**