

# ALL SPECIES HERD HEALTH FORM

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**South Dakota State University**  
**Animal Disease Research & Diagnostic Lab**  
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 Brookings, SD 57007

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 website: http://sdsu.edu/vs

Accession Number \_\_\_\_\_  
 Date PCR  
TC

Jim McConaghy  
Badlands Veterinary Services  
308 James Ave  
Wall State SD Zip 57790  
 Fax 605-279-2659

Owner Bruce Jensen  
 Premise ID \_\_\_\_\_  
 City Owanka  
 State SD Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Collected on 4-24-21 Collected by Dr. McConaghy  
 Species Bovine Number Submitted 2 Fluid AF

0398-13



- Animal(s)  Serum  Semen  Feces  Fluid  Environmental sample  
 Whole Blood (EDTA Tube)  Oral Fluid/Saliva  Raw  Milk  Swab  
 Whole Blood Saline (swab)  Ear Notch  Extended  Eggs  Other Smegma

- Diagnosis  Anaplasmosis ELISA  BRSV SN  PEDV IFA  PRRSV US IFA  FeLV/FIV  
 Blue Tongue ELISA  BVDV Type 1 SN  Mycoplasma ELISA  PRRSV Euro IFA  FIP ELISA  
 BLV ELISA  BVDV Type 2 SN  Please run DAKO, if  PRV ELISA  Brucella canis  
 Brucella abortus  BVDV Type 2 SN  Positive  SIV NP ELISA  Avian Influenza AGID  
 BVD A.C.E.  IBR SN  Suspect  EHD AGID  (Serum, Eggs)  
 (Serum, Ear Notch)  PI3 SN  PRRSV ELISA  EIA - Use Federal Form  Other \_\_\_\_\_  
 Johne's Disease ELISA  Neospora ELISA  If positive, run  Brucella ovis ELISA  Other \_\_\_\_\_  
 Leptospira MAT  PRRSV US IFA  PRRSV Euro IFA  OPP/CAE  SN = Serum Neutralization

**Molecular Diagnostics (PCR)** Additional tests currently available: Classical Swine Fever, Exotic Newcastle Disease, and FMD. Call the laboratory for details.

	Individual	Pool in (maximum 5)	Test Positive Pools Individually
<input type="checkbox"/> BRSV / BCV multiplex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Bluetongue Virus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> BVDV	<input type="checkbox"/>	<input type="checkbox"/> * see key	<input type="checkbox"/>
<input type="checkbox"/> BVDV / BHV - 1 multiplex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> BVDV Typing PCR	<input type="checkbox"/>	<input type="checkbox"/> * see key	<input type="checkbox"/>
<input type="checkbox"/> Circovirus- Type 2 Qualitative (CT value)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Circovirus- Type 2 Quantitative (copies/ml)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Epizootic Hemorrhagic Disease Virus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Johne's Disease - Feces or Intestines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> = additional charges apply
<input type="checkbox"/> Lawsonia intracellularis - Feces or Intestines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Leptospira	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Mycoplasma hyopneumoniae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PEDV / TGEV / PDCoV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PEDV S1 Sequencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Porcine Rotavirus A, B, C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Porcine Parvovirus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRRSV PCR NA/EU Qualitative (CT value)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRRSV PCR NA/EU Quantitative (copies/ml)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRRSV Sequencing & Predicted RFLP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Influenza A Matrix	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Seneca Valley Virus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SIV- Sequencing <input type="checkbox"/> H <input type="checkbox"/> N <input type="checkbox"/> M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tritrichomonas foetus	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> † see key
<input type="checkbox"/> BLV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Clostridium perfringens <input type="checkbox"/> † see key	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> E coli (Genotyping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Mycoplasma bovis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Key:**  
 \*=Serum=10 max, Blood=20 max, Ear Notch=20 max, Milk (bulk) do not pool.  
 †=Genotyping: requires positive culture first.  
 ‡= Check with individual state regulations before pooling.

**Bacteriology:**  Campylobacter  Johne's Disease - Culture = 8 weeks

**Comments/Special Requests:** (Please use all species herd health form ID sheet for animal IDs).

This is not an official Federal test form. Use Laboratory VS Forms for Brucellosis and EIA. The ADRDL is an accredited AAVLCO Laboratory and a member of the USDA National Animal Health Laboratory Network. Completing and submitting any submission form or any other means of requesting services creates a contractual agreement for services requested and the specimens submitted become the property of ADRDL. At no additional expense to our clients, specimens submitted to the ADRDL may be subjected to additional testing upon the order of state or federal animal health officials, or when a Foreign Animal Disease is suspected, or in support of surveillance for other animal diseases.





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8630

### SDSU ADRDL

### ID Submission Sheet - Use with all forms.

Please submit an electronic copy to: [sdsu.adrdl@sdsu.edu](mailto:sdsu.adrdl@sdsu.edu)

Tube #	Specimen ID	Breed	Age	Sex
1	1808-AEX 3984	AA	34	M
2	1809-46AEX 3985	↓	↓	↓
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