

GENERAL SUBMISSION / NECROPSY FORM

VSD.ADRDL.FORM.SPR.0001.03 Last Revised 3.10.11



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Accession Number S
 Date AS

This box is for client's internal use only.



20-9526

Sioux Nation Pet Clinic
Dr. Jessica Devins

 Zip _____
 Fax _____

Copy to _____
 Export to _____
OWNER Jessica Devins
 Premise ID _____ State _____
 City _____
 State _____ Zip _____
 Phone _____ Fax _____

HISTORY
 (include signs of suspect rabid animal if appropriate)

Coggins
all ready sent paperwork

Gross Necropsy Lesions

SPECIES Equine # in Herd _____
 Breed _____ # Dead _____
 Age _____ Sex _____ # Sick _____
Animal ID Number(s) _____

CHECK ANY THAT APPLY:
 Diarrhea Pneumonia Lameness
 Abortion CNS Other _____
 Vaccinations _____
 Treatments _____

IS THIS A RABIES SUSPECT? NO YES
 Pet Stray Wildlife

WAS THIS ANIMAL VACCINATED FOR RABIES?
 NO YES When? _____

DID THIS ANIMAL EXPOSE ANY OTHER ANIMALS TO RABIES?
 NO YES Type? _____

HUMAN EXPOSURE?
 Person(s) _____
 Address _____
 City _____ State _____

IF RABIES IS NEGATIVE DO YOU WANT A COMPLETE NECROPSY? NO YES

Tentative Diagnosis

IF SWINE SIV SUBMISSION:
 Sick Pigs H1N1 Public Health Investigation
 Commingled Pigs

OF SPECIMENS AF 2 BS Date Collected _____ Body Serum Whole Blood Feces

Tissue (list) _____ Fluid/Swab _____

I request a complete diagnostic examination (at discretion of Laboratory)

I request ONLY the following services/tests:
 Bacteriology Histopath Virology Molecular Diagnostics (PCR) Immunohistochemistry
 Serology Parasitology Rabies Test Tox Exam (list specific toxin) _____

This is not an official Federal test form. Use Laboratory VS Forms for Brucellosis and EIA. The ADRDL is an accredited AAVLD 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 the 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