

SAMPLES TAKEN Date: ____/____/____ (yyyy/mm/dd) Time of day ____:____

Date sent ____/____/____ yyyy/mm/dd)

SUBMITTED BY Veterinarian Owner Agent

BILL Veterinarian Agent Owner

Important. Please read. Contact Information must be supplied with all samples submitted for testing to the Animal Health Lab ("AHL"). Agricultural animal testing carried out through AHL is subsidized by the Government of Ontario. By submitting samples for testing to AHL, the submitter acknowledges that s/he is the owner or is a duly authorized agent of the owner. The submitter acknowledges and agrees that AHL may share test results and contact information as it deems necessary for the purposes of relevant legislation regarding reportable or notifiable diseases and for the purpose of surveillance of animal or public health in Ontario.

Clinic No. AHL USE TEMPLATE: SMALLFLOCKPM-001	Owner
Clinic	Complete Home Address including 911 number
Address	Postal Code
City	Phone
Veterinarian	Fax
Email	Phone Fax
Project : AHL Small poultry flock project	Email

*****DEMOGRAPHIC INFORMATION IMPORTANT*****

Type of Bird (check)

Flock Size _____	Species Avian	Chicken (small flock)	Turkey (small flock)
No. at risk _____		Waterfowl: Duck	Goose
No. sick _____	Breed _____ Sex: F M mixed	Gamebird: quail	partridge pheasant
No. dead _____	Age _____ d w m y	grouse	peacock
Weight _____ kg	Purpose, (check) :	Meat breeder	layer breeder
Duration of problem __d __wks __m __y		dual purpose	meat breeder exhibition

Animals submitted	#live	#dead	Other specimens
Date/time of death	<input type="checkbox"/> Died or <input type="checkbox"/> Euthanized/method		

CLINICAL HISTORY List clinical problems (e.g. nervous, diarrhea, pneumonia, etc.)

1	3
2	4

Relevant History (include additional information regarding flock, composition, source of birds, date(s) of onset of problems)

Requirements to be part of the Project

Name of Vet (Reports only go to Vet)

Fully Completed AHL Submission form

Fully Completed Husb. & Bios. Questionnaire

Owner Signed Consent Form

Payment of \$25.00

Suitable Samples

Clinical pathology

Summary of recent therapy

Vaccinations (in hatchery, on farm)

Management (housing, nutrition, etc.)

Private Cremation?

YES

NO

POSSIBLE

Insurance and potential litigation cases are not included in this project. Charges associated with private cremation including lab associated fees are in addition to the \$25.00 fee.

SPECIFIC INSTRUCTIONS

Any questions? Please contact the lab.

Email: ahinfo@uoguelph.ca
Website: <http://ahl.uoguelph.ca>
AHL GUELPH: 519-824-4120 ext: 54530, Fax: 519-827-0961
AHL KEMPTVILLE: 613-258-8320, Fax: 613-258-8324

AHL - Guelph Courier Address
UoG Animal Health Lab-PAHL
419 Gordon Street-Bldg 89
Guelph, ON N1G 2W1
Attn: Specimen Reception

Animal Health Laboratory
Laboratory Services Division
Univ of Guelph/Kemptville
Campus
79 Shearer Street
Kemptville, Ontario K0G 1J0