

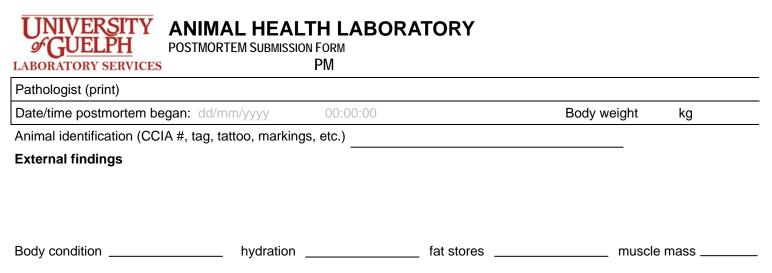
ANIMAL HEALTH LABORATORY

POSTMORTEM SUBMISSION FORM

PM

Lab use only

SAMPLES TAKEN Date:/ /(yyyy/mm/dd) T SUBMITTED BY OVeterinarian OOwner OAge		_ Date sent/_ BILL O Veterinari			
important. Please read. Contact Information must be supplied wi subsidized by the Government of Ontario. By submitting samples submitter acknowledges and agrees that AHL may share test resu diseases and for the purpose of surveillance of animal or public he	th all samples submitted for testing to AHL, the su lts and contact informati	I for testing to the Animal ubmitter acknowledges the	I Health Lab ("AHL"). Agricultural an nat s/he is the owner or is a duly au	thorized agent of the owner. The	
Clinic No.		Owner Unique ID (max. 40 characters)			
Clinic					
Address Postal Code		Address			
City Phone		Premises ID Barn Postal Code			
Veterinarian Fax		Phone Email			
Email		Farm Fax			
Project		Barn/Pen/Floor/Batch ID			
DEMOGRAPHIC INFORMAT	ION IMPORTA	NT	Commodity (check)		
Species	Herd Size		Ruminant	Dairy Other	
Draad	No. at risk			-	
Breed	No. sick		Swine □Sow □Finishe □Boar Other	er Nursery/Weaner	
Age ──────□d □w □m □y Sex □F □M □N	No. dead				
Animal ID	Weight kg		Layer-breeder	□Exhibition □Small Farm	
For additional animals please add extra page or send Excel spreadsheet, ahlinfo@uoguelph.ca	Duration of problem daysweeks_		Turkey ⊟Breeder ⊟Me	at □Exhibition □Small Farm	
Animals submitted #live #dead	#fetus	□ Place	nta Other specimens		
Date/time of death		Died	or D Euthanized/metho	d	
CLINICAL HISTORY List clinical problem	ns (e.g. nervou	s, diarrhea, pneu	umonia, etc.)		
1		3			
2		4			
Relevant History (include date(s) of onset	of problems)			Rabies suspect? Insurance claim? Possible litigation?	
Clinical pathology		Private Cremation? YES NO POSSIBLE SPECIFIC INSTRUCTIONS			
Summary of recent therapy					
Vaccinations					
Management (housing, nutrition, etc.)			Resubmission/Quote	9#	
Any questions? Please contact th Email: ahlinfo@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	UoG 4 419 G Guelp	- Guelph Courier Addre Animal Health Lab-PAHL Sordon Street-Bldg 89 oh, ON N1G 2W1 Specimen Reception		vísion ille	



Internal findings

Clinical problems answered at postmortem (list)

POSTMORTEM DIAGNOSIS		Time postmortem completed Telephoned Date/time		
 Photos taken Radiographs taken Legal case-additional charges apply Out of hours charges applied 		Pathologist _		DVM
TESTS REQUESTED				

Bact	Mycoplasma	Parasitology	Histo
Virology	Clin path	Тохі	Other
		Serology/Immunology	Hold