

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

SUBMITTED BY: Veterinarian Owner Agent BILL: Veterinarian Agent Project

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: OAHNPARASIT-001	Owner unique ID (max. 40 characters)	
Clinic		
Address	Postal code	Address
City	Phone	Premises ID Farm postal code
Veterinarian	Fax	Phone Email
Email		Farm Fax
Project OAHN Bovine - Parasitism in Grazing Cattle in Ontario	Barn/pen/floor/batch ID	

AHL Additional Reporting

Cynthia Miltenburg-cynthia.miltenburg@ontario.ca
Jessica Gordon-jgordo04@uoguelph.ca

Please fill out the below information:

Commodity (check). <input type="checkbox"/> Meat <input type="checkbox"/> Dairy Herd size: _____	Last anthelmintic (dewormer) treatment - (d/m/y) _____ Product used (please circle): ivermectin or fenbendazole or other _____
Group Type: <input type="checkbox"/> cow-calf pairs <input type="checkbox"/> yearlings <input type="checkbox"/> stockers <input type="checkbox"/> heifers	***Note: A small number of farms with high results may be contacted to submit additional samples for research purposes***

Test Request:

Fecal egg count, Wisconsin **fecrw**

Sampling instructions:

- Collect feces from 5-10 individual animals (approx. 1g or blueberry sized/animal).
- Combine and place a golf-ball sized sample in a screw top container.
- Label accordingly.



Animal ID's:

○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____
 ○ _____

SPECIMENS

Sent	Received
	Feces

Other:

VIA:

- Courier
 Drop-off
 Mail
 Other

RECEIVED BY:

Any Question? Please contact the lab.

Email: ahinfo@uoguelph.ca
 Website: http://ahl.uoguelph.ca
 AHL GUELPH: 519-824-4120 ext: 54530, Fax: 519-821-8072
 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