

Poultry Form

Veterinary Diagnostic Services

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W: www.manitoba.ca/agriculture/vds



☐ Routine ☐ Legal ☐ Rush (advanced notice and history required, fees apply) _____

☐ Commercial ☐ Small farm flock (less than 1000 birds) Flock size _____

Referring veterinarian _____ Clinic/Institution (of referring veterinarian) _____

Alternative billing (billed to clinic above if not otherwise specified) _____

Additional report to (limit of one) _____

Information including physical location and premises identification number are required for the purpose of effective reporting and traceability

Owner/Farm name _____ Farm location _____
(Legal Land Location and Municipality)

Premises # _____ Reference/Flock ID (info to be included on report) _____

Production type:

☐ chicken pullet ☐ chicken layer ☐ chicken layer breeder ☐ chicken broiler ☐ chicken broiler breeder

☐ turkey meat ☐ turkey breeder ☐ duck ☐ goose ☐ other _____

Related case # _____ Sample collection date _____

Age _____ d ☐ w ☐ m ☐ y ☐ Sex M ☐ F ☐

History (vaccinations, treatments, mortalities, etc.)

☐ table for ID numbers and continued history located on back page

Samples submitted:

live _____ # dead _____ # sera _____ # conjunctival swabs _____ # fecal swabs _____ # infraorbital sinus swabs _____

oropharyngeal swabs _____ # yolk sac swabs _____ # environmental swabs _____ # lung _____ # trachea _____

sponges _____ # dust _____ # fluffs _____ # booties _____ # chick paper _____ fixed: _____

fresh: _____ other: _____

ANATOMIC PATHOLOGY

- ☐ Necropsy
- ☐ Histopathology

MICROBIOLOGY

Bacteriology

- ☐ Culture & Sensitivity
- ☐ Salmonella culture
(environmental samples)

Mycology

- ☐ Fungal culture

Parasitology

- ☐ Direct exam
- ☐ Fecal flotation
- ☐ Parasite ID

VIROLOGY

PCR

- ☐ Avian Influenza A virus (AIV)
- ☐ Avian Metapneumovirus (aMPV) A, B, C
- ☐ Avian orthoreovirus
- ☐ Chicken anemia virus (CAV)
- ☐ Chlamydia psittaci
- ☐ Infectious bronchitis virus (IBV)
- ☐ Infectious bursal disease virus (IBDV)
- ☐ Infectious laryngotracheitis virus (ILT)
- ☐ Marek's disease virus (MDV)
- ☐ Mycoplasma gallisepticum (MG)
- ☐ Newcastle disease virus (APMV -1)
- ☐ Ornithobacterium rhinotracheale (ORT)
- ☐ West Nile virus (WNV)

VIROLOGY

ELISA

- ☐ Avian encephalomyelitis virus (AEV)
- ☐ Avian orthoreovirus
- ☐ Chicken anemia virus (CAV)
- ☐ Infectious bronchitis virus (IBV)
- ☐ Infectious bursal disease virus (IBDV)
- ☐ M. gallisepticum & M. synoviae (MG & MS)
- ☐ M. meleagridis (MM) (turkey only)
- ☐ Newcastle disease virus (APMV -1)

Send out: Please specify test & Referral Lab

Name of submitter (please print)



Continued History and Sample ID Numbers

Veterinarian Owner

<u>Sample Number</u>	<u>Sample ID</u>	<u>Sample Number</u>	<u>Sample ID</u>
<u>1</u>		<u>15</u>	
<u>2</u>		<u>16</u>	
<u>3</u>		<u>17</u>	
<u>4</u>		<u>18</u>	
<u>5</u>		<u>19</u>	
<u>6</u>		<u>20</u>	
<u>7</u>		<u>21</u>	
<u>8</u>		<u>22</u>	
<u>9</u>		<u>23</u>	
<u>10</u>		<u>24</u>	
<u>11</u>		<u>25</u>	
<u>12</u>		<u>26</u>	
<u>13</u>		<u>27</u>	
<u>14</u>		<u>28</u>	

Privacy Notice:
By submitting this Form, the Submitter acknowledges and agrees that: (1) all information provided on this form is complete and true to the best of their knowledge; (2) if the Submitter is not the owner of the animal(s), then the Submitter is the authorized agent of the owner or has been authorized by the owner to submit this Form and the sample(s); (3) the Submitter consents to disclosures of submitted information and materials and test results to any persons or entities identified on this Form and any necessary persons and entities as required by legislation respecting reportable diseases and for the surveillance and protection of animal and human health; and (4) the Submitter has read and understands the notices on the Veterinary Diagnostic Services Laboratory (VDS) website respecting confidentiality, disclosure, privacy and ownership of submitted materials.

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