

Infectious Diseases Laboratory
 110 Riverbend Rd
 Riverbend North, Rm. 150
 University of Georgia
 Athens, GA 30602
 Phone: (706) 542-8092 FAX: (706) 583-0843
 www.idl-uga.com or www.vet.uga.edu/idl



AVIAN AND EXOTICS SUBMISSION FORM

For Laboratory Use Only

SUBMISSION NO: _____

Date Received: _____

Doctor's Name: _____

Phone: () _____

Hospital: _____

FAX: () _____

Address: _____

Email: _____

City: _____ State: _____ Zip: _____

Receive results by: FAX _____ or Email _____

Please use one form for each owner - more than one animal can be entered on a form. Please fill in the information requested and Print Clearly. The sample(s) required and the prices are listed with each test. Circle the underlined test(s) requested for each patient, circle the sample(s) to be run for each test and double check that the sample(s) enclosed match the test(s) requested.

OWNER : _____ SAMPLE DATE : _____

1 Patient ID:	Species:	Breed:	Age:	Sex:
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AVIAN Tests - DNA Probes

<u>Psittacine Circovirus - 1 (PBFDV)</u>	whole blood	\$20.00
	environmental swab	\$20.00
<u>Psittacine Circovirus - 2 (PBFDV)</u>	whole blood	\$20.00
	environmental swab	\$20.00
<u>Psittacine Circovirus- 1 & 2</u>	whole blood	\$34.00
	environmental swab	\$34.00
<u>Avian Polyoma virus</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Chlamydia spp.</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Pacheco's Disease Virus</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Sex Identification</u>	whole blood	\$20.00

Other Tests

<u>Avian Virus Isolation (in tissue culture)</u>	\$75.00
refrigerated/frozen fresh tissue	
for Any Species	
<u>Salmonella spp. DNA probe for screening test</u>	\$28.00
swab of excrement or cut tissue	
<u>Blood Culture</u>	\$32.00
0.75 to 1 ml of blood in BBL SEPTI-CHEK-BHI 20 ML bottle	
<u>Culture and Sensitivity</u>	\$32.00
Sterile tissue swab Must state what tissue was sampled	
<u>West Nile Virus Antibody Titer</u>	\$20.00
Sterile Serum	

AVIAN Tests - Antibody Titers

<u>Avian Polyomavirus</u>	separated, non-hemolyzed serum	\$16.00
<u>Chlamydia spp. (EBA)</u>	separated, non-hemolyzed serum	\$24.00
<u>Chlamydia spp. (IFA)</u>	separated, non-hemolyzed serum	\$32.00
<u>Pacheco's Disease Virus</u>	separated, non-hemolyzed serum	\$16.00

AVIAN Panels - DNA Probes and Serology or Histopathology

<u>Psittacine Circovirus Feather Pathology</u>	whole blood and blood feather with skin attached in 10% buffered formalin	\$65.00
<u>Psittacine Circovirus [1 and 2] Feather Pathology</u>	whole blood and blood and feather with skin attached in 10% buffered formalin	\$80.00
<u>Avian Polyomavirus Panel</u>	swab and whole blood and separated non-hemolyzed sterile serum	\$52.00
<u>Chlamydia Panel</u>	swab and whole blood and separated non-hemolyzed serum (choose either EBA or IFA)	(EBA) \$57.00 (IFA) \$64.00
<u>Chlamydia Panel</u>	swab and whole blood and separated non-hemolyzed serum (both EBA and IFA)	\$81.00
<u>Pacheco's Disease Virus Panel</u>	swab and whole blood and separated non-hemolyzed sterile serum	\$52.00

for RABBITS

Pasteurella multocida	
<u>Clinically ill rabbits Panel</u>	\$36.00
separated, non-hemolyzed serum and deep nasal swab	
Screening test	
Antibody	separated, non-hemolyzed \$18.00
DNA Probe	deep nasal swab \$20.00

PAYMENT and REPORTING: A bill will be sent at the end of the month for all tests received during that calendar month unless payment is received with sample. We can not accept credit cards for payment. Checks should be made to the Infectious Diseases Laboratory. Results will be sent to a secure FAX machine if a FAX number is given or returned by first class mail. The receiver accepts responsibility for the security of the receiving FAX machine.

Check #: _____ Amount: _____

PO: _____

Veterinarian's Signature -Required for sample testing.

Billing Name and/or Address if different from above.

My signature certifies that I have read and understand the instructions given for sample submission. Additionally, I accept that the records of the Infectious Diseases Laboratory of the University of Georgia's College of Veterinary Medicine are confidential to the extent allowed by the law and the policies of the University of Georgia as defined by the Board of Regents. No results can be given by telephone. In no event shall the Infectious Diseases Laboratory, the personnel of the Infectious Diseases Laboratory, the College of Veterinary Medicine, the University of Georgia, the Board of Regents nor the State of Georgia be liable for incidental, consequential, special or other damages arising from the testing of sample(s) or the providing of test results.

IDL - AVIAN AND EXOTICS SUBMISSION FORM

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Submission No. _____

2 Patient ID:	Species:	Breed:	Age:	Sex:
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AVIAN Tests - DNA Probes

Other Tests

<u>Psittacine Circovirus - 1 (PBFDV)</u>	whole blood	\$20.00
	environmental swab	\$20.00
<u>Psittacine Circovirus - 2 (PBFDV)</u>	whole blood	\$20.00
	environmental swab	\$20.00
<u>Psittacine Circovirus- 1 & 2</u>	whole blood	\$34.00
	environmental swab	\$34.00
<u>Avian Polyoma virus</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Chlamydia spp.</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Pacheco's Disease Virus</u>	choanal/cloacal swab	\$20.00
	whole blood	\$20.00
<u>Sex Identification</u>	whole blood	\$20.00

<u>Avian Virus Isolation (in tissue culture)</u> <i>refrigerated/frozen fresh tissue</i>	\$75.00
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for Any Species

<u>Salmonella spp.</u> DNA probe for screening test <i>swab of excrement or cut tissue</i>	\$28.00
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<u>Blood Culture</u> <i>0.75 to 1 ml of blood in BBL SEPTI-CHEK-BHI 20 ML bottle</i>	\$32.00
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<u>Culture and Sensitivity</u> <i>Sterile tissue swab</i> Must state what tissue was sampled	\$32.00
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<u>West Nile Virus Antibody Titer</u> <i>Sterile Serum</i>	\$20.00
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AVIAN Tests - Antibody Titers

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<u>Chlamydia spp. (EBA)</u>	separated, non-hemolyzed serum	\$24.00
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for RABBITS

<u>Pasteurella multocida</u> <u>Clinically ill rabbits</u> Panel	\$36.00
<i>separated, non-hemolyzed serum and deep nasal swab</i>	

<u>Screening test</u> Antibody	<i>separated, non-hemolyzed</i>	\$18.00
DNA Probe	<i>deep nasal swab</i>	\$20.00

AVIAN Panels - DNA Probes and Serology or Histopathology

<u>Psittacine Circovirus Feather Pathology</u>	whole blood and blood feather with skin attached in 10% buffered formalin	\$65.00
<u>Psittacine Circovirus [1 and 2] Feather Pathology</u>	whole blood and blood and feather with skin attached in 10% buffered formalin	\$80.00
<u>Avian Polyomavirus Panel</u>	swab and whole blood and separated non-hemolyzed sterile serum	\$52.00
<u>Chlamydia Panel</u>	swab and whole blood and separated non-hemolyzed serum (EBA) \$57.00 (choose either EBA or IFA) (IFA) \$64.00	
<u>Chlamydia Panel</u>	swab and whole blood and separated non-hemolyzed serum (both EBA and IFA)	\$81.00
<u>Pacheco's Disease Virus Panel</u>	swab and whole blood and separated non-hemolyzed sterile serum	\$52.00

IDL - AVIAN AND EXOTICS SUBMISSION FORM

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Other Tests

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<i>refrigerated/frozen fresh tissue</i>	

for Any Species

<u>Salmonella spp. DNA probe for screening test</u>	
<i>swab of excrement or cut tissue</i>	
	\$28.00

<u>Blood Culture</u>	
<i>0.75 to 1 ml of blood in BBL SEPTI-CHEK-BHI 20 ML bottle</i>	
	\$32.00

<u>Culture and Sensitivity</u>	\$32.00
<i>Sterile tissue swab</i>	
<i>Must state what tissue was sampled</i>	

<u>West Nile Virus Antibody Titer</u>	\$20.00
<i>Sterile Serum</i>	

AVIAN Tests - Antibody Titers

<u>Avian Polyomavirus</u>	separated, non-hemolyzed serum	\$14.00
<u>Chlamydia spp. (EBA)</u>	separated, non-hemolyzed serum	\$24.00
<u>Chlamydia spp. (IFA)</u>	separated, non-hemolyzed serum	\$32.00
<u>Pacheco's Disease Virus</u>	separated, non-hemolyzed serum	\$14.00

for RABBITS

<u>Pasteurella multocida</u>	
<u>Clinically ill rabbits Panel</u>	\$36.00
<i>separated, non-hemolyzed serum and deep nasal swab</i>	

<u>Screening test</u>	
Antibody	<i>separated, non-hemolyzed</i>
DNA Probe	<i>deep nasal swab</i>
	\$18.00
	\$20.00

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<u>Chlamydia Panel</u>	swab and whole blood and separated non-hemolyzed serum <i>(choose either EBA or IFA)</i>	(EBA) \$57.00 (IFA) \$64.00
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