

C.E. KORD ANIMAL HEALTH DIAGNOSTIC LAB

436 Hogan Rd, Nashville, TN 37220 (UPS/Fed Ex) | P.O. Box 40627, Nashville, TN 37204 (USPS)
 Office: 615.837.5125 | Fax: 615.837.5250

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HPAI BOVINE SUBMISSION FORM

DATE: _____

Submitter Information			
Submitter Name:		Vet Clinic (If applicable):	
Address:		Zip:	County:
Phone:	Fax:	Email:	
Report Distribution:	Email	Fax	USPS

Owner Information (If different from submitter)			
Owner Name:			
Address:		Zip:	County:
Phone:	Fax:	Email:	
Report Distribution:	Email	Fax	USPS

Premise Information – Location of animals			
Site Name:		County:	
Address:		Zip:	City:
Premise ID:			

Purpose of Test		Samples (list tube # and animal ID on following page)	
State Herd Status	Movement	Collection Date: _____	
Clinical	FAD	Collected by: _____	
Non-Clinical	FAD#: _____ (if applicable)	Type: Milk	Bulk Tank Milking Stand
	Positive Premise Testing	Milk Tanker	Serum

History, Description of Disease

Requested Test
PCR Serology (serum only) Other: _____ Please list tubes on following page



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Tube	ID#	Sex	Age	Species/Breed	Comments
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