

Lab Use Only	UNH No _____
	Charges: _____

New Hampshire Veterinary Diagnostic

University of New Hampshire
 21 Botanical Lane
 Durham, NH 03824
 603-862-2726; fax: 603-862-0179
 www.nhvdl.unh.edu



Submissions – Scrapie, BSE and CWD

Submission date: _____	Owner: _____
Veterinarian: _____	Address: _____
Clinic/Hosp: _____	City/Town: _____ State: _____
Address: _____	Send report by:
City/Town: _____ State _____ Zip _____	<input type="checkbox"/> Mail
Phone: _____	<input type="checkbox"/> Fax _____
	<input type="checkbox"/> Email _____

Scrapie Submissions

Is owner enrolled in the voluntary scrapie flock certification program? Yes No Flock (Premises ID): _____

Species: Ovine Breed _____ Face color _____

Species: Caprine Breed _____ Type: dairy meat fiber multipurpose

Was animal: Born on premises Purchased Reason for submission: CNS Signs Surveillance Other: _____

Animal ID/Name: _____ Sex: _____ Age: _____ Date/time of death: _____

Specimen submitted: _____ How has body been stored: _____

BSE Submissions

Species: Bovine Other _____ Breed: _____ Animal ID/Name: _____ Sex: _____ Age: _____

Primary reason for submission: CNS Signs Surveillance Other: _____

Specimen submitted: _____ Date/time of death: _____ How has body been body stored: _____

CWD Submissions

Species: Elk Deer Other: _____

Primary reason for submission: CNS Sign Surveillance Other: _____

Specimen submitted: Head Brain Body Other: _____ No. of samples submitted: _____

Animal ID/Ear tag	Sex	Age	Animal ID/Ear tag	Sex	Age

