

Maryland Department of Agriculture
 Salisbury Animal Health Laboratory
 27722 Nanticoke Road, Unit 3
 Salisbury, MD 21801
 Phone: (410) 543 6610

SWINE INFLUENZA SURVEILLANCE PROGRAM
Swine Influenza Testing Submission Form

LAB USE ONLY

LIMS ACCESSION # _____

ACCESSIONED BY: _____

NVSL BARCODE: _____

TIME / DATE RECEIVED: _____

Chain of custody: Person performing task must initial

Sample prep for testing : _____

PCR Technician : _____

Disposal : _____

TIME / DATE REPORT OUT: _____

DATE COLLECTED:	COLLECTED BY:
	DELIVERED BY:
COLLECTION SITE LOCATION: COUNTY: _____ PREMISE ID: (if applicable) _____	
ADDRESS: _____ PHONE: _____	
STATE: _____	ZIP CODE: _____
COLLECTION SITE TYPE: (Circle one) PRODUCER FARM MARKET AUCTION EXPO FAIR	
OTHER: (Specify)	
AGE: (weeks – days)	SPECIMEN TYPE:
SAMPLE ORIGIN:	SURVEILLANCE:
CLASS OF SWINE: (Circle one) SOW BOAR GROWER FINISHER NURSERY SUCKLING	
OTHER: (Specify)	
TOTAL NUMBER IN HERD:	
ATTENDING PRACTICIONER NAME: _____	
CONTACT INFORMATION: PHONE: _____ FAX: _____	
ADDRESS: _____	
E-MAIL: _____	

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OWNER'S NAME: _____

CONTACT INFORMATION: PHONE: _____ FAX: _____

ADDRESS: _____

E-MAIL: _____

Mortality : (**per day**)

HISTORY: (reason for submission)

TREATMENT: (**if any**)

SAMPLES SUBMITTED: (DO NOT POOL SAMPLES)

ANIMAL ID:

- | |
|-----|
| 1) |
| 2) |
| 3) |
| 4) |
| 5) |
| 6) |
| 7) |
| 8) |
| 9) |
| 10) |