

DIAGNOSTIC REQUEST FORM CATTLE



AniCon Labor GmbH

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Date

VET CLINIC

Veterinarian

Clinic

Address

Address

Phone

Fax

E-Mail

FARM/PRODUCER

Name

Site/Barn

Address

Phone

Fax

E-Mail

LAB. NUMBER OF THE VETERINARIAN

Send Results to Veterinarian Producer Send copy of results to:

Send Bill to Veterinarian Producer

CASE HISTORY

Species

Ear tag number

Age

History & Clinical Signs: (Diarrhea, pneumonia, CNS, post mortem results, etc.)

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SAMPLES SUBMITTED

Swab

Whole Body

Brain

Lung

Heart

Liver

Kidney

Spleen

Lymph Node

Tonsil

Intestine

Other

Save Isolates

Yes No

EXAMINATION REQUESTS

Post-mortem examination

- Targeted sampling
- Patho-anatomical reporting

Cultural Assays

BACTERIOLOGY

- Aerobic Culture
- Specific Culture:
 - Cl. perfringens
 - Cl. difficile
 - Mycoplasma spp.
 - Salmonella spp.
- Sensitivity

VIROLOGY

- Isolation Rota
- Isolation Influenza A
- Other Instructions:

Other Instructions

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Parasitology

- Smear of the intestine:
- Coccidia
 - Flotation (worm eggs)
 - PCR: Cryptosporidia

PCR: Detection of Pathogens

- Bovine Virus-Diarrhoea-Virus (BVDV)
- Bovine Coronavirus
- Bovine Herpes Virus-1 (BHV-1; IBR)
- Bovine Respiratory Syncycial-Virus (BRSV)
- Chlamydiaceae
- Cryptosporidium parvum
- E. coli virulence genes
- Histophilus somni
- Klebsiella pneumoniae
- Mycobacterium avium ssp. paratuberculosis (Myc. ptbc.)
- Mycoplasma bovis
- Parainfluenza 3 (PI-3)
- Rotavirus A (BRV)
- Pasteurella multocida
- Others:

PCR: Characterization of Pathogens

- Pasteurella multocida (capsule typing)
- Clostridium perfringens (toxin genes)
- Clostridium difficile (toxin genes)

Zustand der Einsendung

AniCon-Labortagebuch-Nummer

Paketdienst

Eingangsdatum

Annahme (Kürzel)