

Bovine Viral Diarrhea Virus testing submission form Detection of BVDV infection in alpaca

Identification of persistently infected alpaca

GeneSeek, Inc. Veterinary Diagnostics Division 4131 N. 48 th Street Lincoln, NE 68504 Tel.: (402) 435-0665 Fax: (402) 435-0664		Order	Date samples received Order ID Sample condition			
	, ,		Owner_			
Clinic			Farm/address			
Tel.	Fax					
e-mail		Tel./ <u>e</u> -	mail			
Number of sa	amples submitted:	Reporting resu	ılts by (please indi	hard co	ppy mailed (add \$1.00)	
Sample requir	immediately after	cover at least half of	the circle on the f room temperatur	ilter paper. Cards s e. Spotted cards sh		
_	s much information as possible to fac			1	1	
card #	alpaca name	date of birth	microchip #	registration #	date sampled	
Payment Information: Wisa Mastercard Discover		Name/Signature: Credit Card Number:			- 3-digit security code (on back of card):	
		Expiration Date:			_	