

AQUATIC SUBMISSION FORM

Indiana Animal Disease Diagnostic Laboratories

ADDL at Purdue University
 406 S University St.
 West Lafayette, IN 47907-2065
 765-494-7440 Fax 765-494-9181
 www.addl.purdue.edu

HEEKE-ADDL-SIPAC
 11367 E Purdue Farm Road
 Dubois, IN 47527-9666
 812-678-3401 Fax 812-678-3412

ADDL USE ONLY

Owner or Property Name (Hatchery)

District Name (Fish Management) _____

Address _____

City, State, Zip _____

County _____

Referring Veterinarian _____

Practice/Clinic Name _____

Address _____

City, State, Zip _____

Billing and Account Information

Other ID

Water Body Name

GPS Coordinates

Water Temperature

Email Results?	YES	NO	Email Address	_____	Contact Person	_____
Fax Results?	YES	NO	Fax Number	_____	Office No.	_____

Species _____ Age _____ day, wk, mo, yr Strain _____

System: Flow-through _____ Recirculating _____ Net Pen _____ Earthen Pond _____ Other _____

Water Source: Open _____ Closed _____

Health Testing _____ Diagnostic Testing _____ No. Submitted: _____

History (including clinical findings and treatments): Attach additional sheets if necessary.

Specimen Submitted	Nec	Histo	Bac	Sens	Vir	PCR	Tox (specify test)	Other (specify test)
1.								
2.								
3.								
4.								
5.								
6.								
7.								

Signature of Submitter _____ Date _____

Clients submitting specimens have agreed to ADDL testing procedures, policies, and fees. Specimens and derived isolates become the property of the Indiana ADDL. Additional testing may be done: 1) to meet state or federal surveillance programs, 2) by order of state or federal animal health officials, or 3) when a Foreign Animal Disease is suspected. This form only lists frequently requested tests. For the complete list of tests, consult the ADDL Fee Schedule.

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