



Manitoba Agriculture, Food and Rural Initiatives
 Veterinary Diagnostic Services
 Livestock Knowledge Centre
 Agricultural Services Complex
 545 University Crescent,
 Winnipeg, Manitoba, R3T 5S6
 Tel.: (204) 945-8838 FAX: (204) 948-2654

AVIAN SUBMISSION

SUSPECT AVIAN INFLUENZA: yes , no Incident number _____
 ALL INFORMATION MUST BE COMPLETE

Clinic / Institution / Feed Company _____ Client Code _____

Farm Name _____ Client Code _____ Farm Owner _____

Farm Address _____ Postal Code _____ Phone _____

Farm Land Location _____ Billing Entity _____

Contact Person: Farm _____ Institution _____ Previous Case # _____

Report To _____ Sample collection date _____

Commercial , Small Farm Flock

Broiler , Broiler Breeder , Layer , Layer Breeder , Turkey , Turkey Breeder , goose , Other _____

Multiple ages on farm , multiple ages in same barn , other poultry on farm , other livestock _____

Strain/Breed _____ Age _____ Sex _____ Flock Size _____

Barn ID _____ Flock ID _____ Birds submitted: # Live _____ # Dead _____

Specimen: sera # _____, fecal swab # _____, env. swab # _____, litter # _____ fluff # _____ tracheal swab # _____

Tissues: fixed _____ fresh _____

Hatchery Source _____ Feed Co. _____

Litter Condition _____ Air Quality _____

Water Chlorinated: YES , NO Medicator Hooked Up: YES , NO

Vaccinations/age _____

	Sun.	Mon.	Tue.	Wed.	Thur.	Fri.	Sat.	Sun.	Mon.	Tue.	Wed.	Thur.	Fri.	Sat.	TOTAL
NO. DEAD															
NO. SICK															
%EGG PROD															

CLINICAL SIGNS: diarrhea , lameness , egg drop , respiratory , sudden death , weight loss , nervous , other _____

HISTORY _____

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SERVICE REQUEST: necropsy , histology , culture , Salmonella screen , Elisa , AI PCR , PCR other _____

ELISA serology: # of Sera

Newcastle	#	Infectious Bursal Disease	#	Infectious Bronchitis	#	Chick Anemia V	#
Reovirus	#	Avian Encephalomyelitis	#	Avian Influenza	#		
MG	#	MS	#	MM	#		

Signature of Person Submitting _____

Company _____

Time received: _____, Via: courier , Drop-off , Mail , Other _____ Received By: _____

The personal information on this form is being collected under the authority of *The Animal Diseases Act* and will be used only for the purposes intended under that legislation. It is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act*. Enquiries should be directed to the Director, Veterinary Services Branch, as listed above.

All sera should be separated and labeled. \$ 0.50 / sample will be charged for separating serum.

MG 12383 (REVISED: July 2006)