

LAB USE ONLY
(Insert Barcode)

Submission Form for Poultry Serologic & PCR Testing Meat-Type and Egg-Type Pullets and Breeding Chickens

Poultry Research & Diagnostic Laboratory
Shipping Address:
 3137 Hwy 468 West
 Pearl, MS 39208
 Phone: (601) 420-4700

****PLEASE COMPLETE ALL FIELDS OF THIS FORM****

Company name: _____		Company division: _____		Company address: _____	
Farm name: _____		Premises ID: _____		House no.: _____ No. Houses on Farm: _____	
Breed: _____	Broiler Breeder (Primary) <input type="checkbox"/> or Broiler Breeder (Multiplier) <input type="checkbox"/> Broiler Breeder Pullets <input type="checkbox"/>	Layer Breeder (Primary) <input type="checkbox"/> or Layer Breeder (Multiplier) <input type="checkbox"/> Layer <input type="checkbox"/>	Broiler Breeder Spike males <input type="checkbox"/>		
Date of hatch: _____	Age: _____ (days <input type="checkbox"/> / weeks <input type="checkbox"/>	No. of males/flock: _____	No. of females/flock: _____	Total birds in flock: _____	
<u>Samples submitted</u>		No. of sera: _____	No. of MGMS swabs: _____	No. AI swabs/tube: _____	No. BHI tubes: _____
<u>SEROLOGY</u>					
MG (NPIP MG Clean)	Primary breeders:	300/flock (Qualify) <input type="checkbox"/>	150/flock (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
	Multiplier breeders:	150/flock (Qualify) <input type="checkbox"/>	75/flock (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
MG (NPIP MG Monitored)	Multiplier breeders:	30/house (Qualify) <input type="checkbox"/>	30/house (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
MS (NPIP MS Clean)	Primary breeders:	300/flock (Qualify) <input type="checkbox"/>	150/flock (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
	Multiplier breeders:	150/flock (Qualify) <input type="checkbox"/>	75/flock (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
MS (NPIP MS Monitored)	Multiplier breeders:	30/house (Qualify) <input type="checkbox"/>	30/house (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
AI (NPIP AI Clean)	All breeders:	30/flock (Qualify) <input type="checkbox"/>	15/flock (Retain class) <input type="checkbox"/>	Other no.:	<input type="checkbox"/> per flock OR <input type="checkbox"/> per house
NDV	15 per house <input type="checkbox"/>	Other no.:	<u>PCR</u> MG/MS* <input type="checkbox"/> AI <input type="checkbox"/> <i>*Unless otherwise requested, swabs for MG/MS PCR will be tested in pools of 5.</i>		Comments/special requests:
IBV	15 per house <input type="checkbox"/>	Other no.:			
IBD	15 per house <input type="checkbox"/>	Other no.:			
REO	15 per house <input type="checkbox"/>	Other no.:			
CAV	15 per house <input type="checkbox"/>	Other no.:			
<u>Authorization:</u>		Signature of company representative: _____		Date: _____	