



**WILTON SIMPSON
COMMISSIONER**

**Florida Department of Agriculture and Consumer Services
Division of Animal Industry
Bureau of Diagnostic Laboratories**

**AVIAN INFLUENZA / EXOTIC NEWCASTLE DISEASE
POULTRY SURVEILLANCE SUBMISSION FORM**

Chapter 585, Florida Statutes
5C-3.012 F.A.C.

Contact Information:

Bronson Animal Disease Diagnostic Laboratory
2700 N. John Young Parkway
Kissimmee, FL 34741
Phone: 321-697-1400
Fax: 321-697-1467
www.FDACS.gov/BADDL

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

Order Supplies:	Results Reported To:	Accession Number
Submission Forms _____ Quantity _____ Return Shipping Container <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Include address with order</i>	Chief, Bureau of Animal Disease Control Attn: Poultry Programs Office Division of Animal Industry 407 S. Calhoun Street, Tallahassee, FL 32399-0800	 Lab Use Only

Owner
Name _____
Address _____
City, State, Zip _____
Phone _____ County _____
Email _____

Location Type			
<input type="checkbox"/> Animal Sales Market	<input type="checkbox"/> Backyard Flock	<input type="checkbox"/> Botanica	<input type="checkbox"/> NPIP Flock
<input type="checkbox"/> Fair & Exhibition	<input type="checkbox"/> Live Bird Market	<input type="checkbox"/> Sick Bird Investigation	<input type="checkbox"/> Other:

Submission Information:	Collected By: _____	Collection Date: _____
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Specimens Submitted			
Swab Type	Specimen ID	# of Birds Pooled	Additional Information
<input type="checkbox"/> Tracheal <input type="checkbox"/> Cloacal <input type="checkbox"/> Environmental			
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<input type="checkbox"/> Tracheal <input type="checkbox"/> Cloacal <input type="checkbox"/> Environmental			
<input type="checkbox"/> Whole Bird Submission		# of birds	<input type="checkbox"/> Complete Necropsy

Type of Test (Lab Use Only):				
<input type="checkbox"/> Comprehensive Diagnostic Work-Up	<input type="checkbox"/> RRT-PCR	<input type="checkbox"/> VI – Bird	<input type="checkbox"/> VI – Environmental	<input type="checkbox"/> Other: _____

Please continue on another submission form if needed for additional samples.