

NON-VESICULAR REFERENCE LABORATORIES

Sample submission form

Sample submission form						
Laboratory Lab	poratory Reference Date Received		Royal Mail / Tracking Number Received By			
use only:						
Address of submitter / for return of results (use additional information box for invoice address)			Owner of the animal(s)			
Name:			Name:			
Address:			Address:			
			CPH Numb	per:		
Country:			Country:			
Tel.:			Tel.:			
E-mail:			E-mail:			
Signature + Stamp:				and address for retu	um of recults	
(I hereby declare that the samples are taken from the animals detailed within this submission)			Address:	onal address for retu	arn or results	
Date:			E-mail:			
African horse sickness virus Epizootic hemorrhagic disease virus Peste-des-petits-ruminants virus African swine fever virus ELISA (antibody) Rea ELISA (antibody) Rea ELISA (antibody) Rea ELISA (antibody) Rea					Real-time RT-PCR Real-time RT-PCR Real-time RT-PCR Real-time RT-PCR Real-time PCR Real-time PCR	
Non-accredited	d tests (by prior arrangement only)	-	Other te	ests, requirements or in	nstructions	
HAD African SNT Bluetor SNT Peste-C SNT Capripo PCR Capripo Sequencing/ pt	 ☐ HAD African swine fever virus ☐ SNT Bluetongue virus ☐ SNT Peste-des-petits-ruminants virus ☐ SNT Capripoxvirus 					
Please note: Please note Please note that the free service for analysing samples from animals suspected to be infected with non-vesicular or vesicular disease is available for up to 50 samples per country, per year, per disease (unless agreed to by prior agreement) and testing is carried out on behalf of the national regulatory authority, to whom results will be copied. WOAH/FAO will also be informed of the test results. Original samples, materials derived from the samples and sample information (such as genetic and antigenic data) may be supplied to other organisations, such as reference laboratories in order to comply with The Pirbright Institute's expectations as a FAO and/or WOAH reference laboratory. • Pirbright will undertake appropriate tests and those as agreed in writing. • The material provided may be added to Pirbright's collection and may be used for research, training, quality assurance, vaccine matching and reference laboratory functions. • Fees may apply for particular services, see website, to be confirmed by Pirbright in writing.						
Testing within the Non-Vesicular Reference Laboratory is subject to a 5 working day turnaround beginning the day after receipt of sample. Amendments to final reports caused through illegible writing or errors made by the submitter will be subject to an administration charge.						
	Non-Vesicular I The Pirbright Institute, Ash R		ence Laboratories,	124 ONE 11K		
http://www.pirbrigl	ht.ac.uk +44(0)148		2441/231148	incoming.sar	mples@pirbright.ac.uk	
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NVR-FORM-21-11C

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Pirbright	Sample submission form							
Laboratory use only:	atory Reference							
	Samples submitted							
Dloods	(Please tick the box or give details as appropriate)							
Blood:	 □ EDTA (purple topped vacutainers) □ Serum (red topped vacutainers) □ Please note that we cannot use blood green topped vacutainers (Heparin) for 							
Swabs: (please specify)								
Tissue: (please specify)								
inaluda	Additional Information							
include d	linical signs, vaccination status if known, date of animal export, invoice address, etc.							
	Non-Vesicular Reference Laboratories,							
http://www.pirbright.a	The Pirbright Institute, Ash Road, Woking, Surrey, GU24 0NF, UK ac.uk +44(0)1483 232441/231148 incoming.samples@pirbri	ight.ac.uk						

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Laboratory	
use only:	

Laboratory Reference	

	Tube Number	Animal			Sample	Date of	
	Tube Number	11	D	Name	Species	type	sampling
Page number of pages of sample details If you require space for more sample details, please duplicate pages 3 & 4 of this form as necessary.							
	Non-Vesicular Reference Laboratories,						
		The Pirbrig		Road, Woking, Surrey, GU24 0NF,			
	http://www.pirbright.ac.uk		+44(0)14	83 232441/231148	incoming	.samples@pirbr	ght.ac.uk
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Laboratory	Laboratory Reference
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use onlv:	

	Tube Number		Sample Date of			
	Tube Number	ID	Name	Species	type	sampling
F	Page number of pages of sample details If you require space for more sample details, please duplicate pages 3 & 4 of this form as necessary.					
	Non-Vesicular Reference Laboratories,					
	http://www.pirbright.ac.uk		Road, Woking, Surrey, GU24 0NF, 483 232441/231148		.samples@pirbr	ight ac uk
	NVR-FORM-21-11C	+44(0)1	100 20244 1/201 140	incoming	Page 4 of 4	igiil.ac.uk