



Wisconsin Veterinary Diagnostic Laboratories

Madison
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Madison, WI 53706
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Web Address
www.wvdl.wisc.edu
E-mail:
info@wvdl.wisc.edu

Condition: [] Live [] Dead
[] Frozen [] Chilled [] Warm

FISH DISEASE DIAGNOSTICS

Owner, Farm, Address, City, State, Zip, Reference, Premise ID, Date samples taken, Shipped, Veterinarian, Clinic, Address, City, State, Zip, Phone, FAX, E-mail address

SPECIMENS SUBMITTED

Grid for specimen submission with columns: Samples, Fluids, Miscellaneous. Includes checkboxes for Whole fish, Gill, Head, Heart, Intestine, Kidney, Liver, Muscle, Skin, Spleen, Swim bladder, Whole viscera, Other, Ovarian Fluid, Serum, Other, Bacterial isolate, Smear, Swab, Other.

TESTS REQUESTED

Please check the WVDL website or call the WVDL for a list of available tests and fees.

Bacteriology / Mycology

- Bacterial Culture & ID
Antimicrobial Susceptibility
Bact. Kidney Disease
Fungal Screen

Pathology

- Necropsy
Histopathology

Parasitology

- Direct Smear Exam
Internal Parasite Screen
Whirling Disease
Heterosporis

Virology

- Salmonid Virus
Largemouth Bass Virus
Spring Viremia of Carp Virus
Koi Herpesvirus
Sturgeon Virus

Preliminary Findings: [] FAX [] E-mail
[] Do only tests requested [] Do additional tests if needed to make a diagnosis

Please identify all specimens individually below:

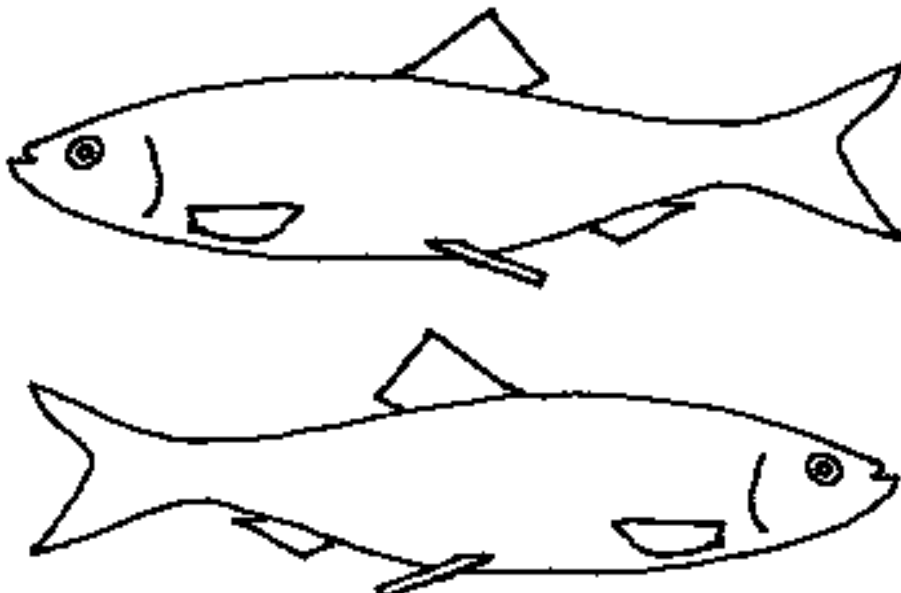
Table with 5 columns: Fish/Lot ID, Species, Age/Size, Specimen Abbreviation, Analysis Requested. Rows 1-5.

History

(Clinical signs, nutrition, management, temperature, environment, water quality, stress level, vaccinations, therapy, necropsy findings, previous laboratory results, etc.)

Description of Lesions

Please draw lesions and their locations as best you can.



Submitting Veterinarian's Signature

For Laboratory Use Only:

FAX _____ Phone _____ Prelim _____ Final _____