

# BOVINE REGULATORY SUBMISSION FORM



**Wisconsin Veterinary  
Diagnostic Laboratory**  
UNIVERSITY OF WISCONSIN-MADISON  
www.wvdl.wisc.edu  
E-mail form to: [submissions@wvdl.wisc.edu](mailto:submissions@wvdl.wisc.edu)

**MADISON**  
445 Easterday Lane, Madison, WI  
53706 PH: (800) 608-8387  
FAX: (608) 504-2594

**BARRON**  
1521 E. Guy Ave.  
Barron, WI 54812-0097  
PH: (800) 771-8387  
FAX: (715) 449-5052



\*Required field

**Owner\*** \_\_\_\_\_  
Farm Name \_\_\_\_\_  
Address\* \_\_\_\_\_  
City\* \_\_\_\_\_ State\*/Zip\* \_\_\_\_\_  
Premise ID \_\_\_\_\_  
Date samples taken\* \_\_\_\_\_  
Date samples shipped\* \_\_\_\_\_  
Reference # \_\_\_\_\_

**Veterinarian\*** \_\_\_\_\_  
License No. \_\_\_\_\_ Clinic Acct No. \_\_\_\_\_  
Clinic\* \_\_\_\_\_  
Bill to Account \_\_\_\_\_  
Address\* \_\_\_\_\_  
City\* \_\_\_\_\_ State\*/Zip\* \_\_\_\_\_  
E-Mail\* \_\_\_\_\_  
Phone\* \_\_\_\_\_ FAX \_\_\_\_\_  
E-mail results to \_\_\_\_\_

**Serology**

Test sample(s)

- Brucellosis BAPA
- Brucellosis FPA
- Brucellosis STT
- Lepto MAT 5
- Lepto MAT 6
- L. Sejroe
- Q Fever CF
- BLV AGID
- BTV AGID
- EHD AGID
- Johnes ELISA
- Anaplasmosis ELISA
- Q Fever ELISA
- S. Dublin ELISA
- BLV ELISA
- BTV ELISA
- BVD ACE
- EHD ELISA
- OTHER \_\_\_\_\_

**Testing Information** \_\_\_\_\_

- Export to \_\_\_\_\_
- Herd Certification \_\_\_\_\_
- Interstate Movement to \_\_\_\_\_
- Pre Purchase \_\_\_\_\_
- Retest of prior accession # \_\_\_\_\_
- Screen \_\_\_\_\_
- Semi-Annual \_\_\_\_\_
- EU Facility \_\_\_\_\_
- Other \_\_\_\_\_

**Virology**

Test sample(s)

- BVD P80 ELISA
- BVD SN 1&2
- EHD SN 1&2
- IBR cELISA
- IBR SN
- IBR SN OIE
- VS SN (NJ&IND)
- BVD VI - 1 pass (serum)
- BVD VI - 2 pass (serum)
- BVD VI (WB)
- BTV VI (WB, R)
- EHD VI (WB, R)

**Molecular**

Test sample(s)

- Anaplasmosis PCR (WB)
- BVD PCR Individual (WB or serum)
- BVD PCR Pooled (WB or serum)
- BTV/EHD PCR (WB)
- IBR PCR (swab)

Key: R-referral; WB-whole blood

**Sample Information**

	Primary ID	Secondary ID	Species	Breed	Sex	Age	Birthdate
1.	_____	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____	_____

**Submitting Veterinarian's Signature\*** \_\_\_\_\_

(Signature indicates that specimen(s) were collected by or under the supervision of the signing veterinarian.)

