

# SEMEN AND VENEREAL AGENTS SUBMISSION FORM



**Wisconsin Veterinary Diagnostic Laboratory**  
UNIVERSITY OF WISCONSIN-MADISON

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445 Easterday Lane  
Madison, WI 53706-1253  
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**BARRON**  
1521 E. Guy Ave  
Barron, WI 54812-0097  
PH: (800) 771-8387  
FAX: (715) 449-5052

Lab Use Only

Owner/Producer/Business  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Premises ID \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

Client **Account #** \_\_\_\_\_  
Veterinarian \_\_\_\_\_  
Clinic/Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Update Client Result Emails   
New Client Emails \_\_\_\_\_

Bill to: Client  Third Party Client   
Third Party Account # \_\_\_\_\_

Also Email Results to Third Party: \_\_\_\_\_

**Submission Reference:** \_\_\_\_\_ **Date Sampled** \_\_\_\_\_  
**Date Shipped** \_\_\_\_\_

## Testing Information

- Export to \_\_\_\_\_
- International Movement
- Surveillance
- Other \_\_\_\_\_
- Interstate Movement
- Screen
- Herd Certification
- Pre-purchase
- Diagnostic
- Semi-Annual
- Sale
- Abortion

## Semen Testing

### Semen Information

**Type:**

- Processed
- Sexed/Sorted
- Raw

Number of Samples \_\_\_\_\_

### Molecular Testing

- BHV-1(IBR) PCR (30263)
- BLV PCR (30315)
- BTV PCR (30133)
- BVD PCR (30536)
- EHD PCR (31043)
- Mycoplasma bovis* PCR (31628) **[Processed or Raw]**

### Virus Isolation

- BTV VI (84633 NVSL Referral)
- EHD VI (84646 NVSL Referral)
- BHV-1 (IBR) VI \_\_\_\_\_ Passes
- BVD VI \_\_\_\_\_ Passes

### Bacteriology Testing

- Aerobic Culture (10027) **[Raw Semen]**
- Bacterial Count (10105) **[Processed]**
- Mycoplasma* Culture (10677)

**Other Semen testing** \_\_\_\_\_

## Venereal Agents

Test Animal(s) #  
All will be tested if left blank

*Tritrichomonas foetus* Culture<sup>1</sup> (10911) . . . . . to \_\_\_\_\_  
*Tritrichomonas foetus* Direct Exam (10924) . . . . . to \_\_\_\_\_  
*Campylobacter fetus venerealis* Culture (10976) . . . . . to \_\_\_\_\_  
*Tritrichomonas foetus* Real Time PCR<sup>1</sup> (32174) . . . . . to \_\_\_\_\_

<sup>1</sup> Two separate trich samples (submitted in In-Pouch media) are needed if requesting BOTH culture & PCR.

### Submitting Veterinarian's Signature

\*Signature indicates that specimen(s) were collected by or under the supervision of the signing veterinarian. Please visit our website for our submission guidelines.

Opened By

\_\_\_\_\_

**Sample Condition:**  Good  Broken  Leaked  
**Temp:**  Cool/Ice Pack  Warm  Liquid Nitrogen  
 Semen   
 GW \_\_\_\_\_

Lab Use Only

# SEMEN AND VENEREAL AGENTS SUBMISSION FORM, cont



Wisconsin Veterinary  
Diagnostic Laboratory  
UNIVERSITY OF WISCONSIN-MADISON

Clinic \_\_\_\_\_

Owner Name \_\_\_\_\_

## Animal Information \_\_\_\_\_

If submitting more than 10 animals please use the Multiple Animal Spreadsheet for animal information instead of these fields.

**Animal IDs**

**Species**

**Breed**

**Sex**

**Age**

**Sample Date**

1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____
10.	_____	_____	_____	_____	_____
11.	_____	_____	_____	_____	_____
12.	_____	_____	_____	_____	_____
13.	_____	_____	_____	_____	_____
14.	_____	_____	_____	_____	_____
15.	_____	_____	_____	_____	_____
16.	_____	_____	_____	_____	_____
17.	_____	_____	_____	_____	_____
18.	_____	_____	_____	_____	_____
19.	_____	_____	_____	_____	_____
20.	_____	_____	_____	_____	_____
21.	_____	_____	_____	_____	_____
22.	_____	_____	_____	_____	_____
23.	_____	_____	_____	_____	_____
24.	_____	_____	_____	_____	_____
25.	_____	_____	_____	_____	_____
26.	_____	_____	_____	_____	_____
27.	_____	_____	_____	_____	_____
28.	_____	_____	_____	_____	_____
29.	_____	_____	_____	_____	_____
30.	_____	_____	_____	_____	_____