

Case #: \_\_\_\_\_

Date Received: \_\_\_\_\_

## NPIP Avian Influenza Surveillance Program

Breathitt Veterinary Center  
P.O. Box 2000  
715 North Drive  
Hopkinsville, KY 42240  
270-886-3959

Livestock Disease Diagnostic Center  
P.O. Box 14125  
1429 Newtown Pike  
Lexington, KY 40512  
859-253-0571

Company: \_\_\_\_\_ Producer: \_\_\_\_\_

Premise ID # \_\_\_\_\_ Flock/House ID # \_\_\_\_\_

Date Samples Collected: \_\_\_\_\_ Shift: \_\_\_\_\_

Report to: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax/Email: \_\_\_\_\_

Company Veterinarian: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Tests Requested: AVIAN INFLUENZA AGID

Other Tests: \_\_\_\_\_

Specimens Submitted: Serum  # \_\_\_\_\_ Swab  # \_\_\_\_\_ Birds  # \_\_\_\_\_

Bird Category (circle): Broiler      Broiler Breeder      Broiler Pullet      Layer

Age: \_\_\_\_\_ Sex: \_\_\_\_\_