



39 Epsom Ave Ascot 6104
 PO Box 18 Belmont 6984
 Western Australia
 Telephone: +61 8 9259 3666
 Facsimile: +61 8 9259 3627
 After Hours: 0418 916 436

EXPORT SUBMISSION FORM

SUBMITTING VETERINARIAN'S DETAILS

Veterinary Surgeon's Name (Please PRINT):

Signature:

Practice Name and Address (Stamp):
Clinic code:

PATIENT DETAILS (Please submit a separate form for each animal)

Date of sampling:																					
Export destination:																					
Owner's name:																					
Animal's name/ID:																					
Species:																					
Breed:																					
Gender	<table style="display: inline-table; border: none;"> <tr> <td style="padding: 0 10px;">Male</td> <td style="padding: 0 10px;">Female</td> <td style="padding: 0 10px;">Entire</td> <td style="padding: 0 10px;">Neuter</td> </tr> </table>	Male	Female	Entire	Neuter																
Male	Female	Entire	Neuter																		
Age/date of birth:																					
Microchip number:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																				

TESTS REQUESTED (Please tick the appropriate box)

- Babesia gibsoni* (Asian strain) IFAT serology 1ml serum
- Babesia* smear examination 2 blood smears/EDTA
- Ehrlichia canis* IFAT serology 1ml serum
- Leishmania* spp. IFAT screening serology 1ml serum
- Microfilara concentration EDTA blood
- Heartworm Antigen test EDTA blood or serum
- New Zealand Combo (*Babesia gibsoni* IFA, Heartworm Antigen) EDTA & serum
- South Africa Combo (*Babesia gibsoni* IFA & smear, Heartworm conc, *Leishmania*, *Brucella canis*, *Trypanosoma evansi* CAT & Geisma smear) EDTA & serum & 2 blood smears
- Other.....

TECHNOLOGIST	PATHOLOGIST
---------------------	--------------------