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| Department for Environment, Food and Rural AffairsScottish Government Welsh Government |  |  |
|  |  |  |
| Camelid TB Serology Package - Private Sample Submission Form |  | For APHA Use |
|  |  |
| APHA Ref. No. |       |
|  |  |
| Date received. |       |
|  |  |

Submit samples to Animal and Plant Health Agency (APHA) Starcross, Staplake Mount, Starcross, Exeter, Devon, EX6 8PE.

**This form is only for use for private testing of animals not subject to tuberculosis movement restrictions and/or awaiting mandatory tuberculosis blood testing by Animal and Plant Health Agency (APHA).**

**Please submit clotted blood or serum ONLY**

|  |  |  |
| --- | --- | --- |
| Clients name and Farm address |  | Veterinary Practice |
|       |  |       |
| Postcode:       |  | Clinician:       |
|  |  |  |
| CPHH No.       |  | Your reference:       |
|  |
| Private Veterinary Surgeons are required to confirm that they have secured written agreement to undertake this test and the sampled animals were not under TB related movement restrictions or awaiting testing by APHA at the point of sampling.    Please tick to confirm   [ ]  |

**Animal Details** - enter on sampling sheet

**Purpose/Housing** - enter the main enterprise under which the affected animals are kept

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organic? | Yes [ ]   | No [ ]  | Unknown [ ]  | In Transition [ ]  |
|  |  |  |  |  |
| Purpose | Fibre  |  [ ]  | Pet [ ]  | Zoo [ ]  | Open farm [ ]  | N/A [ ]  |
|  |  |  |  |  |
| Housing | Housed [ ]  | Outdoors [ ]  | Mixed [ ]  | Unknown [ ]  |
|  |  |  |  |  |

**Reason for Submission**

|  |  |
| --- | --- |
| Pre or post-movement test SER-MVT [ ]  | Pre-export test SER-EXP [ ]  |
| Diagnostic to exclude TB from differential diagnoses in a herd not restricted (TB not strongly suspected) | Monitoring - voluntary routine testing (Herd not restricted)  |
|  SER-DIAG [ ]  |  SER-RHT [ ]  |
| **Tick if a tuberculin injection has been administered to the animals 10 - 30 days before blood sampling** [ ]  |

**Clinical history (only if diagnostic)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Total No. in herd | No. in affected group | No. affected including dead | No. dead |  | Duration of clinical signs (in affected case) |
|       |       |       |       |  | 0-3 days  | [ ]  | 4 days - 2 weeks [ ]  |
|  | >2 weeks  | [ ]  | Unknown [ ]  |

**Clinical Signs** Please rank in order of importance e.g. 1 = main clinical sign

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Wasting/poor condition | [ ]  | Malaise | [ ]  | Respiratory |  [ ]  | Recumbent |  [ ]  |
| Skin | [ ]  | Diarrhoea | [ ]  | Other |  [ ]  |  |  |

**Clinical history/provisional diagnosis if any**

|  |
| --- |
|       |

|  |
| --- |
| Animal and Sample Identification  |
|  |  |
| Date samples taken: |       |  |
|  |  |
| **Official Animal Identity** | **Sample ID** | **Animal Age** | **Animal Sex** |
|       |       |       |       |
|       |       |       |       |
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| **DATA PROTECTION**For information on how we handle personal data please go to [www.gov.uk](http://www.gov.uk) and search Animal and Plant Health Agency Personal Information Charter. |

Please tick box if samples cannot be used for anonymous surveillance or test validation purposes: [ ]

|  |
| --- |
| **For laboratory use** |
| Restriction free status confirmed | Yes [ ]  | No [ ]  |
|  |
| Confirm not awaiting or undergoing mandatory testing | Yes [ ]  | No [ ]  |
|  |
| If positive confirm responsible APHA office informed | Initials: |       | Date: |       |  |
|  |  |  |  |  |

APHA is an Executive Agency of the Department for Environment, Food and Rural Affairs and also works on behalf of the Scottish Government, Welsh Government and Food Standards Agency to safeguard animal and plant health for the benefit of people, the environment and the economy.