## **PORCINE TESTS**



Date sent:	Farmer/Client:
Sender/Veterinary Practice:	
	Tel:
Tel: Fax: Email:	All tests based on a minimum of 10 samples

PCV-2, PCV-2 PCR, APP, PPV antibody & Swine Influenza by HI (4Strains) are all available on request. Please all the office for more information.

#	Sample Ref	Biobest Ref	Please indicate test(s) required			
			PRRSV ELISA	M hyo ELISA	Swine Influenza ELISA	
1						
2						
3						
4						
5						
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7						
8						
9						
10						
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12						
13						
14						
15						
16						
17						
18						
19						
20						

Please turn over.....



			Please in	Please indicate test(s) required				
#	Sample Ref	Biobest Ref	PRRSV ELISA	M hyo ELISA	Swine Influenza ELISA			
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								
33								
34								
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36								
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Biobest Use Only						
Reported by:						
QC'd by:						
QC u by.						
Vet Checked by:						
Date of Receipt:	Booked in:	Form No:			Results Faxed:	
No of Samples:	(Invoiced ) Databased:	Ref:			Date Faxed:	