WLE CLEAR SUBMISSION ☐ STAT

(may incur additional charges)

Previous Case #

_____

CLEAR ALL

VETERINARY DIAGNOSTIC LABORATORY
University of Illinois at Urbana-Champaign
PO Box U, 2001 South Lincoln Avenue
Urbana, IL 61802-6178
Tel: (217) 333-1620 **Fax:** (217) 244-2439
Email: vdloffice@vetmed.illinois.edu
Website: vetmed.illinois.edu/vdl

VETERINARIAN/CLIENT	**RESULTS** ☐ **FAX** ☐ **EMAIL CLINIC** ☐ **EMAIL VET** ☐ **ONLINE/APP**
CLINIC/HOSPITAL/ORGANIZATION	**COPY RESULTS TO** (NAME WITH FAX OR EMAIL BELOW)
ADDRESS	_____
	SEND ☐ **SUBMISSION FORMS** ☐ **FEE SCHEDULE**
CITY **STATE** **ZIP**	**OWNER NAME**
PHONE ( ) **FAX** ( )	**CITY** **STATE** **ZIP**
CLINIC/ORG EMAIL	**BREED** **AGE**
VET/CLIENT EMAIL	**SPECIES** _____
P.O./ACCT #/FOP	
FEIN # ☐ **NEW CLIENT** ☐ **UPDATES**	**SEX** ☐ M ☐ F **WEIGHT** ☐ MC ☐ FS
BILLING COMMENTS (Owner billing not available)	**ANIMAL ID** ☐ **MORE ID'S ON BACK**
	DATE SENT / / ☐USPS ☐UPS ☐FEDEX ☐COURIER ☐ DROP OFF ☐ OTHER __
CONDITIONS SUSPECTED (HISTORY ON PAGE 2)	**DATE COLLECTED** / / **SPECIMEN** ☐ SERUM ☐ HEPARIN ☐ TISSUE ☐ SWAB ☐ OTHER_____

ACCESSION # _____ Place sticker here

Tests Available *ADDITIONAL TESTING MAY BE AVAILABLE, CHECK OUR WEBSITE FOR DETAILS*	Single Sample Price
☐ Box Turtle Upper Respiratory Panel - (qPCR: FV3, Myco, TerHV1)	$115
☐ Box Turtle Health Surveillance Panel (qPCR: FV3, TerHV1, TerVH2, Myco, Adeno)	$185
☐ Turtle Upper Respiratory Panel (qPCR: FV3, cPCR: Herpes, Myco)	$150
☐ Turtle Health Surveillance Panel (qPCR: FV3, cPCR: Herpes, Myco, Adeno)	$225
☐ qPCR for FV3 (Ranavirus)	$50
☐ qPCR for Pan-ranavirus	$50
☐ qPCR *Ophidiomyces* (snake fungal disease)	$50
☐ qPCR Emydid *Mycoplasma* sp.	$50
☐ qPCR for *Mycoplasma agassizii*	$50
☐ qPCR Terrapene Herpesvirus 1	$50
☐ qPCR Terrapene Herpesvirus 2	$50
☐ qPCR for *Emydoidea blandingii* Herpesvirus 1	$50
☐ qPCR Box Turtle Adenovirus 1	$50
☐ qPCR *Batrachochytrium dendrobatidis*	$50
☐ 1PCR *Batrachochytrium salamandrivorans*	$50
☐ cPCR Consensus herpesvirus (includes sequencing)	$100
☐ cPCR Consensus adenovirus (includes sequencing)	$100
☐ cPCR Consensus *Mycoplasma* sp. (includes sequencing)	$100

HISTORY OR ADDITIONAL INFORMATION: *Indicate signs, duration, stress factors, previous disease, treatments, post-mortem findings, pertinent feed or feed activities, time period animal was on premises, and clinical lab results (attach additional sheets as necessary).*

_____*TOTAL NUMBER OF SAMPLES*   *MULTIPLE SPECIMEN IDENTIFICATION*   *ACCESSION #* _____

No.	Specimen ID	No.	Specimen ID
1		26	
2		27	
3		28	
4		29	
5		30	
6		31	
7		32	
8		33	
9		34	
10		35	
11		36	
12		37	
13		38	
14		39	
15		40	
16		41	
17		42	
18		43	
19		44	
20		45	
21		46	
22		47	
23		48	
24		49	
25		50	

Attach Additional Sheets as Necessary