

ACCESSION FORM FOR WSU VETERINARY TEACHING HOSPITAL

Washington Animal Disease Diagnostic Laboratory
 College of Veterinary Medicine, Washington State University
 Mailing address: Shipping address:
 P.O. Box 647034 Bustad Hall, Rm.155-N
 Pullman, WA. 99164-7034 Pullman, WA. 99164-7034
 Phone: (509) 335-9696 FAX: (509) 335-7424
 E-Mail: waddl@vetmed.wsu.edu
 Web Site: http://waddl.vetmed.wsu.edu

For Laboratory Use Only	
PO # / Budget #:	
WSU Account #:	5676
Invoice # :	
Completion Date:	
VADDS Log by:	Checked by:
Samples Received:	
Sample Condition (as received): <input type="checkbox"/> Frozen <input type="checkbox"/> Chilled <input type="checkbox"/> Room Temperature <input type="checkbox"/> Above Room Temperature Comment:	
Sample Shipped Via: <input type="checkbox"/> Mail <input type="checkbox"/> UPS <input type="checkbox"/> Fed-Ex <input type="checkbox"/> Courier <input type="checkbox"/> Other	

Please type or use black ink and print clearly.

Referring Veterinarian or WSU Clinician:	
Clinic:	Washington State University Veterinary Teaching Hospital Pullman, WA. 99165
Phone:	Pager:
Date Drawn/Sampled:	E-mail:

Please place owner sticker here.

Please place animal sticker here.

Animal Weight	No. in group	No. Dead	No. Sick
No. on Premises	Duration of Problem	Location of Lesion	
Previous WADDL cases? <input type="checkbox"/> Yes <input type="checkbox"/> No		Was animal euthanized? If so, what method?	

Please fill out completely as possible:

Specimen(s) Submitted	Date Collected:
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Tests Requested:	<input type="checkbox"/> Necropsy	<input type="checkbox"/> Virology	<input type="checkbox"/> Bacteriology - Aerobe	<input type="checkbox"/> IHC	<input type="checkbox"/> Other:
	<input type="checkbox"/> Histopathology	<input type="checkbox"/> Serology	<input type="checkbox"/> Bacteriology - Anaerobe	<input type="checkbox"/> PCR	
	<input type="checkbox"/> Toxicology	<input type="checkbox"/> Fungal Culture	<input type="checkbox"/> Mycoplasma culture	<input type="checkbox"/> Parasitology	

Note: WADDL reserves the right to modify the tests requested for more efficient case work-up.

Additional History: Vaccinations, signs, stress factors, treatments, post mortem findings, pertinent feed or feed additives, clinical lab results, previous WADDL Case Numbers. (Attach additional sheets as necessary.)

WADDL is an official brucellosis testing laboratory. All serology for brucellosis, including abortion screens, requires identification of animals, date of sample collection, and signature of an accredited veterinarian attesting to the following statement:

"I certify that the specimens submitted with this form were collected by me from the animal(s) described on the date indicated."

Veterinarian's or Clinician's Signature:	Condition(s) Suspected:
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