

Advanced Dairy Diagnostics & Consulting, LLC
362 310th Avenue
Frederic, WI 54837
(715) 653-2201
(715) 653-4301 FAX

BVD PI Test Submission Form

(Skin sample should be a minimum of ¼ inch on all edges, blood sample must contain at least 2cc blood in red top tube. **REFRIGERATE PRIOR TO, AND DURING SHIPMENT-PLEASE SHIP ON ICE. CALL FOR SPECIAL INSTRUCTIONS ON SAMPLES THAT CAN NOT REACH THE LAB WITHIN 48 HOURS OF COLLECTION.**)

Source Farm: _____ Address: _____

Date sampled: ___/___/___ Report to: E-mail _____
 Date shipped: ___/___/___ Fax _____
 Phone _____

Total # of Samples _____ @ \$ 6.95 = \$ _____ testing fee

Please make checks out to ADDC

Supplies: Ear Notcher @ \$29.50 = \$ _____
 _____ BVD Test Vials @ \$ 0.30 each = \$ _____
 Shipping & Handling @ \$ 10.00 = \$ _____

Total Enclosed \$ _____

Please make checks out to: **ADDC**

(Clearly number each tube/vial sequentially **PLUS** animal ID)

Tube #	Animal #/ID	Tube #	Animal #/ID
1	_____	21	_____
2	_____	22	_____
3	_____	23	_____
4	_____	24	_____
5	_____	25	_____
6	_____	26	_____
7	_____	27	_____
8	_____	28	_____
9	_____	29	_____
10	_____	30	_____
11	_____	31	_____
12	_____	32	_____
13	_____	33	_____
14	_____	34	_____
15	_____	35	_____
16	_____	36	_____
17	_____	37	_____
18	_____	38	_____
19	_____	39	_____
20	_____	40	_____