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**COMPARATIVE PATHOLOGY LABORATORY  Accession ­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Research Animal Resources Center, 389 Enzyme Institute,  1710 University Avenue, University of Wisconsin Madison, WI 53726**

**Phone; 608-262-6554—608-263-6464**

 **RODENT SENTINEL SUBMISSION**

**SEROLOGY** (individual tests)

Please list any individual serology tests for mouse or rat here

 \_\_\_\_\_\_\_ Mouse

 \_\_\_\_\_\_\_ Rat

**Cell line testing for pathogens**

\_\_\_\_\_\_Sentinel necropsy

 (includes parasitology)

\_\_\_\_\_\_Abnormal findings please submit full necropsy

\_\_\_\_\_\_In-house parasitology

 \_\_\_\_fecal float

 \_\_\_\_ rectal tape test

 \_\_\_\_ fecal float

 \_\_\_\_ pelt tape test

Any other:

SEROLOGY

**MICE (**panels)

\_\_\_\_\_Mouse Prevalent Profile (8 tests) Ant-Ig, EDIM, GDVII,

 MHV, MPV-1, MPV-2, MVM, NS-1.

\_\_\_\_\_Mouse Assessment (17 tests) Ectro, EDIM, GDVII, K,

 LCMV, MAV 1 & 2, MHV, MNV, MPUL, MPV-1, MPV-2,

 MVM.

\_\_\_\_\_\_\_Other (please list)

**RAT** (panels)

**\_\_\_\_\_\_** Rat Prevalent Profile (9 tests) ANT-IG, H-1, KRV, NS-1,

 PCAR, RMV, RPV, RTV, SDAV.

\_\_\_\_\_\_Rat Assessment (13 tests) Anti-Ig, H-1, KRV, LCMV, MAV

 1 & 2, MPUL, NS-1, PCAR, PVM, REO, RMV, RPV, RTV.

\_\_\_\_\_\_\_other (please list)­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submission Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Protocol Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Direct charge number required for billing**: DEPT ID\_\_\_\_\_\_\_\_\_\_\_\_FUND\_\_\_\_\_\_\_\_\_\_\_\_\_PROGRAM CODE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of departmental billing officer (**required)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department\_\_\_\_\_\_\_\_\_\_\_\_\_

# Lab Animal Veterinarian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sentinel manager ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Email for results\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Second Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Species \_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_ Number\_\_\_\_\_\_\_ Strain/Breed \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Or, Cells Submitted\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Bio level** \_\_\_\_\_\_\_\_\_

(List rooms information on back of sheet or on second sheet you need more space) Call 262-6554 for more information

**PCR ASSAY** (individual tests)

\_\_\_\_\_\_helicobacter panel

\_\_\_\_\_\_parvo panel

\_\_\_\_\_\_MHV

\_\_\_\_\_\_MNV

\_\_­­\_\_\_\_Corynebacterium bovis

\_\_\_\_\_\_Fur Mite

\_\_\_\_\_\_Pinworm (feces)

\_\_\_\_\_\_Pinworm and Furmite

environmental swab and feces pellet.

\_\_\_\_\_\_other pcr (please name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

QUARANTINE PANELS

**MICE**

\_\_\_\_\_\_UW mouse Quarantine Panel (pcr and serology) (22 tests)

\_\_\_\_\_\_UW mouse SPF quarantine 2 (pcr) (14 tests)

\_\_\_\_\_\_UW mouse SPF quarantine 3 (pcr) (11 tests)

\_\_\_\_\_other (please list)­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RATS**

­­­­­\_\_\_\_\_\_ UW Rat SPF quarantine2 (pcr) (15 tests)

\_\_\_\_\_\_UW Rat SPF quarantine (pcr) (11 tests)

\_\_\_\_\_\_other (please list) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please enter room numbers, PI names, rack number and other identifiers for animals**

**on the space available on the back of this page.**

Charges:

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| RARC use | Room | Rack/cage number | Investigator | Facility | notes |  |
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