

OTHER NON-REGULATORY OR DIAGNOSTIC TESTING REQUIRES A SEPARATE SUBMISSION FORM
FOUND AT: <https://www.vdl.umn.edu/submission-guidelines/submission-forms-supplies>

BAH/NPIP Submission Form for Bacteriologic Testing – WEGBY

Submitter*: _____
Contact Name: _____
Phone: _____ Email: _____
Farm Name: _____
Farm Address: _____
City: _____ State: ___ Zip: _____
Affiliate (list codes): _____

OFFICE USE ONLY
PREM ID: _____
COUNTY: _____
ACC #: _____
__ Testing billable to submitter; submission does not meet approved BAH testing.

ATTACH LABEL
FOR OFFICE USE ONLY

* The SUBMITTER is the entity responsible for billing should it not fall under Board of Animal Health funded program testing.

FLOCK INFORMATION

Type of flock (select): ___ Chicken ___ Turkey ___ Upland Gamebird ___ Waterfowl ___ Live Bird Market
___ Other (list): _____

SAMPLE INFORMATION

Collection Date: _____
Collected by: _____
TA #: _____ Phone: _____

Sample Type (check all submitted)	Number of Birds Sampled
Hatchery debris (hatcher fluff)	
Environmental booties	
Eggs	
Environmental swabs/dust	
Pullorum reactor birds (list band numbers)	
Other (list): _____	

Please note: Samples for official NPIP testing must be received at the MPTL within 7 days of collection. Samples received outside that window, will not be tested.

Sample Identification:

Bag Number	Sample Identification	Hatch Date	Species

NPIP TEST REQUEST

Select all that apply:
Hatchery Debris Testing (*U.S. Pullorum-Typhoid Clean*) – must submit a minimum of 6 samples per year
Environmental/Flock Testing (*U.S. Salmonella Monitored*) – must submit 5 environmental samples at least once per month
Pullorum-Typhoid Reactor Bird