

Instructions for Completing the Poultry Form

For your convenience, save the pre-filled form and use it as a template. Click on **File**, click **Save As** (when saving it for the first time) or **Save** (when revising a previous template).

Print all applicable pages and submit it to the laboratory along with the sample(s). For cases with a long history, please send the submission form to vetlab@gov.mb.ca as this expedites case entry and transcription. See page 3 for an example of a completed submission form.

Fill in blanks. Information in bold indicates a required field:

1. Routine, Legal or Rush

- A chain of custody form should accompany the sample and submission form for legal cases.
- b. You can access the chain of custody form and fee schedule on our website http://www.manitoba.ca/agriculture/vds
- c. Additional charges may apply if rush requests are accommodated. Please indicate <u>date</u> <u>results are required</u> and tests you would like rushed. The fee schedule lists our turnaround times.

2. Commercial, Small Flock, Flock Size

- a. Flock size will determine whether the submission qualifies for subsidized testing.
- b. For information on the subsidized Small Flock Avian Influenza Program, please visit our website.

3. Name of Veterinarian, Clinic, Additional Report To

- a. Include the first and last name of the veterinarian.
- b. Clinic is the institution of the referring veterinarian. The referring clinic is billed automatically unless indicated otherwise.
- c. Referring clinic and billing entity will automatically receive the report. We accommodate requests for reporting to one additional person. Please indicate full name and contact information including phone number and email address.

4. Owner/Farm Name

a. Include owner's full name (first and last name) and/or farm name.

5. Farm Location

a. Include the legal land location (e.g., NE 13-3-4E).

6. Premises

a. Premises # consists of a 7-digit number (e.g., MB 1234567).

ATTENTION: Important To Note

- a. Premises # and Farm Location are important for traceability and therefore must be provided to receive Manitoba Agriculture supported rates for testing.
- b. For more information on Manitoba's Premises Identification Program, please visit our website.

7. Reference/Flock ID

- a. Reference can include any information that helps you match your record to our report (e.g., Barn 2 south side).
- b. For serology, submit separate forms for different sex groups and flocks if you want VDS to generate separate titre graphs on reports.



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8. Production Type

a. This information is important because some diseases are specific to certain production types.

9. Related Case

a. It is helpful for us to know the VDS case number of related submissions. Previous results can help with diagnostic plans, test result interpretation and diagnosis.

10. Sample Collection Date

a. This information allows us to determine the acceptability of the sample for testing.

11. Age and Sex

- a. Providing information on the birds is important when submitting for necropsy as it affects testing and interpretation.
- b. Label samples with farm name and the flock identification number provided on the form. This will ensure sample and form are matched correctly when it arrives to the lab.
- c. For serology, submit separate forms for different sex groups and flocks if you want VDS to generate separate titre graphs on reports.

12. History

- a. This helps us to interpret test results and determine what organs to sample during necropsy. Based on the history, we can also make recommendations for additional testing. Start with gathering information:
 - i. Age of birds when problems started (onset, duration)
 - ii. Recent changes in this barn (e.g., maintenance, lighting, ventilation)
 - iii. Is the flock being treated with anything? Vaccinations?
 - iv. Have there been any problems with the flock prior to this?

13. Samples Submitted

a. Indicate the type and number of samples submitted.

14. Tests

a. Check off the test(s) you would like performed. If a test is not on the form use the **Send**Out box in the left bottom corner to indicate testing. Specify the test and the laboratory
you would like the samples sent to for additional testing. Additional charges for send outs
will apply.

15. Name of Submitter

- a. If the submission is coming directly through the clinic, include the veterinarian's name.
- b. If the owner submits the sample/birds to VDS, we may ask for the submitter's full name and contact information in case we have follow-up questions.



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Poultry Form Veterinary Diagnost 545 University Cresce P: 204-945-8220 E: ve W: www.manitoba.ca/	nt, Winnipeg, Man etlab@gov.mb.ca	itoba R3T 5S6		Manitoba 🐆
Routine	Legal	Rush (advanced notice and h	istory required	, fees apply) By August 28, 2025
■ Commercial	Small farm flock	(less than 1000 birds)	Flock size 10	,000
Referring veterinaria	n Dr. John Smith	Clinic/Institution (of referring vet	terinarian) Manitoba Veterinary Clinic
_			_	y Distribution
		manda Protect, aprotect@h		
Information including	physical location a	nd premises identification numbe	er are required fo	or the purpose of effective reporting and traceability
Owner/Farm name Mo	olly Bloom Farm	Farm lo	cation NE 13-	3-4E. RM of Little Fork
			•	(Legal Land Location and Municipality) rt) Barn 2 South Side Flock 123
Production type:				
chicken pullet	chicken layer	chicken layer breede	r chicke	en broiler
turkey meat	turkey breeder	duck	goose	other
Related case #Sample collection date				
		Sex M ■ F □		
barn. Increase in mo Samples submitted: # live # dead	ortalities. Water in 6 # sera 10	ntake did not increase. # conjunctival swabs	# fecal si	wabs# infraorbital sinus swabs# trachea
# sponges	# dust # i	fluffs # booties	# chick pap	s # lung # trachea per fixed:
fresh:		other:		
ANATOMIC PATH	01.007	VIROLOGY		VIROLOGY
ANATOMIC PATH	OLOGI	PCR/RPCR		ELISA
Necropsy		Avian Influenza A virus (AI\	/)	Avian encephalomyelitis virus (AEV)
Histopathology		Avian leukosis virus (ALV)	J strain	Avian orthoreovirus
		Avian Metapneumovirus (a	MPV) A, B, C	Chicken anemia virus (CAV)
MICROBIOLOGY		Avian orthoreovirus		☐ Infectious bronchitis virus (IBV)
Bacteriology		Chicken anemia virus (CAV	/)	☐ Infectious bursal disease virus (IBDV)
Culture & Sensit	•	Chlamydophila psittaci		M. gallisepticum & M. synoviae (MG & MS)
Salmonella cultu (environmental sar		Infectious bronchitis virus (IBV)	M. meleagridis (MM) (turkey only)
Mycology	iipida)	Infectious bursal disease vi	irus (IBDV)	Newcastle disease virus (APMV -1)
Fungal culture		Infectious laryngotracheitis		
Parasitology		Marek's disease virus (MD)	V)	Send out: Please specify test & Referral Lab
Direct exam		Mycoplasma gallisepticum	(MG)	
Fecal flotation		Newcastle disease virus (A	NPMV -1)	
Parasite ID		Omithobacterium rhinotrac	heale (ORT)	
		West Nile virus (WNV)		
Dr. John Smith				

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Page 1 of 2