

## **HBLB Equine Influenza Surveillance Scheme**

Please send samples to: Rossdales Laboratories



High Street, Newmarket, Suffolk CB8 8JS

equinesurveillance@gmail.com

## Laboratory testing request form

This scheme funds the testing of nasopharyngeal swabs for equine influenza PCR only Horses tested on this scheme must be displaying signs compatable with influenza

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PRACTICE DETAILS		ANIMAL / OWNER DETAILS		AILS	LAB USE ONLY	
Name:		Animal:		Lab Ref Number:		
Address:		Owner:				
		Breed:			Account Code:	
		Age:			Z	
Veterinary Surgeon:		Sex:			Date Received:	
Tel:		Colour:				
Fax:		Date Sample Col	lected:		Samples Checked By:	
Email:						
Report By: Fax Email						
					ination history	
Clinical presentation		Date administered				
eart rate Cough				used		
Respiratory rate	dry/har	rsh	Type of dose	1st vacc	☐ 6mo booster	
emperature	☐ produc	tive		2nd vacc	annual booster 🗌	
Inappetence	☐ severe			1st booster	unvaccinated 🔲	
Lethargy		argo		•		
Ocular discharge	Nasal discharge		Outbreak information			
_	serous		Premises location (county and postcode)			
Lymphadenopathy	mucoid		Date illness was first recognised in this case			
	mucop	urulent	How many oth	ner horses are af	fected?	
Other (describe)		Have other horse		rses on the pren	es on the premises been tested?	
			☐ No ☐ Y	⁄es		
			If yes, further	details		
Often infectious diseases are ass	ociated with	horse move	-			
in the information below. This se						
Premises type (please tick most	Are	isolation facili	ties available?		ses on premises	
relevant):	[	No 🗌	Yes	No. of in-co	ontacts with this confirmed	
☐ Private	Are	new arrivals q	uarantined?	case		
Livery	[	No 🗌	Yes			
☐ Training/competition yard	In t	he last 2 week	ks:	•	of horses vaccinated for	
☐ Stud	Hav	e horses been		influenza:	Min a site.	
Riding school		No	Yes	☐ All	☐ Minority	
Other	Furt			☐ Annr	rity None ox. Half	
Horse kept in (please tick all that	Hav	e there been i	new arrivals?	🗀		
apply):		No $\square$	Yes	Have infect	ious disease outbreaks been	
☐ Individual stables	ں Furt			confirmed	on the premises before?	
Barn system					☐ No ☐ Yes If yes,	
Separate grazing		horses share:			vhen?	
Group grazing	Tack		No □ Yes		d samples and information	
Other		ipment?	=		anonymously for	
	1			surveillan	ce and research purposes	

Additional testing can be performed on this nasopharyngeal swab but these will be charged according to Rossdales Laboratories current price list and the request must be submitted on a Rossdales Laboratories submission form. Swabs, transport media and pre-paid postage labels can be requested from Rossdales Laboratories at: