



ACE Laboratory Services

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Laboratory Use Only

Lab Number: _____
Date Received: _____
Charge: _____

PORCINE LABORATORY REQUEST FORM

Print a copy, complete and fax to 03 5443 9669 or email to info@acelabservices.com.au

Submitter :

Email:

Phone: Fax:

Owner/Farm:

PIC: Client Code:

Address:

Results to be forwarded to: Account to be forwarded to:

Species: Breed:

Collection date: No. of Samples:

History:

TESTS AVAILABLE

- | | | | |
|---|--|---|--|
| <p>Serology:
M. hyopneumoniae
APP (APX IV)
APP 5a, 5b
APP 4, 7
APP screening
Ileitis
Parvovirus
Leptovirus</p> | <p>PCR:
E. coli Toxin PCR
Mycoplasma spp.
Mycoplasma hyopneumoniae
Mycoplasma hyorhinis
Mycoplasma hyosynoviae
PCV2 qPCR
PPV
Erysipelothrix spp./rhusipathiae
Enteric PCR
Brachyspira spp. /typing
Lawsonia
Salmonella
APP sp. and typing
Pasturella sp and typing
H. parasuis Sp/ typing</p> | <p>Biochemistry/Haematology
Sick Pig Profile
Haematology
Copper
Selenium (GPx)
Electrolytes (Ca, Mg, PO4)
Individual biochemical tests</p> <p>Parasitology:
Faecal egg count
Coccidia</p> | <p>Microbiology:
Aerobic Bacterial culture and Sensitivity
Anaerobic culture
H. parasuis
APP
Erysipeleas
Clostridium
Salmonella
E. coli
Brachyspira</p> <p>PM/Histo:
Histopathology
Cytology
Body fluid analysis</p> |
|---|--|---|--|

Sample Number	ID	Age	Test Required

