



ACE Laboratory Services

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Laboratory Use Only

Lab Number: _____
Date Received: _____
Charge: _____

POULTRY 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

Serology:
MG RSAT
MS RSAT
S. pullorum RSAT
NDV HI
EDS HI
IBV ELISA
IBD ELISA
AE ELISA
CAV ELISA
BLS ELISA
EDS ELISA
NDV ELISA
FAV ELISA

PCR:
MG/MS
AIV
Campylobacter hepaticus
NDV
Pasturella Sp. And Typing

PM/Histo:
Histopathology
Cytology
Body fluid analysis

Biochemistry/Haematology
Avian Basic Body Function
Avian Complete Body Function
Haematology
Electrolytes (Ca, Mg, PO4)
Individual biochemical tests

Parasitology:
Faecal egg count
Coccidia

Microbiology:
Salmonella
E. coli

Sample Number	ID	Age	Test Required



AQIS QC2 Containment Facility

APVMA Licensed Manufacture