

ACE LABORATORY SERVICES

ABN 92115191056

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Laboratory Use Only

Lab Number:

Date Received:

Charge:

Pig Laboratory Request Form

Submitter:

Address:

Telephone:

Email:

Farm:

Address: PIC:

Species: Breed:

Collection date:

Results to be forwarded to (please include name/email):

Account to Submitter / Farm (Circle choice.)

Number of samples submitted:

Samples submitted by (Sign):

Tests Available (circle choice):

Biochemistry/ Haematology

Sick Pig Profile
 Haemogram
 Trace Elements (Cu, B12, Selenium GPX)
 Electrolytes (Ca, Mg, PO4)
 Individual Chemistries

Serology

M. hyopneumoniae
 APP (APX IV, Screen, 5a5b, 4-7)
 Ileitis
 Parvovirus
 PCV2

Microbiology

C&S aerobic
 C&S aerobic/anaerobic
 Brachyspira
 Yersinia
 Scour Package
 Fungal

PM/Histopathology

Histopathology
 Cytology
 Body Fluid Analysis

Parasitology

Faecal Egg Count
 Coccidia
 Cryptosporidium

PCR

APP
E. coli Toxins
 Enteric
E. rhusiopathiae
H. parasuis
Mycoplasma spp.
M. hyopneumoniae, *hyorhinus*, *hyosynoviae*
 P. multocida
 PCV2
 Lawsonia qPCR

Sample No.	Identification	Age	Sample Type	Tests Required

History:

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