

Client Information Submission Form

Farm Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Name: _____
 Mobile Phone: () _____
 Armor Rep: _____

Veterinarian Name: _____
 Clinic Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Mobile Phone: () _____
 Armor Rep: _____

Operation Type: (check one) Dairy Heifer Grower Cow-calf Grower/Feedlot
 Seedstock Calf Ranch

Sample Submission Information

Type of Sample(s) Submitted:
 Blood Milk Ear Notch
 Commingled Samples (only for Bulk Tests)

Test(s) Information:

Test Requested (check all that apply)	Test Type	Required Sample to Run Test			# of Samples <i>See back for data entry.</i>
		Blood	Milk	Ear Notch	
<input type="checkbox"/>	Bovine Leukosis Virus (BLV) Individual	X	X		
<input type="checkbox"/>	Bovine Leukosis Virus (BLV) Bulk		X		
<input type="checkbox"/>	Bovine Viral Diarrhea (BVD) Individual	X	X	X	
<input type="checkbox"/>	Bovine Viral Diarrhea (BVD) Bulk		X		
<input type="checkbox"/>	Johne's Individual Test	X	X		
<input type="checkbox"/>	Johne's Bulk		X		
<input type="checkbox"/>	EasyPreg		X		
<input type="checkbox"/>	Early Preg28	X			
<input type="checkbox"/>	Mastitis Profiling Big 16		X		
<input type="checkbox"/>	Mastitis Profiling Contagious 3		X		
<input type="checkbox"/>	Neospora	X			

Results will be emailed or faxed to you the next business day after samples are received.
 Send Results: (check all that apply)

Client: Your Office Fax #: () _____
 Your E-mail Address: _____
 Veterinarian: Veterinarian E-mail Address: _____
 Veterinarian Fax #: () _____
 Armor: Email labreports@vsi.cc

Invoice to:
 (Circle one)
 Operation
 Veterinarian

Packaging/Shipping of Samples

- Complete submission form and Sample Submission log on back.
- Place clean samples in biohazard ziplock bag or plastic bag.
- Place ice packs on ALL ear notch and blood samples. Milk with preservation tablet does NOT require ice while in transit.
- Wrap samples and ice pack (if applicable) in bubble wrap, or insulated pouch. Secure well to avoid broken vials.
- Construct box, size dependent on amount of samples being shipped.
- Put wrapped samples in box. Do not over fill.
- Include submission form in box.
- Seal box.
- Put box in outgoing mail with the United States Postal Service.

****To assure quality samples arrive at the lab only send samples on Monday or Tuesday.****

Ship to:
 Armor Animal Health - Lab
 6650 N. Basin #G
 Portland, OR 97217



