



Prairie Diagnostic Services Inc.
 52 Campus Drive
 Saskatoon, SK, S7N 5B4
 TEL: (306) 966-7316
 www.pdsinc.ca FAX: (306) 966-2488

Date/Time (RECEIVED)

PDS Lab # _____

BOVINE FETUS SUBMISSION FORM

Invoice to Clinic: Address: Postal Code: Phone: Veterinarian: Fax: <small>Print name</small> Email: Copy to:	Owner/Farm Name: Animal Location: Animal ID: Species: BOVINE Breed: Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Gestation Age: _____
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STAT (fees apply)
 Rabies Suspect
 Legal Case
 Insurance Case
 Date Collected: _____

Reason For Submission

Diagnostic
 Research
 Surveillance
 Routine Monitoring

Samples	Sent	Received <small>office use only</small>
Fluid		
Fixed Tissues		
Fresh Tissues		
Paraffin Block		
Whole fetus		
Other _____		

HISTORY: (including vaccination history, treatments etc) **Special Project Name (if applicable):** _____

What diagnostic question do you want answered?

Previous Submission #: _____ Submitters Signature: _____

Herd Size: _____
 No. sick: _____
 No. dead: _____
 New disease, duration: _____
 Ongoing disease, duration: _____
 Non disease: _____

Color: _____ Crown Rump Length _____ cm Weight _____ Kg
Haircoat: Complete Fine Muzzle Distal extremities Tail Other
Teeth Eruption: Absent First Second Third

★★ **NATIONAL SURVEILLANCE** ★★
 Please complete this section.

★★ **Production Stage** ★★
 Fetus
 Neonate
 Nursing
 Weaned
 Feeder
 Replacement Heifer
 Backgrounder
 Adult

★★ **Primary Systems Affected** ★★
 Abortion/Stillbirth
 Cardiovascular
 Gastrointestinal
 Integument (skin)
 Mammary
 Musculoskeletal
 Neurological
 Reproductive
 Respiratory
 Sudden/Unexplained Death
 Unthriftness/Anorexia/Poor Production
 Urinary
 Whole body/Multisystem
 Non disease
 Other

Scavenger Damage: _____
Developmental Defects: _____
State of Carcass: Fresh Moderate Severe Mummified
Fresh air in lungs? Yes No
Location of Fluid: Sub Q Thorax Abdomen Color? _____
Abdominal Fluid: Color? _____ **Meconium Present:** Yes No
 Split Femur: NSF GAL GRL
 Limb Joints: NSF Femoral Hock Stifle
 Placenta: Normal Placentitis None available
 Histo Tissues: Eyelid Thymus Thyroid Heart Diaphragm Ileum
 Spiral Colon Med LN Skeletal Liver Placenta Adrenal
 Mes LN Lung Spleen Kidney Brain Tongue Salivary
 Culture Tissues: Lung Liver Kidney Placenta Abomasal Fluid
 Frozen Tissues: Lung Liver Kidney Placenta (in separate bag)

