



**MONTANA
VETERINARY
DIAGNOSTIC
LABORATORY**

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**1911 WEST LINCOLN STREET
BOZEMAN, MT 59718**

Before each submission, please download the most current version of this form. Access our Submission Guide for the latest information on test offerings. Avoid shipping delays by sending specimens via UPS/FedEx whenever possible.

Veterinarian:
Clinic:
Address:
Phone:
Email:
(default reporting is via email)
Fax:
Billing Account (if different):

Owner:
Owner address:
City: **State:** **Zip:**
County: **Phone:**
Owner email:
Premises ID:
 Report to Owner
 Owner/Submitter information are the same

Animal ID(s): **Age:** Yr Mo Day Fetus **Sex:** M MC F FS
(for herd/flock submissions, please use our Excel-based form) **Species:** **Breed:**
Collection Date: **Submission Date:** **Is animal:** Alive Dead Euthanized
Samples Submitted:
History (If needed, attach additional information separately):

Special processing: Legal Insurance Pathologist discretion for testing **Necropsy Disposal:** MVDL disposal Private cremation
Pre-approval for send-out testing Cremation provider:

Test Requests: *(See our Submission Guide for complete listing, or write in requested send-out testing)*

Specimen/Anatomic Location	Collection Date/Time	Test Name

Commonly Requested Tests:

Abortion Study	Aerobic culture	<u>RABIES</u>
Neonatal Diarrhea Study Age:	Antimicrobial sensitivity	Human exposure
Biopsy/Mail-in Necropsy	Fecal flotation	Animal exposure
Laboratory Necropsy	Urinalysis	Unknown exposure
	FNA/Cytology	

For MVDL Use

Carrier:
UPS USPS FedEx Hand
Other:
Opened:
Inventory: