

## Virginia Department of Agriculture and Consumer Services **Regional Animal Health Laboratory System**

https://www.vdacs.virginia.gov/animals-animal-health-laboratory-services.shtml

Harrisonburg RAHL 261 Mount Clinton Pike Harrisonburg, VA 22802 540-209-9130

Lynchburg RAHL 4832 Tyreeanna Road Lynchburg, VA 24504 434-200-9988

Warrenton RAHL 272 Academy Hill Road 250 Cassell Road Warrenton, VA 20186 540-316-6543

Wytheville RAHL Wytheville, VA 24382 276-228-5501

Richmond Office 804-786-9202

Accession #: Receipt # Amount Paid \$ (Lab Use Only)

## Poultry Necropsy/Tissue Submission Form

Veterinarian:  Clinic: Address: City, State, Zip: Phone: Fax: E-Mail:  Preferred Report Distribution Method:  US Mail	Owner/Submitter:           Name:
Bill to:  ☐ Vet Practice ☐ Owner ☐ Company	☐ Other:
Species/Production Class:         Turkey:       □ Meat       □ Breeder       □ Backyard         Chicken:       □ Meat       □ Breeder       □ Backyard         Other Species:       □       □ Breeder       □ Backyard	□ Layer
Number and Type of Specimens:  If fixed tissue for Histopathology – please indicate exact location:  Specific Test Request:  Flock Information:  Flock ID: House ID: Premises ID (if known): Breed: Sex: # Birds in House: # Houses on Farm:  # Houses on Farm:	
History (clinical signs, vaccination, production level, treatment, nutrition, etc.):  Duration of Illness: Date of Death: Euthanized? □ Yes □ No Method:  Rule Outs:	
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