#### USDA CSF Surveillance Submission Form for Diagnostic Laboratories Instructions for Filling Out Form

## 1. <u>Submitting Laboratory Info:</u>

- a. **Lab ID:** Enter the OIDS number of the diagnostic laboratory that is submitting the specimen to the NAHLN for CSF testing.
- b. **Laboratory Name:** Enter the formal name of the diagnostic laboratory that is submitting the specimen to the NAHLN for CSF testing.

## 2. <u>Testing Laboratory Info:</u>

- a. **Laboratory ID:** Enter the OIDS number for the NAHLN lab that will be testing the specimen for CSF.
- b. **Laboratory Name:** Enter the formal name of the NAHLN lab that will be testing the specimen for CSF.
- 3. <u>Page of :</u> Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number</u>: Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submissions. The APHIS suggested format consists of 12 characters:
  - The first two characters indicate the State code, e.g. CO (Colorado) or IA (Iowa),
  - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
  - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
  - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

#### Examples:

*COSAJ060104A*: This submission is from Colorado, the submitter is Steven Allen Jones, the sample was collected on June 1, 2004, and it is the first submission of the day.

*COSAJ060104B*: This would be the CSF Referral Number for the second submission by that submitter for that day.

## 5. <u>Specimen Information:</u>

- a. **Submitting Lab Accession #:** Enter the accession number used at your laboratory. The same accession number can be used for more than one specimen if the specimens are from the same animal.
- b. Animal ID: Enter identification tag or number from the animal.
- c. **Submitting Practitioner Information:** Enter in the full name (last, first), phone number, and zip code of the submitting practitioner.
- d. **Production Site Info:**

- 1. **National Premise ID:** Enter the national premise ID number assigned by NAIS for the production site where the animal(s) sampled is from.
- 2. State, Zip: Enter the State and zip code of the production site.
- e. **Date collected:** Enter in the date the specimen(s) was collected in <u>MM/DD/YY</u> format.
- f. **Specimen bar code:** Place the bar code label here that corresponds to the label that is placed on the specimen. A different bar code should be used for each specimen, even for specimens from the same animal.
- g. **Specimen type:** Circle only one of the types of specimens that are being submitted for testing:
  - 1. Nasal Swab
  - 2. Tonsil scraping
  - 3. Tonsil
  - 4. Other specimen, please specify
- h. **Reason for submission:** Circle only one of the reasons for why the specimen is being submitted (key also located on the form):
  - 1. Submission with Septicemia
  - 2. Submission with CNS signs
  - 3. Submission with Abortions
  - 4. General swine submission
- **6.** Repeat Steps 5a-5h for each specimen being submitted.

#### If multiple specimens from the same animal are being submitted:

- each specimen should receive its own bar code,
- production site information and submitting practitioner information do not need to be re-entered on the form after the initial entry for that animal.
- 7. <u>Date Samples Shipped to Testing Lab:</u> Enter the date this form and the specimen(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- 8. <u>Number of Samples Shipped:</u> Enter the total number of specimens in this shipment.
- **9.** <u>Name of Submitter:</u> The person filling out the form and shipping the specimen(s) should sign or print their name on the bottom of the form.

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## **CSF Submission Form for Diagnostic Laboratories**

Name of Submitter:

## **Designated Laboratory, Shipping Address and Contact Information** for VDLs

Arizona Veterinary Diagnostic	Dr. Greg Bradley
Laboratory	Phone: 520-621-2356
2831 N. Freeway	Fax: 520-626-8696
Tucson, AZ 85705	gabrad@ag.arizona.edu
,	
California Animal Health & Food	Dr. Sharon Hietala
Safety Lab	Phone: 530-752-4739
University of California, School of	Fax: 530-752-5680
Veterinary Medicine	skhietala@ucdavis.edu
W. Health Science Drive	Skilletala@ucuavis.euu
Davis, CA 95616	
Colorado State University Veterinary	Dr. Barbara Powers
Diagnostic Laboratory	Phone: 970-297-1285
College of Veterinary Medicine &	Fax: 970-297-0320
Biomedical Sciences	barb.powers@colostate.edu
300 West Drake	
Fort Collins, CO 80523	
Kissimmee Diagnostic Laboratory	Kindra Kelly-Quagliana
Florida Department of Agriculture	Phone: 321-697-1447
2700 N. John Young Parkway	Fax: 321-697-1467
Kissimmee, FL 34741	kellyk@doacs.state.fl.us
,	
University of Georgia Veterinary	Julie Musgrove
Diagnostic Laboratory	Phone: 229-386-3340
43 Brighton Road	Fax: 229-386-3399
Tifton, GA 31793-3000	jmusgrov@uga.edu
	Jinusgiov e ugu.ouu
Athens Veterinary Diagnostic	Dr. Doris Miller
Laboratory	Phone: 706-542-5568
University of Georgia College of	Fax: 706-542-5977
Veterinary Medicine	
5	miller@vet.uga.edu
Building 1079	
Athens, GA 30602	
Iowa State University	Dr. Kyoung-Jin Yoon & Karen Harmon
Veterinary Diagnostic Laboratory	Phone: 515-294-1950
1600 S. 16th St.	Fax: 515-294-3564
Ames, IA 50011	kyoon@iastate.edu
	kharmon@iastate.edu

#### Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

Illinois Department of Agriculture,	Mr. Greg Fritz
Animal Disease	Phone: 309-344-2451
Galesburg Animal Disease Laboratory	Fax: 309-344-7358
2100 S. Lake Storey Rd	greg.fritz@illinois.gov
Galesburg, IL 61401-5858	
Galesburg, IL 01401-3838	
Purdue University Animal Disease	Dr. Ramesh Vemulapalli
-	Phone: 765-494-7560
Diagnostic Lab	
406 South University St.	Fax: 765-494-9181
West Lafayette, IN 47907	rvemulap@purdue.edu
Kansas State Veterinary Diagnostic	Dr. Dick Oberst
Laboratory	Phone: 785-532-4411
Kansas State University, CVM	Fax: 785-532-4039
L232 Mosier Hall, 1800 Dennison Ave	oberst@vet.k-state.edu
Manhattan, KS 66506	<u>oberst@vet.k-state.edu</u>
Breathitt Veterinary Center	Dr. Shri Singh
Murray State University	Phone: 270-886-3959
715 North Drive	Fax: 270-886-4295
Hopkinsville, KY 42240	shri.singh@murraystate.edu
110pkilisvilie, K1 +22+0	<u>sintisingne mutuysuccedu</u>
Louisiana Animal Disease Diagnostic	Dr. Kim Bowles
Laboratory	Phone: 225-578-9777
Veterinary Medicine Diagnostic	Fax: 225-578-9784
Laboratory, LSU	kashannon@mail.vetmed.lsu.edu
111 Dalrymple Bldg, P.O. Box 25070	
Baton Rouge, LA 70803	
Diagnostic Center of Population and	Dr. Annabel Wise
Animal Health	Phone: 517-432-5794
Michigan State University	Fax: 517-432-5836
4125 Beaumont Rd, Ste 201H	wise@dcpah.msu.edu
Lansing, MI 48910	wise e depantinsutedu
University of Minnesota Veterinary	Carrie Wees
Diagnostic Lab	Phone: 612-625-2212
1333 Gortner Ave, 244 Vet D L	Fax: 612-624-8707
St. Paul, MN 55108	mahlu001@umn.edu
St. Faul, Will 55106	<u>Inanuoor @ unni.edu</u>
Mississippi Veterinary Research &	Dr. Mike Zhang
Diagnostic Laboratory	Phone: 601-420-4700
3137 Hwy 468 West	Fax: 601-354-6209
Pearl, MS 39208	mzhang@cvm.msstate.edu
1 cmi, 146 37200	<u>manung e o minissuco du</u>
Montana Veterinary Diagnostic	Dr. Jeffrey Marshall
Laboratory	Phone: 406-994-6346
P.O. Box 997	Fax: 406-994-6344
Marsh Laboratory, 19th and Lincoln	jmarshall@mt.gov
Bozeman, MT 59771	

#### Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

Rollins Diagnostic Laboratory	Dr. Gene Erickson
North Carolina Department of	Phone: 919-733-3986
Agriculture	Fax: 919-733-0454
2101 Blue Ridge Rd.	gene.erickson@ncmail.net
Raleigh, NC 27607	
Veterinary Diagnostic Laboratory	Nancie Hergert
North Dakota State University	Phone: 701-231-8306
Van Es Hall	Fax: 701-231-7514
Fargo, ND 58105	nancie.hergert@ndsu.edu
	<u>- manoremorgent e nasaleda</u>
Veterinary Diagnostic Center	Dr. Judi Galeota
University of Nebraska	Phone: 402-472-9416
137 VDC UNL	Fax: 402-472-3094
Lincoln, NE 68583-0907	jgaleota@unInotes.unI.edu
	<u>jgarcota e unnotes.uni.edu</u>
New Jersey Dept of Agriculture	Dr. Denise DiCarlo-emery
Division of Animal Health	Phone: 609-777-0139
State Diagnostic Lab, H & A Building	Fax: 609-777-8395
Rm 201 John Fitch Plaza, P.O. Box 330	aghdica@ag.state.nj.us
Trenton, NJ 08625	<u>agnuica@ag.state.nj.us</u>
New Mexico Department of	Dawn Bueschel
Agriculture	Phone: 505-841-2576
0	
Veterinary Diagnostic Services	Fax: 505-841-2518
700 Camino de Salud, NE	dbueschel@nmda.nmsu.edu
Albuquerque, NM 87106	
Animal Health Diagnostic Center	Dr. Sung Guk Kim,
Cornell University, College of	Phone: 607-2533839
Veterinary Medicine	<u>sgk1@cornell.edu</u>
S3 110 Schurman Hall	
Upper Tower Rd.	
Ithaca, NY 14853	
Ohio Department of Agriculture	Dr. Yan Zhang
Animal Disease Diagnostic Laboratory	Phone: 614-728-6220
8995 E. Main Street, Building 6	Fax: 614-728-6310
Reynoldsburg, OH 43068	yzhang@mail.agri.state.oh.us
Oklahoma Animal Disease Diagnostic	Dr. Emily Cooper
Laboratory	Phone: 405-744-3620
Oklahoma State Univ.	Fax: 405-744-8612
College of Veterinary Medicine	emily.cooper@okstate.edu
Farm & Ridge Road	
Stillwater, OK 74078	

#### Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF) Testing

	,
Oregon State University Veterinary	Dr. Rocky Baker
Diagnostic Laboratory	Phone: 541-737-2172
Oregon State Univ.	Fax: 541-737-6817
College of Veterinary Medicine	rocky.baker@oregonstate.edu
30th & Washington Way	
Corvallis, OR 97331	
Pennsylvania Veterinary Laboratory	Dr. Deepanker Tewari
Pennsylvania Department of	Phone: 717-787-8808 ext 211
Agriculture	Fax: 717-772-3895
2305 N. Cameron Street	dtewari@state.pa.us
Harrisburg, PA 17110	die warre state.pa.us
	Dr. Jona Hannings
Animal Disease Research & Diagnostic Laboratory	Dr. Jane Hennings Phone: 605-688-6643
South Dakota State University	Fax: 605-688-6003
Box 2175, N. Campus Dr.	jane.hennings@sdstate.edu
Brookings, SD 57007	
CE Kord Animal Disease Diagnostic	Dr. Tom Chang
Laboratory	Phone: 615-837-5257
Ellington Agricultural Center	Fax: 615-837-5250
440 Hogan Rd.	j.d.chang@state.tn.us
Nashville, TN 37220	
Texas Veterinary Medical Diagnostic	Dr. Loyd Sneed
Laboratory	Phone: 979-845-3414
1 Sippel Road	Fax: 979-845-1794
Drawer 3040	l-sneed@tvmdl.tamu.edu
College Station, TX 77843	
Utah Veterinary Diagnostic Laboratory	Dr. Jessie Trujillo
950 E. 1400 North	Phone: 435-797-7066
Logan, UT 84322-5700	Fax: 435-797-2805
	jtrujillo@cc.usu.edu
Washington Animal Disease Diagnostic	Dr. Dan Bradway
Laboratory	Phone: 208-596-6085
P.O. Box 647034 Bustad Hall	Fax: 509-335-7424
Room 155-N	dsb@vetmed.wsu.edu
Pullman, WA 99164	De Kathy Kyeth
Wisconsin Veterinary Diagnostic	Dr. Kathy Kurth
Laboratory	Phone: 608-262-5432 ext. 3205
Wisconsin Veterinary Diagnostic	Fax: 847-574-8085
Laboratory	Kathy.Kurth@wvdl.wisc.edu
445 Easterday Lane	
Madison, WI 53706-1253	
Wyoming State Veterinary Laboratory	Dr. Nicky Bratanich
1174 Snowy Range Road	Phone: 307-742-6681 ext 161 / 162
Laramie, WY 82070	Fax: 307-721-2051
	<u>abratani@uwyo.edu</u>

## **CSF** Surveillance Submission Form for Slaughter Establishments

Instructions for Filling Out Form

## **1. Establishment Info:**

- a. **Plant ID:** Enter the Plant ID number as designated in the ADRS database.
- b. Establishment Name: Enter the formal name of the slaughter establishment.

## 2. Testing Laboratory Info:

- a. Laboratory ID: Enter the OIDS number for the NAHLN lab that will be receiving the specimen for CSF testing.
- b. Laboratory Name: Enter the formal name of the NAHLN lab that will be receiving the specimen for CSF testing.
- 3. <u>Page of</u> : Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4. CSF Referral Number:** Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submission. The FSIS format is the following:
  - The first set of characters (up to five) are the FSIS Establishment Number (Do not • include preceding zeroes or following letters, e.g. 00245M is just "245")
  - The next three characters are the collector's initials (First, Middle, Last) if the • collector does not have a middle name, skip the middle character,
  - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005).
  - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

## Example:

477CSH080404A: This submission is from FSIS Establishment 00477 and was collected by Charles Scott Henry on August 4, 2004. This is the first submission of the day.

5. Date Collected: Enter in the date the specimen(s) was collected in MM/DD/YY format.

## 6. Specimen Information:

a. Lot ID/Tattoo/Other: Enter in the Lot ID or tattoo number as established by the slaughter facility.

## b. Production Site Information:

- 1. National Premise ID: Enter the national premise ID number assigned by NAIS for the production site where the animal(s) sampled is from.
- 2. State, Zip: Enter the State and zip code of the production site.

- c. Reason for Submission: Circle the reason why the specimen is being submitted:
  - 1. Erysipelas: Submission with Erysipelas
  - 2. Septicemia: Submission with Septicemia
  - 3. Other Condemnation: Submission condemned for other reasons
  - 4. Randomly selected: Submission randomly selected for sampling
- d. **Specimen Bar Code:** Place the bar code label here that corresponds to the label that is placed on the sample tube.
- e. **Specimen Type:** Circle only one of the types of specimens that are being submitted for testing:
  - 1. Tonsil
  - 2. Other, please specify in blank provided
- 7. <u>Date Samples Shipped to Testing Lab:</u> Enter the date this form and specimen(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- 8. <u>Number of Samples Shipped:</u> Enter the total number of specimens in this shipment.
- **9.** <u>Name of Submitter:</u> The person filling out the form and shipping the specimen(s) should be listed here.

CSF Surveillance Submission Form for Slaughter Establishments			Page	e of			
Es	Establishment Info: Testing Laboratory Info:		CSF	Referral Number:			
Pla	Plant ID: Laboratory ID:2.16.840.1.1		1.113883.3.5.1.				
Es	tablishment Name:		Lab Na	ame:		Date C	collected: mm / dd / yyyy
1	Lot ID/Tattoo/Other:				Reason for Submission (Circle one only)		Place specimen barcode here
	Production Site Information				1. Erysipelas		and then select specimen type below
	National Premises ID	State		Zip	2. Septicemia		
					3. Other condemnation		1. Tonsli
					4. Randomly selected		2. Other:
2	Lot ID/Tattoo/Other:				Reason for Submission		
					(Circle one only)		Place specimen barcode here and then select specimen type below
	Production Site Information National Premises ID	State	17	īρ	1. Erysipelas		and then been open nen type beom
	National Fremises to	State		,p	2. Septicemia		1. Tonsil
					3. Other condemnation		2. Other:
					<ol><li>Randomly selected</li></ol>		2. 0000
3	Lot ID/Tattoo/Other:				Reason for Submission (Circle one only)		
	Production Site Information				1. Erysipelas		Place specimen barcode here and then select specimen type below
	National Premises ID	State		Zip	2. Septicemia		
					3. Other condemnation		1. Tonsil
					4. Randomly selected		2. Other:
4	Lot ID/Tattoo/Other:				Reason for Submission		
4					(Circle one only)		Place specimen barcode here
	Production Site Information				1. Erysipelas		and then select specimen type below
	National Premises ID	State	2	Zip	2. Septicemia		
					3. Other condemnation		1. Tonsll
					4. Randomly selected		2. Other:
5	Lot ID/Tattoo/Other:				Reason for Submission (Circle one only)		Dines escalator brough hor
	Production Site Information				1. Erysipelas		Place specimen barcode here and then select specimen type below
	National Premises ID	State		Zip	2. Septicemia		
							1. Tonsil
					3. Other condemnation		2. Other
					<ol><li>Randomly selected</li></ol>		
6	Lot ID/Tattoo/Other:				Reason for Submission (Circle one only)		Place specimen barcode here
	Production Site Information				1. Erysipelas		and then select specimen type below
	National Premises ID	State		Zip	2. Septicemia		
					3. Other condemnation		1. Tonsli
					4. Randomly selected		2. Other:

## **CSF Submission Forms for Slaughter Establishments**

Date Samples Shipped to Testing Lab: \_\_\_\_\_ / dd / vvvv

Number of Samples Shipped:

Name of Submitter:

State	Plant ID	Establishment Name	City	NAHLN Lab
CA	00360 M	Clougherty Packing Co.	Vernon	CA
FL	11159 M	Nettles Sausage Inc	Lake City	Serum to FADDL
FL	11181 M	Lacasa Sierra Corporation	Land O'Lakes	Serum to FADDL
FL	18911 M	Mary's Ranch C/O Cabrera's Sla	Miami	Serum to FADDL; Tonsil to FL
HI	06208 M	Farmers Livestock Coop	Ewa Beach	СА
IA	00003S M	Swift Pork Company	Marshalltown	KS
IA	00085O M	Excel Corporation	Ottumwa	NM
IA	00244 M	IBP, Inc.	Storm Lake	FL
IA	00244L M	IBP, Inc.	Columbus Jct.	TX
IA	00244P M	IBP, Inc.	Perry	СО
IA	00244W M	IBP, Inc.	Waterloo	LA
IA	00717 M	Farmland Foods Inc	Denison	NJ
IA	05804 M	John Morrell & Co.	Sioux City	TN
IA	1775	Pine Ridge Farms (IA Pack)	Des Moines	NJ
IL	00085B M	Excel Corporation	Beardstown	KY
IL	00717M M	Farmland Foods, Inc.	Monmouth	KY
IN	00244I M	IBP, Inc.	Logansport	NY
IN	17564 M	Indiana Packers Corporation	Delphi	NY
KY	00995 M	Swift & Company	Louisville	NJ
MN	00003W M	Swift Pork Company	Worthington	WA
MN	01620 M	Quality Pork Processors, Inc.	Austin	WA
МО	00320M M	Premium Standard Farms Inc.	Milan	TX
NC	00413 M	Premium Standard Farms, Inc.	Clinton	ОН
NC	18079 M	Smithfield Packing Co. Inc.	Tar Heel	NC
NE	00199N M	Hormel Foods Corp.	Fremont	AZ
NE	00244M M	IBP, Inc.	Madison	AZ

## Slaughter Establishments Selected for CSF Surveillance\*

				NAHLN
State	Plant ID	Establishment Name	City	Lab
NE	00717CRM	Farmland Foods, Inc.	Crete	AZ
ОН	00818 M	J H Routh Packing Company	Sandusky	ОН
OK	13597 M	Seaboard Farms, Inc.	Guymon	ОК
PA	00791 M	Hatfield Quality Meats, Inc.	Hatfield	PA
PA	09520 M	Leidys Incorporation	Souderton	NJ
PA	20760 M	USA Pork Packers Inc.	Hazleton	PA
SD	00017D M	John Morrell & Co.	Sioux Falls	GA (Tifton)
ТХ	21530 M	Cabrito Market, Inc.	Mission	Serum to FADDL
ТХ	NA	Owens Country Sausage	Richardson	ТХ
ТХ	NA	Union Slaughter House	Del Rio	ТХ
ТХ	NA	J & J Packing	Brookshire	TX

\* All slaughter establishments in high risk States that slaughtered more than 500,000 swine in a year were selected for CSF surveillance testing in order to maximize the coverage of the market swine population in these States. Additional slaughter establishments were selected to ensure some coverage in all high risk swine States and, in some cases, to specifically target high risk swine populations for surveillance.

## Designated Laboratory, Shipping Address and Contact Information for Slaughter Establishments

Location Where Sampled	Designated Laboratory	Laboratory Contact
Nebraska Slaughter Plants	Arizona Veterinary Diagnostic Laboratory 2831 N. Freeway Tucson, AZ 85705	Dr. Greg Bradley Phone: 520-621-2356 Fax: 520-626-8696 gabrad@ag.arizona.edu
California Slaughter Plants Hawaii Slaughter Plants	California Animal Health & Food Safety Laboratory University of California, School of Vet Med W. Health Science Drive Davis, CA 95616	Dr. Sharon Hietala Phone: 530-752-4739 Fax: 530-752-5680 <u>skhietala@ucdavis.edu</u>
IBP - Perry, IA	Colorado State University Veterinary Diag. Laboratory College of Veterinary Medicine & Biomedical Sciences 300 West Drake Fort Collins, CO 80523	Dr. Barbara Powers Phone: 970-297-1285 Fax: 970-297-0320 barb.powers@colostate.edu
IBP - Storm Lake, IA Mary's Ranch - Miami, FL	Kissimmee Diagnostic Laboratory Florida Department of Agriculture 2700 N. John Young Parkway Kissimmee, FL 34741	Kindra Kelly-Quagliana Phone: 321-697-1447 Fax: 321-697-1467 <u>kellyk@doacs.state.fl.us</u>
South Dakota Slaughter Plants	University of Georgia Veterinary Diag. Laboratory 43 Brighton Road Tifton, GA 31793-3000	Julie Musgrove Phone: 229-386-3340 Fax: 229-386-3399 jmusgrov@uga.edu
Swift - Marshalltown, IA	Kansas State Veterinary Diagnostic Laboratory Kansas State University, CVM L232 Mosier Hall, 1800 Dennison Ave Manhattan, KS 66506	Dr. Dick Oberst Phone: 785-532-4411 Fax: 785-532-4039 oberst@vet.k-state.edu
Illinois Slaughter Plants	Breathitt Veterinary Center Murray State University 715 North Drive Hopkinsville, KY 42240	Dr. Shri Singh Phone: 270-886-3959 Fax: 270-886-4295 <u>shri.singh@murraystate.edu</u>

Appendix D: Submission Forms and Instructions for Classical Swine Fever (CSF)	Testing
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Location Where Sampled	Designated Laboratory	Laboratory Contact
IBP - Waterloo, IA	Louisiana Animal Disease	Dr. Kim Bowles
	Diagnostic Laboratory	Phone: 225-578-9777
	Veterinary Medicine	Fax: 225-578-9784
	Diagnostic Laboratory, LSU	kashannon@mail.vetmed.lsu.edu
	111 Dalrymple Bldg, P.O. Box 25070	
Suchtfield Ten Heal NO	Baton Rouge, LA 70803	Dr. Come Ericheen
Smithfield – Tar Heel, NC	Rollins Diagnostic Laboratory	Dr. Gene Erickson
	North Carolina Department of	Phone: 919-733-3986
	Agriculture	Fax: 919-733-0454
	2101 Blue Ridge Rd. Raleigh, NC 27607	gene.erickson@ncmail.net
Farmland – Denison, IA	Now Jorson Dont of A a	Dr. Denise DiCarlo-emery
	New Jersey Dept of Ag, Division of Animal Health	Phone: 609-777-0139
Pine Ridge Farms – Des Moines, IA		Fax: 609-777-8395
Swift – Louisville, KY	State Diagnostic Laboratory H & A Building	
Leidys – Souderton, PA	Rm 201 John Fitch Plaza,	aghdica@ag.state.nj.us
Leidys – Souderton, FA	P.O. Box 330	
	Trenton, NJ 08625	
Excel – Ottumwa, IA	New Mexico Department of	Dawn Bueschel
	Agriculture	Phone: 505-841-2576
	Veterinary Diagnostic Services	Fax: 505-841-2518
	700 Camino de Salud, NE	dbueschel@nmda.nmsu.edu
	Albuquerque, NM 87106	douesener@imida.iiiisu.edu
Indiana Slaughter Plants	Animal Health Diagnostic	Dr. Sung Guk Kim,
Indiana Staughter T lants	Center	Phone: 607-2533839
	Cornell University, College of	sgk1@cornell.edu
	Veterinary Medicine	<u>SgR1 @ comentedu</u>
	S3 110 Schurman Hall, Upper	
	Tower Rd.	
	Ithaca, NY 14853	
Premium Standard Farms –	Ohio Department of	Dr. Yan Zhang
Clinton, NC	Agriculture	Phone: 614-728-6220
JH Routh Packing –	Animal Disease Diagnostic	Fax: 614-728-6310
Sandusky, OH	Laboratory	yzhang@mail.agri.state.oh.us
	8995 E. Main Street	
	Building 6	
	Reynoldsburg, OH 43068	

Location Where Sampled	Designated Laboratory	Laboratory Contact
Oklahoma Slaughter Plants	Oklahoma Animal Disease Diagnostic Laboratory Oklahoma State University College of Veterinary Medicine Farm & Ridge Road Stillwater, OK 74078	Dr. Emily Cooper Phone: 405-744-3620 Fax: 405-744-8612 emily.cooper@okstate.edu
Hatfield – Hatfield, PA USA Pork Packers – Hazleton, PA	Pennsylvania Veterinary Laboratory Pennsylvania Department of Agriculture 2305 N. Cameron Street Harrisburg, PA 17110	Dr. Deepanker Tewari Phone: 717-787-8808 ext 211 Fax: 717-772-3895 <u>dtewari@state.pa.us</u>
John Morrell – Sioux City, IA	CE Kord Animal Disease Diagnostic Laboratory Ellington Agricultural Center 440 Hogan Rd. Nashville, TN 37220	Dr. Tom Chang Phone: 615-837-5257 Fax: 615-837-5250 j.d.chang@state.tn.us
Premium Standard Farms – Milan, MO IBP – Columbus Junction, IA Owens Country Sausage – Richardson, TX Union Slaughter House – Del Rio, TX J & J Packing - Brookshire, TX	Texas Veterinary Medical Diagnostic Laboratory 1 Sippel Road Drawer 3040 College Station, TX 77843	Dr. Loyd Sneed Phone: 979-845-3414 Fax: 979-845-1794 <u>l-sneed@tvmdl.tamu.edu</u>
Minnesota Slaughter Plants	Washington Animal Disease Diagnostic Laboratory P.O. Box 647034 Bustad Hall Room 155-N Pullman, WA 99164	Dr. Dan Bradway Phone: 208-596-6085 Fax: 509-335-7424 <u>dsb@vetmed.wsu.edu</u>

## USDA CSF Surveillance Submission Form for Wildlife Services

Instructions for Filling Out Form

1. <u>Wildlife Services Information:</u> Enter the full name (last, first), address, city, State, and zip code of the biologist collecting and submitting the specimens.

## 2. <u>Testing Laboratory Information:</u>

- a. **Laboratory ID:** Enter the OIDS number for the NAHLN lab that will be receiving the specimens for CSF testing. If serum then FADDL is the lab.
- b. **Laboratory Name:** Enter the formal name of the NAHLN lab that will be receiving the specimens for CSF testing. If serum then FADDL is the lab.
- 3. <u>Page of</u>: Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number</u>: Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submissions. The APHIS suggested format consists of 12 characters:
  - The first two characters indicate the State code, e.g. CO (Colorado) or IA (Iowa),
  - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
  - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
  - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

#### Examples:

*COSAJ060104A* : This submission is from Colorado, the submitter is Steven Allen Jones, the sample was collected on June 1, 004, and it is the first submission of the day. *COSAJ060104B*: This would be the CSF Referral Number for the second submission by that submitter for that day.

- 5. Date collected: Enter in the date the specimen(s) was collected in <u>MM/DD/YY</u> format.
- 6. Collection Site: Enter county and State where animal was located.

## 7. <u>Specimen Information:</u>

- a. **<u>Subject (Animal)</u> ID:** If one exists, enter the animal ID or tag number here.
- b. **Age Class:** Circle the appropriate age group of the pig from which the specimen(s) was collected:
  - 1. Juvenile (suckling pig)
  - 2. Sub-adult (any other pig not classified as a juvenile or adult)
  - 3. Adult (sow or boar of breeding age)
- c. Sex: Circle the gender of the animal from which the specimen(s) was collected:
  - 1. Male
  - 2. Female

- d. **GPS location:** Enter in the GPS location from where the specimen(s) were collected.
- e. **Collection location:** Circle the location(s) that applies to the area where the animal was found:
  - 1. Urban
  - 2. Rural
  - 3. Captive

and enter the proximity (in miles) to:

- 4. Swine farm
- 5. Airport
- 6. Landfill
- f. **Collection habitat:** Circle the habitat(s) that applies to the area where the animal was found:
  - 1. Open field
  - 2. Forested
  - 3. Wetland
  - 4. Other, please specify
- g. **Feral pig type:** Circle the appropriate type of feral pig from which the specimen(s) was collected:
  - 1. Free-roaming domestic pig
  - 2. Eurasian wild pig
  - 3. Wild type cross
  - 4. Javelina
- h. **Specimen bar code:** Place the bar code label here that corresponds to the label that is placed on the specimen.
- i. **Specimen type:** Circle only one of the types of specimens that are being submitted for testing:
  - 1. Tonsil
  - 2. Tonsil scraping
  - 3. Nasal swab
  - 4. Serum
  - 5. Other specimen, please specify (e.g. kidney)
- 8. <u>Date Samples Shipped to Testing Lab:</u> Enter the date this form and the specimen(s) are shipped to the NAHLN testing laboratory in <u>MM/DD/YY</u> format.
- 9. <u>Number of Samples Shipped:</u> Enter the total number of specimens in this shipment.
- **10.<u>Name of Submitter:</u>** The person filling out the form and shipping the specimen(s) should be listed here.

# <u>Please note:</u> Serum and blood samples are not currently tested for CSF at NAHLN labs. Please submit any serum samples collected to FADDL.

## **CSF Submission Form for Wildlife Services**

USDA CSF Surveillance Submission Form for Wildlife Services				of	
Wildlife Services Information: Bloiogist Name:LastFirst	Laboratory ID	sting Laboratory Info: poratory ID		CSF Referral Number:	
Address:	Laboratory Name:			Date Collected: mm / dd / vvvv	
Collection Site: County:		State:			
1 Subject(Animal) ID:	Collection		on Habitat	Feral Pig Type	
Age Class: 1. Juvenile 2. Sub-adult 3. Adult	(Circle all th		I that apply)	(Circle one only)	
Sex: 1. Male 2. Female 3. Unkn		Rural 1. Open field aximity to: 2. Forested		Free-roaming domestic pig     Eurasian wild pig	
	4. Swine farm:			3. Wild type cross	
GPS Location: N	5. Alroart:	miles 4. Other, sp	cify:	2. mage cass	
W	6. Landfil:	miles			
Place specimen barcode here Place specimen barcode here Place specimen barcode here and then select specimen type below and then select specimen type below and then select specimen type below					
1. Tonsil 2. Tonsil scraping 3. Nasal Swab 1. Tonsil	2. Torell scraping 3. Nasal	Swab 1. Tonail	2. Tonsil scrap	ing 3. Nasal Swab	
4. Serum 5. Other, specify: 4. Serum	5. Other, specify:	4. Serum	5. Other, speci	hr	
2 Subject(Animal) ID:	Collection	Location Collecti	on Habitat	Feral Pig Type	
	(Circle all th		I that apply)	(Circle one only)	
Age Class: 1. Juvenile 2. Sub-adult 3. Adult	1. Urban 2.	Rural 1. Open field	1	1. Free-roaming domestic pig	
Sex: 1. Male 2. Female 3. Unkn	own 3. Captive Pro	aximity to: 2. Forested		2. Eurasian wild pig	
	4. Swine farm:			<ol><li>Wild type cross</li></ol>	
GPS Location: N W		miles 4. Other, sp	ecify:		
	6. Landfill:	miles			
	Place specimen barcode h and then select specimen type			men barcode here specimen type below	
1. Tonsil 2. Tonsil scraping 3. Nasal Swab 1. Tonsil	2. Tonsil scraping 3. Nasal	Swab 1. Tonsil	2. Tonsil scrap	ing 3. Nasal Swab	
4. Serum 5. Other, specify: 4. Serum	5. Other, specify:	4. Serum	5. Other, spec	fx	
3 Subject(Animal) ID:	Collection	Location Collecti	on Habitat	Feral Pig Type	
Age Class: 1. Juvenile 2. Sub-adult 3. Adult	(Circle all th	at apply) (Circle al	I that apply)	(Circle ane only)	
Sex: 1. Male 2. Female 3. Unkn	1. Urban 2.	Rural 1. Open flek	1	1. Free-roaming domestic pig	
Gov. I. marc 2. Permarc 3. URM	2. Captine Th			2. Eurasian wild pig	
GPS Location: N	4. Swine farm: . 5. Airport:		-	<ol><li>Wild type cross</li></ol>	
W	6. Landfil:	miles 4. Other, sp	city:		
	e. canoni:				
Place specimen barcode here and then select specimen type below	Place specimen barcode h and then select specimen type			men barcode here specimen type below	
1. Tonall 2. Tonall scraping 3. Nasal Swab 1. Tonall	2. Torrell scraping 3. Nasal	Swab 1. Tonail	2. Tonsil scrap	ing 3. Nasal Swab	
4. Setum 5. Other, specify: A Berum					

Date Samples Shipped to Testing Lab: \_\_mm\_/\_dd\_\_/\_yyyy\_\_

Name of Submitter:

Number of Samples Shipped: \_\_\_\_\_

## **CSF Submission Form for Waste-Feeding Operations**

Instructions for Filling Out Form

1. <u>State/Federal Field Veterinarian</u>: Enter the full name (last, first), address, city, State, and zip code of the veterinary medical officer (VMO) responsible for inspection of this waste feeder, even if not the one collecting and submitting the specimens.

## 2. <u>Testing Laboratory Information:</u>

Laboratory ID: Enter the OIDS number for FADDL (All specimens to be collected are to be serum and thus must be tested at FADDL) Laboratory Name: Enter FADDL.

- 3. <u>Page of :</u> Enter the appropriate page number of the current page out of the number of total pages being submitted.
- **4.** <u>CSF Referral Number</u>: Write in the Referral Number. The number must be a unique identifier for the submission that will not be duplicated in any other CSF surveillance submissions. The APHIS suggested format consists of 12 characters:
  - The first two characters indicate the State code, e.g. CO (Colorado) or IA (Iowa),
  - The next three characters are the collector's initials (First, Middle, Last) if the collector does not have a middle name, skip the middle character,
  - The next 6 characters are the collection date: MMDDYY, e.g. 103105 (October 31, 2005),
  - The last character is a letter representing which submission form of the day it is for the collector, e.g. A (first), B (second), etc.

#### Examples:

*COSAJ060104A* : This submission is from Colorado, the submitter is Steven Allen Jones, the sample was collected on June 1, 004, and it is the first submission of the day. *COSAJ060104B*: This would be the CSF Referral Number for the second submission by that submitter for that day.

## 5. <u>Production Site Information:</u>

**National Premise ID:** Enter the national premise ID number assigned by NAIS for the production site where the animal(s) sampled is from.

State, Zip: Enter the State and zip code of the production site.

**GPS location:** Enter in the GPS location from where the specimen sample(s) were collected.

**Date collected:** Enter in the date the specimen(s) was collected in <u>MM/DD/YY</u> format.

Number of Swine on Farm: Enter current total number of swine on the farm.

**Does this operation feed any of the following waste food:** Circle all answers that apply – meat waste, other waste food (in addition to meat), or no waste food fed on the site.

Additional site identification: Enter waste feeder license number and enter the State premises ID number.

## 6. Specimen Information:

Animal ID: If one exists, enter the animal ID or tag number here.

**Specimen Bar code:** Place the bar code label here that corresponds to the label that is placed on the specimen. A different bar code should be used for each specimen, even for specimens from the same animal.

**Specimen type:** Circle only one of the types of specimens that are being submitted for testing:

- 1. Serum (serum is the primary sample to be collected from swine on waste-feeding sites)
- 2. Other specimen, please specify

**Age Class:** Circle the appropriate age group of the pig from which the sample(s) was collected:

- 1. Juvenile (suckling pig)
- 2. Sub-adult (any other pig not classified as a juvenile or adult)
- 3. Adult (sow or boar of breeding age)

Is the pig unthrifty or sick (circle only one answer): Circle "yes" if the sampled pig appears to be ill or in poor condition, otherwise circle "no".

- 7. <u>Date Samples Shipped to Testing Lab:</u> Enter the date this form and the specimen(s) are shipped to FADDL in <u>MM/DD/YY</u> format.
- 8. <u>Number of Samples Shipped:</u> Enter the total number of specimens in this shipment.
- **9.** <u>Name of Submitter:</u> The person filling out the form and shipping the specimen(s) should be listed here.
- **10.**<u>Phone Number of Submitter:</u> Enter the phone number for the person filling out the form and shipping the specimen(s).

# <u>Please note:</u> Serum and blood samples are not currently tested for CSF at NAHLN labs. Please submit any serum samples collected to FADDL.

## **CSF Submission Form for Waste-Feeding Operations**

USDA CSF Surveillance Submission Transitional Operations	Page of	
State / Federal Field Veterinarian	Testing Laboratory Information	CSF Referral Number:
VMO Name:	Laboratory ID: 2.16.840.1.113883.3.5.1.	
Address:	Laboratory Name:	
City:State:Zip:		

Production Site Information		GPS location: N .			
National Premises ID	State	Zip	0-3100	W	Number of Swine on this farm
			Date Co	Ilected: / / / mm /dd / yy	head
Does this operation feed any of the following waste food: (Circle all that apply)			Additional site identification: Waste feeder license number:		
1 Meat waste					
2 Other waste food			State Premise ID:		
3 No waste food fed to swine					

Animal ID	Bar code	Specimen Type (circle one only)	Age class (circle one only)	Is the pig unthrifty or sick? (circle one only)
	Place specimen barcode here and then select specimen type	1. Serum 2. Other, specify:	1. Juvenile (suckling) 2. Sub-adult 3. Adult (breeder)	Yes No
	Place specimen barcode here and then select specimen type	<ol> <li>Serum</li> <li>Other, specify:</li> </ol>	<ol> <li>Juvenile (suckling)</li> <li>Sub-adult</li> <li>Adult (breeder)</li> </ol>	Yes No
	Place specimen barcode here and then select specimen type	<ol> <li>Serum</li> <li>Other, specify:</li> </ol>	1. Juvenile (suckling) 2. Sub-adult 3. Adult (breeder)	Yes No
	Place specimen baroode here and then select specimen type	<ol> <li>Serum</li> <li>Other, specify:</li> </ol>	1. Juvenile (suckling) 2. Sub-adult 3. Adult (breeder)	Yes No
	Place specimen baroode here and then select specimen type	1. Serum 2. Other, specify:	1. Juvenile (suckling) 2. Sub-adult 3. Adult (breeder)	Yes No

Date Samples Shipped to Testing Lab: \_\_/\_\_/

Number of Samples Shipped: \_\_\_\_\_

Name of Submitter: \_\_\_\_\_

Phone number of submitter:

Revision 1/30/2007

## Designated Laboratory, Shipping Address and Contact Information for Wildlife Services and for Waste-Feeding Operation Submissions

Serum is to be separated off, packaged, and sent Fed Ex overnight with a submission form to FADDL at the following address:

USDA/APHIS/VS/NVSL FADDL 40550 Route 25 Orient, NY 11957

Lab contact:

Samia Metwally, DVM, Ph.D. Head, Diagnostic Services Section Foreign Animal Disease Diagnostic Lab Plum Island Animal Disease Center USDA, APHIS, VS, NVSL P.O. Box 848 Greenport, NY 11944 Voice: (631) 323-3256 Fax: (631) 323-3366E-mail: samia.a.metwally@aphis.usda.gov

#### Classical Swine Fever Surveillance Program Diagnostic Laboratory Submission - Web-Form Data Entry - Quick Reference Guide Login: <u>https://cowebapps.aphis.usda.gov/vslabsub</u>

Create Lab Submission (Diag.Lab)	Review Lab Submission (Diag.Lab)	Enter Lab Results (NAHLN Lab)
<ul> <li><b>Submission Info</b></li> <li>Program: Classical Swine Fever</li> <li>Collector Type: Diagnostic Lab</li> <li>Referral #: Uniquely IDs a lab submission. Manually enter, using this format: State abbreviation, your initials, the date, letter to differential multiple submissions in a day. Example: COSV03152006A</li> <li><u>Click on</u> Create New Submission</li> <li><u>Collection Info</u></li> <li>Change submitting &amp; testing labs if defaults are not correct.</li> <li><u>Specimen Info</u></li> <li>Animal # - uniquely IDs pig. Can link multiple specimens to same pig.</li> <li>Sample Bar Code – uniquely IDs a specimen (each specimen MUST have its own bar code)</li> <li>Sub. Lab Accession # - uniquely IDs a box of specimens or one or more pigs (dead or alive). Diag.Lab assigns number.</li> <li>Reason for Submission – select from menu.</li> <li>Specimen Type – default is Tonsil, select other choices from menu.</li> <li>Collection Date – default is current date. Can type T for today's date, or T-1 for yesterday's date, etc or select date from calendar.</li> <li>Must enter Prem ID and state, or zip and state.</li> <li>Must enter or search for practitioner info.</li> <li>Search % is the wildcard.</li> <li>Can use % with letters and #s</li> <li><u>Click on</u> Save Specimen Information</li> <li><u>Specimen List</u></li> <li>Edit Use to modify existing specimen record.</li> <li><u>Use if you have several similar</u> specimen records to enter.</li> <li><u>Delete</u> Use to remove a specimen record from the lab submission record before</li> </ul>	<ul> <li>1 Search Criteria</li> <li>The Program field is the ONLY mandatory field. All other fields are optional. You can search on one field, or multiple fields, depending on how specific you want to be.</li> <li><u>Drop-down menu fields</u>: If you want criteria in these fields, you must select one of the choices – you cannot manually enter information.</li> <li>Fields with no drop-down menu: If you want to add specific information into these fields, you can manually enter it or use calendars for dates.</li> <li>If you don't know specific information, you can leave the field blank or enter wildcard %.</li> <li>If you know partial information, you can combine the wildcard with letters or numbers. Example: You know the bar code ends in the numbers 367. You can enter %367.</li> <li>2 Search Fields</li> <li>Program: Classical Swine Fever (menu field)</li> <li>Collector Type: Diagnostic Lab (menu field)</li> <li>Collector Type: Diagnostic Lab (menu field)</li> <li>Referral #</li> <li>Sample Bar Code</li> <li>Submission Status – Menu choices are Incomplete, Submitted to Lab, or Submitted with Results.</li> <li>Collection Date Between – If you want to search by a date range, you have several input options:         <ul> <li>Select dates from calendar</li> <li>Type T for today's date, T-4 for 4 days before today, etc</li> <li>Manually enter date mm/dd/yyyy</li> <li>Collection State – menu field.</li> <li>Practitioner</li> <li>Sub. Lab Accession #</li> </ul> </li> <li><u>3 Click on Search</u></li> <li><u>4 Select a Record to View/Edit</u> Your User ID determines which records you can view and edit.</li> <li>In general, if you are a Diagnostic Lab Official, you can view Diagnostic Lab submissions generated by individuals in the same lab.</li> <li>If you are a INAHLN Testing Lab Official, you can see a list of Diagnostic Lab forms, Slaughter Establishment forms, and Wildlife S</li></ul>	1       Search for Lab Submission Record         • Program: Classical Swine Fever         • Collector Type: Diagnostic Lab         Use the search techniques described under         Review Lab Submission. Only records in         Submitted to Lab Status can be edited.         2       Select Lab Submission Record(s)         3       Click on Enter Lab Results         4       Enter Date Specimens were Received         (If not already entered) Date must be ≥ the shipped date. Refer to date input options listed under Review Lab Submission.         5       Select Specimen Record(s) to Edit         Records highlighted in red need data input.         Records highlighted in green are complete, but can be edited if necessary.         Color       Test Results         Green       Has been tested & result entered         Red       Not tested yet "Pending NAHLN Testing"         6       Click on Enter/Edit Lab Results         7       Edit Specimen Record(s)         Field       Description         Test       • Not Tested (and will not be tested) ÷ Final Status         1       . Not Tested (and will not be tested) ÷ Final Status         1       . Notot Tested (and will not be tested) ÷ Final Status         1       . Notot Tested (and will not be tested) ÷ Final Status         1 </td
<ul> <li>submitting it. You can still edit, delete, or add specimen records, or edit collection information.</li> <li>8 Shipping Information Date specimen shipped must be ≥ all specimen</li> </ul>	forms that have been submitted to your NAHLN lab.           5         Click on	Test Result.         • Final         • Sent to FADDL         8       Click on
<ul> <li>collection dates. Number of specimens shipped is auto-populated based on info previously entered.</li> <li><u>Click on</u> Complete Submission</li> </ul>	Note: You can also view/edit incomplete lab submission records by selecting them from the Incomplete Lab Submissions list on the Welcome/Home page.	• Click on     Save restrictions       All specimen records must be complete (green) before you can complete submission.       9     Click on   Complete Submission

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