



264 Greene Hall
Auburn University
Auburn, AL 36849-5519
Web: <http://www.vetmed.auburn.edu/bacteriology-and-mycology>

BACTERIOLOGY/MYCOLOGY

OFFICE USE ONLY

Accession # _____

Rec'd _____ Assigned _____

Laboratory: 334-844-2658

OWNER INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

ANIMAL NAME/ID _____

Species _____ Breed _____

Sex _____

Age _____ Month _____ Year (check one)

CLINIC INFORMATION

Referring Veterinarian: _____

Clinic Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

LICENSE NO: _____ STATE: _____

Phone: (____) _____ FAX: (____) _____

Email: _____

HISTORY (Indicate primary purpose for submitting specimen).

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SPECIMEN DETAILS

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|-----------------------------|--|---------------|--|
| Specimen Submitted: | | | |
| Date Collected: | | Date Shipped: | |
| Disease/Pathogen Suspected: | | | |
| Antimicrobial Treatment: | | | |

SERVICE(S) REQUESTED

| | |
|--------------------------|---|
| <input type="checkbox"/> | Antimicrobial Susceptibility (per Isolate) |
| <input type="checkbox"/> | Bacterial Culture (Aerobic) |
| <input type="checkbox"/> | Bacterial Culture (Anaerobic) |
| <input type="checkbox"/> | Blood Culture |
| <input type="checkbox"/> | <i>Brucella canis</i> Serology (RSAT) |
| <input type="checkbox"/> | <i>C. difficile</i> Toxin Test |
| <input type="checkbox"/> | <i>C. perfringens</i> Toxin Test |
| <input type="checkbox"/> | Cryptococcal antigen latex agglutination |
| <input type="checkbox"/> | Fecal Culture (<i>Campylobacter</i> spp. Screen Only) |
| <input type="checkbox"/> | Fecal Culture (<i>Salmonella</i> spp. Screen Only) |
| <input type="checkbox"/> | Fecal Culture (<i>Salmonella</i> spp. & other Fecal Pathogens) |

| | |
|--------------------------|---|
| <input type="checkbox"/> | Fungal Culture-Deep Systemic |
| <input type="checkbox"/> | Fungal Culture-Dermatophyte |
| <input type="checkbox"/> | Microscopic-Bacterial |
| <input type="checkbox"/> | Microscopic-Fungal |
| <input type="checkbox"/> | Mycobacterium Culture |
| <input type="checkbox"/> | Mycoplasma Culture |
| <input type="checkbox"/> | Strangles Screen (<i>Streptococcus equi</i> ssp. <i>equi</i>) |
| <input type="checkbox"/> | Kit 1: Four Port-A-Cul tubes for solids |
| <input type="checkbox"/> | Kit 2: Four Port-A-Cul vials for fluids |
| <input type="checkbox"/> | Kit 3: Combo Pack – two Port-A-Cul tubes & two vials |
| <input type="checkbox"/> | Kit 4: Four blood culture bottles |

Submission Fees

| | |
|--|---------|
| Cultures | |
| Bacterial (Aerobic) | |
| With Identification of 1–2 Organisms | \$23.00 |
| Each Additional Identification | \$6.00 |
| Bacterial (Anaerobic) | |
| With Identification of 1-2 Organisms | \$20.00 |
| Each Additional Identification | \$6.00 |
| Blood Culture | \$13.00 |
| Fecal Culture (<i>Salmonella</i> spp. Screen Only) | \$17.00 |
| Fecal Culture (<i>Campylobacter</i> spp. Screen Only) | \$17.00 |
| Fecal Culture (for <i>Salmonella</i> spp. and other Fecal Pathogens) | \$23.00 |
| Strangle Screen (<i>Streptococcus equi</i> ssp. <i>equi</i>) | \$14.00 |
| Fungal Culture – Deep systemic | \$14.00 |
| Fungal Culture – Dermatophyte | \$12.00 |
| Mycobacterium Culture | \$12.00 |
| Mycoplasma Culture | \$17.00 |
| Antimicrobial Susceptibilities | |
| Antimicrobial Susceptibility per Isolate | \$12.00 |
| Individual Drug Susceptibility | \$15.00 |
| Resistant Panel per Isolate | \$35.00 |
| Microscopic Exams (when ordered without a culture) | |
| Gram Stain | \$6.00 |
| Fungal Preparation (KOH) | \$6.00 |
| Dermatophilosis Smear | \$8.00 |
| Acid Fast Stain | \$14.00 |
| Serology | |
| <i>Brucella canis</i> Serology (RSAT) | \$16.00 |
| Cryptococcal antigen latex agglutination | \$13.00 |
| Toxin Tests | |
| <i>Clostridium perfringens</i> Toxin Test | \$30.00 |
| <i>Clostridium difficile</i> Toxin Test | \$30.00 |
| Transport kits | |
| Kit 1: Four Port-A-Cul tubes for solids | \$25.00 |
| Kit 2: Four Port-A-Cul vials for fluids | \$25.00 |
| Kit 3: Combo Pack – two Port-A-Cul tubes & two vials | \$25.00 |
| Kit 4: Four blood culture bottles | \$30.00 |

Submission Requirements

SPECIMEN COLLECTION

- Perform a surgical scrub prior to collection to remove normal flora.
- Collect sufficient fluid or tissue to perform all necessary tests.

TRANSPORT

- Samples should be submitted in separate sterile containers.
- Proper transport devices are a must. Port-a-cul tubes and vials will support aerobes, anaerobes, mycobacteria and fungi.
- Fecal samples should be received in the laboratory within 24 hours. No swabs.
- All specimens must be **shipped overnight with a cool pack** in an insulated container.

Exceptions: dermatophyte cultures, blood cultures, and specimens suspect for *Pythium* spp. or zygomycetes.

PATIENT INFORMATION

- Identify tests desired, collection method, provide history and suspected pathogen(s).

Do not hesitate to contact the laboratory if you have specific questions or concerns: 334-844-2658