



MOLECULAR DIAGNOSTIC SERVICES (PTY) LTD

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Registration Number 2001 001 77907

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MDS REF No.
(Office use only)

VETERINARY MOLECULAR TEST REQUISITION FORM: (NUCLEIC ACID AMPLIFICATION)

ONLINE REGISTRATION - TESTING REQUESTS CAN BE LOGGED AND RESULTS CHECKED VIA OUR ONLINE SITE: vetsite.mdsafrica.net RN#:

Please print clearly and complete section below with Account holders' information.

VET PRACTICE / SENDER (Account holder):		REF. VET (if applicable):
ADDRESS:		POSTAL CODE:
EMAIL:	ADDITIONAL EMAIL:	
TEL:	CELLPHONE:	REF. / PURCHASE ORDER NO. (if applicable):

PTO: FOR THE MDS POLICY, RECOMMENDED SAMPLE TYPE, STORAGE, PANEL TESTS, MULTIPLE SAMPLE LISTING and TRANSPORTATION INSTRUCTIONS

ANIMAL'S INFORMATION FOR SINGLE LISTING

Owner name:	Animal ID/Name:	
Species:	Sample Type:	Date of Sample Collection:

MARK (X) TEST(S) REQUIRED

ANIMAL GENETIC TESTS	TEST CODE	X	SAMPLE TYPE
BOVINE BLOOD LINE (PARENTAGE)	BP		MDS
FELINE POLYCYSTIC KIDNEY DISEASE	PKD		EDTA/ MDS
MULTI-DRUG RESISTANCE GENE (CANINE)	MDR1		EDTA
PORCINE STRESS SYNDROME	PMH		H/ MDS/ EDTA
β-CASEIN A1A2 DIFFERENTIATION	A1A2		EDTA
ICHTHYOSIS (BOVINE)	ICH		EDTA/ MDS
PSEUDOMYOTONIA (BOVINE)	PMT		EDTA/ MDS
AQUATIC TESTS	TEST CODE	X	SAMPLE TYPE
KOI HERPESVIRUS	KHV		GS/ T
ALBALONE HERPESVIRUS	AbHV		T
OSTREID HERPESVIRUS 1	OHV1		T
PERKINSUS OLSENI	P.OL		T
PERKINSUS SPP	P.SPP		T
XENOHALIOTIS CALIFORNIENSIS	X.CAL		T
AVIAN TESTS	TEST CODE	X	SAMPLE TYPE
AVIAN BORNAVIRUS* Requires additional sample	PDD		BF/ EDTA/ MDS/ T
AVIAN DNA SEXING (SANAS Accredited)	AS		EDTA/ MDS
AVIAN POLYOMA VIRUS	APV		EDTA/ MDS/ CS/ T
CHLAMYDIACEAE SPECIES**	C. sp.		EDTA/ MDS/ CS/ T
PACHECOS DISEASE VIRUS	PDV		EDTA/ MDS/ CS/ T
PIGEON CIRCOVIRUS	PCIRC		EDTA/ MDS/ CS/ T
PSITTACINE BEAK AND FEATHER DISEASE VIRUS	PBFV		EDTA/ MDS/ BF
**This test detects all Chlamydiaceae species including C. psittaci.			
CANINE TESTS	TEST CODE	X	SAMPLE TYPE
BABESIA SPP	BAB		EDTA
BORDETELLA BRONCHISEPTICA	BBS		NS
CANINE ADENOVIRUS	CAV		EDTA/ MDS
CANINE DISTEMPER VIRUS	CDV		EDTA/ CSF/ T
CANINE HERPESVIRUS	CHV		EDTA/ T
CANINE PARVOVIRUS	CPV		EDTA/ T
CLOSTRIDIUM DIFFICILE (TOXIN A AND B)	C. DIFF		F
EHRlichia CANIS	EC		EDTA
GIARDIA LAMBLIA	GL		F
LEPTOSPIRA SPP.	LEPTO		EDTA/ FM
MYCOPLASMA HAEMOCANIS	HAEMOC		EDTA
EQUINE TESTS	TEST CODE	X	SAMPLE TYPE
BACTERIAL 16S TYPING	16S		T
EQUINE HERPESVIRUS 1	EHV 1		EDTA/ N/ T
EQUINE HERPESVIRUS 2	EHV 2		NS/ T
MYCOPLASMA SPP TYPING	GEN MYCO		T
PNEUMOCYSTIS CARINII	PCP		NS/ T
RHODOCCUS EQUI	R. EQUI		F/ T
THEILERIA EQUI (BABESIA EQUI)	TEQ		EDTA
FELINE TESTS	TEST CODE	X	SAMPLE TYPE
BARTONELLA SPP	BART		EDTA/ T
BORDETELLA BRONCHISEPTICA	BBS		NS
CHLAMYDOPHILA FELIS	CF		ES/ EDTA
CLOSTRIDIUM DIFFICILE (TOXIN A AND B)	C. DIFF		F
FELINE CALCIVIRUS	FECL		ES/ NS
FELINE CORONAVIRUS	FECV		EDTA/ CSF/ PF
FELINE HERPES VIRUS	FHV		ES/ NS/ EDTA
FELINE DISTEMPER VIRUS	FEPLV		EDTA
FELINE IMMUNODEFICIENCY VIRUS	FIV		EDTA/ T
FELINE LEUKAEMIA VIRUS	FELV		EDTA
GIARDIA LAMBLIA	GL		F
MYCOPLASMA HAEMOFELIS	HAEMOF		EDTA
TOXOPLASMA GONDII	TOXO		EDTA/ CSF

PORCINE TESTS	TEST CODE	X	SAMPLE TYPE
ACTINOBACILLUS PLEUROPNEMONIAE	APPN		NS
BRACHYSPIRA HYODYSENTERIAE	BH		F
BRACHYSPIRA PILOSICOLI	BP		F
HAEMOPHILUS PARASUIS	H. PARA		NS/ OF/ T
LAWSONIA INTRACELLULARIS	LAWS		F
MYCOPLASMA HYOPNEUMONIAE	M. HYOP		NS/ OF/ T/ TS
MYCOPLASMA HYORHINIS	M. HYOR		NS/ OF
PASTEURELLA MULTOCIDA	PM		NS/ OF/ T
PORCINE CIRCOVIRUS -2 (Detection & Viral Load)	PCV-2 VL		EDTA/ OF
SALMONELLA SPP	SAL		F
STREPTOCOCCUS SUI	S. SUI		EDTA/ OF
POULTRY TESTS	TEST CODE	X	SAMPLE TYPE
AVIAN FOWL POX VIRUS	POX		TS
AVIAN LEUKOSIS VIRUS J-STRAIN	ALV-J		T
AVIAN NEPHRITIS VIRUS	ANV		CS/ T
AVIAN REOVIRUS	REO		T/ TS
HAEMOPHILUS PARAGALLINARUM	HPG		T/ TS
INFECTIOUS BRONCHITIS VIRUS	IBV		T/ TS
IBV GENOTYPING	IBV GENO		T/ TS
INFECTIOUS BURSAL DISEASE VIRUS (SANAS Accredited)	IBDV		T/ TS
IBDV GENOTYPING (SANAS Accredited)	IBDV GENO		T/ TS
INFECTIOUS LARYNGOTRACHEITIS VIRUS	ILT		TS
LISTERIA MONOCYTOGENES	L. MONO		EDTA/ OC/ T
MAREKS DISEASE VIRUS	MDV		T
MYCOPLASMA GALLISEPTICUM	MG		T/ TS
MYCOPLASMA GALLISEPTICUM GENOTYPING	MG GENO		T/ TS
MG VACCINE STRAIN: 6/85 OR TS-11	6/85 OR TS-11		T/ TS
MYCOPLASMA SYNOVIAE	MS		T/ TS
MYCOPLASMA SYNOVIAE GENOTYPING	MS GENO		T/ TS
ORNITHOBACTERIUM RHINOTRACHEALE	ORT		TS
PASTEURELLA MULTOCIDA	PM		CS/ TS
TURKEY RHINOTRACHEITIS VIRUS	TRTV		TS
TURKEY HERPES VIRUS VECTOR DETECTION	HVT		T/ TS
RUMINANT TESTS	TEST CODE	X	SAMPLE TYPE
BOVINE HERPESVIRUS 1	BHV		NS/ T
BOVINE LEUKAEMIA VIRUS	BLV		EDTA
BOVINE VIRAL DIARRHOEA VIRUS	BVDV		EDTA/ M/ T/ SF
CAMPYLOBACTER FOETUS	C. FETUS		FM/ SF
CAMPYLOBACTER JEJUNI	CAMP JJ		FM/ SF
CHLAMYDIACEAE SPECIES (includes Chlamydia abortus)	C. sp.		EDTA/ MDS/ CS/ T
COXIELLA BURNETII	C. BURN		EDTA/ FM/ T
LISTERIA MONOCYTOGENES	L. MONO		EDTA/ OC/ T
MYCOPLASMA BOVIS	M. BOVIS		M/ NS
SALMONELLA SPP	SAL		F
TOXOPLASMA GONDII	TOXO		EDTA/ CSF
TRITRICHOMONAS FOETUS (SANAS Accredited)	TTF		FM/ SF
FEED ANALYSIS (SPECIES ID)	TEST CODE	X	SAMPLE TYPE
BOVINE DNA ID	B ID		Feed
EQUINE DNA ID	EQ ID		Feed
PORINE DNA ID	POR ID		Feed
POULTRY DNA ID	POUL ID		Feed
PANEL TESTS OVER PAGE	OTHER TESTS: We are constantly developing new tests, please indicate tests of interest below.		

NUCLEIC ACID AMPLIFICATION - PANELS		TEST CODE	X	SAMPLE TYPE
BOVINE MASTITIS PANEL	Staphylococcus aureus, Staphylococcus spp., Enterococcus spp., Corynebacterium bovis, Mycoplasma bovis, Mycoplasma spp., Beta-lactamase gene, Escherichia coli, Streptococcus dysgalactiae, Streptococcus agalactiae, Streptococcus uberis, Prototheca, Klebsiella spp., Yeast, Serratia marcescens, Truparella pyogenes/ Peptostreptococcus indolucus	BMP		M
CAMPYLOBACTER FETUS /TRITRICHOMONAS FOETUS	Campylobacter Fetus/ Tritrichomonas Foetus Combo Test	TTF/C. Fetus		FM/ SF
RUMINANT ABORTION PANEL	Anaplasma phagocytophilum, Bovine Herpes Virus type 4, Campylobacter fetus, Chlamydia spp., Coxiella burnetii, Listeria monocytogenes, Leptospira pathogens, Salmonella spp.	RAP		FM/ SF
RUMINANT RESPIRATORY PANEL	Histophilus somni, Mycoplasma bovis, Bovine coronavirus, Bovine respiratory syncytial virus, Bovine parainfluenza 3, Pasteurella multocida, Mannheimia haemolytica.	RRP		NS

MDS SAMPLE POLICY: Unidentified samples will not be tested. When multiple sample types are submitted for testing, clients will be charged for each test performed per sample type. Pooling surcharges apply per pooling request and pre-processing handling fees are charged to samples needing additional processing steps. Payment and/or proof of payment is required with submitted samples or before release of results. The reported test result/s shall relate only to the specific samples submitted. Each test done by MDS is internally controlled to validate the testing process and the collected sample. This mechanism does not allow us to validate 'pooled' samples, therefore, 'pooling' of samples i.e. placing two or more samples in the same tube is discouraged.

TRANSPORTATION REQUIREMENTS: To meet regulatory requirements, samples submitted from outside of South Africa MUST BE imprinted on FTA card or collected using an MDS Sample Collection Kit. Store FTA card kit at room temperature. Submit samples using 3-layered packaging - Specimen in a leak-proof primary receptacle which must be sealed in a leak-proof secondary packaging (such as a specimen bag) placed in a third outer packaging of adequate strength to contain sample. For liquid substances, multiple fragile primary receptacles must be individually wrapped/ separated and absorbent material must be placed between the primary receptacles (s) and the secondary packaging; The package contents (excl. DBS which are exempt) must be identified with a biological category UN3373 label. Parcels containing exempt samples must be labeled "Exempt animal specimen"

SAMPLE TYPE KEY WITH RECOMMENDED STORAGE, TRANSIT TIMES & TEMPERATURES								
BLOOD FEATHER	BF	O/N at ROOM TEMP	FOETAL MATERIAL	FM	O/N at 2 – 8°C	ORAL FLUID	OF	O/N at 2 – 8°C
CLOACAL SWAB	CS	O/N at 2 – 8°C	GILL SWAB	GS	O/N at 2 – 8°C	OVERNIGHT CULTURE	OC	O/N at 2 – 8°C
CEREBROSPINAL FLUID	CSF	O/N at 2 – 8°C	HAIR SAMPLE	H	O/N at ROOM TEMP	PERITONEAL FLUID	PF	O/N at 2 – 8°C
EDTA WHOLE BLOOD	EDTA	O/N at 2 – 8°C	MDS SAMPLE COLLECTION KIT	MDS	O/N at ROOM TEMP	SEMINAL FLUID	SF	O/N at 2 – 8°C
EYE SWAB	ES	O/N at 2 – 8°C	MILK	M	O/N at 2 – 8°C	TISSUE OR ASPIRATE	T	O/N at 2 – 8°C
FAECES OR FAECAL SWAB	F	O/N at 2 – 8°C	NASAL SWAB	NS	O/N at 2 – 8°C	TRACHEAL SWAB	TS	O/N at 2 – 8°C

SAMPLE DETAILS FOR MULTIPLE SAMPLE LISTING
PLEASE FILL IN ALL SECTIONS

MDS REF No. (Office use only)	BREED / SPECIES (Species required for Avian DNA Sexing)	ANIMAL ID (Name/ Ring No.)	TEST CODE	SAMPLE TYPE (Refer to key)
5				
10				

DISCLAIMER
In the event that Molecular Diagnostic Services (Pty) Ltd (MDS) returns a verifiable erroneous result for a particular sample, or if negligence is proven on the part of MDS, any claim against MDS is limited to the amount paid or to be paid to perform the test in question. In no event shall MDS be liable for direct, indirect, incidental, consequential, special or other damages of any nature even if MDS has been advised of the possibility of such damage.
Needles are inherently dangerous and because this product is used outside of our control, MDS will NOT be liable for any damages or injury caused by needles, the user accepting full responsibility for the use and safe disposal of the needles, which are entirely at the user's risk.
MDS respects your right to privacy and therefore aims to ensure that we comply with the legal requirements of the POPI Act which regulates the manner in which we collect, process, store, share and destroy any personal and special personal information which you have provided to us. As such, we realize the importance of confidentiality in the service we provide and undertake to abide by our Privacy Policy. For further information about our Privacy Policy, please contact our office or visit our website www.mdsafica.net.

CUSTOMER TO COMPLETE				
Method of Payment: <small>(please tick payment type)</small>	Date :	Cheque	Money/Postal Order	
		Cash	EFT	Credit Card
Bank: First National Bank (Westville)	Molecular Diagnostic Services Pty Ltd			
Account Number: 6210 9297 912	Branch code: 223526			
Card Holder's Name:				
Card No.:				
Type:	Expiry:	CVV No.:		
*Signature:	*Authority to process and retain Credit Card details			

Office use only:			
SAMPLE RECEIVING:		<i>Initial and date where applicable</i>	
Parcel#:	Samples Numbered By:		
Form loaded by:	Date Numbered:		
Payment (x):	None	/	Cash / EFT
Sample reception:		Lab:	
Checked by:	Date:	Checked by:	Date: