CELL LINE SUSCEPTIBILITY ACCESSION FORM
Washington Animal Disease Diagnostic Laboratory
College of Veterinary Medicine, Washington State University

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WADDL USE ONLY

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Please type or use black ink and print clearly.

Submitter:	Last Name:	First Name:
Organization:		
Address:		
City:	State:	Zip:
Phone:	E-mail:	

Additional vial of cells for Mycoplasma spp. testing submitted

Note: All cell lines submitted are required to be tested for Mycoplasma spp. by WADDL as part of cell line susceptibility testing. Cell lines that are positive for Mycoplasma spp. will not undergo further screening, as infection interferes with ability to reliably detect CPE.

Test Requested	Cell Line Submitted	Susceptible Virus	ID/Passage #
	EPC (epithelioma papulosum cyprini) cell line	Infectious Hematopoietic Virus (IHNV)	
	CHSE-214 (Chinook salmon embryo) cell line	Infectious Pancreatic Necrosis Virus (IPNV)	
	FHM (fathead minnow) cell line	Largemouth Bass Virus (LMBV)	
	BF-2 (bluegill fry) cell line	Largemouth Bass Virus (LMBV)	
	EPC (epithelioma papulosum cyprini) cell line	Spring Viremia of Carp Virus (SVCV)	
	FHM (fathead minnow) cell line	Spring Viremia of Carp Virus (SVCV)	
	EPC (epithelioma papulosum cyprini) cell line	Viral Hemorrhagic Septicemia Virus (VHSV)	
	FHM (fathead minnow) cell line	Viral Hemorrhagic Septicemia Virus (VHSV)	
	BF-2 (bluegill fry) cell line	Viral Hemorrhagic Septicemia Virus (VHSV)	

WADDL reserves the right to modify the tests requested for more efficient case work-up and / or to send specimens to outside laboratories to perform testing not done at WADDL. Samples submitted become the property of WADDL and may be disposed of in 30 days.

SAMPLE COLLECTOR:

_____
Print Collector's Name

_____
Sample Collector's Signature

FORM-QA-8Y/1