

WADDL  
USE  
ONLY

**ACCESSION FORM FOR VIBRIO SPP. TESTING**

**Avian Health and Food Safety Laboratory**  
**Washington Animal Disease Diagnostic Laboratory**  
 College of Veterinary Medicine, Washington State University

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Collector/Sampler:		Cert #:
Agency:		
Street address:		
City:	State:	Zip:
Phone:	E-mail:	

Owner/Producer:		
Company Name:		
Sampling Site Address:		Site ID:
City:	State:	Zip:
Phone:	E-mail:	

Sample(s) Submitted:	
Species:	
Lot #:	# of Sample Submitted:
Date Collected:	Time Collected:
Air Temperature:                      °C	Shore Water Temperature:                      °C
Surface Water Temperature:                      °C	Tissue Temperature:                      °C
Salinity:                      ppt	Harvest Conditions (circle): Overcast    Rainy    Sunny    Windy

**TEST REQUESTED**

Vibrio parahaemolyticus & Vibrio vulnificus MPN

**ADDITIONAL HISTORY/INFORMATION**

Collector's Signature:	Date:
X	