


RIPAC-LABOR GmbH	Diagnostic form	Seite 1 von 1
FB-087-05	Veterinary diagnostics	Gültig ab 17.06.2022 Nächste Revision: 17.06.2025

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Date of receipt:

RIPAC no.: D.....

Veterinarian / Sender:

Name:

E-mail:

Phone:

Address:

.....

Livestock owner / Farm:

Name:

E-mail:

Phone:

Address:

.....

Sample:

___ faeces ___ organs

___ faecal swab ___ heads

___ anal swab ___ carcass

___ cervical swab ___ blood

___ bacterial culture (swab / agar plate)

___ others:

Animal species:

Date of sampling:

Anamnesis:

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Requested examination:

General bacteriological examination (BE)
(aerobic/anaerobic) in special regard to:
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- Special BE**
 - Avibacterium paragallinarum*
 - Brachyspira* spp.
 - Campylobacter* spp.
 - Chlamydia* spp.
 - Botulinum neurotoxin (PCR)
 - Clostridioides difficile*
 - Lawsonia* spp.
 - Listeria* spp.
 - Mycobacterium* spp.
 - Mycoplasma* spp.
 - Nocardia* spp.
 - Salmonella* spp.
 - Others:

- Susceptibility test**
- Virological examination**
 - Corona virus**
 - immunochromatographic test [cattle]
 - real-time PCR (qPCR) [swine]
 - Rota virus group A**
 - immunochromatographic test [cattle]
 - real-time PCR (qPCR) [swine]
 - with further isolation and cultivation for subsequent vaccine production
- Mycological examination**
- Parasitological examination**
 - Coccidia / Cryptosporidia
 - worm eggs

- Serotyping**
 - Ornithobacterium rhinotracheale* (ORT)
 - Salmonella* spp.
- ELISA**
- Others:**

Report to:

Sender Vet Livestock owner

E-mail Fax Standard Mail

Invoice to:

Sender Vet Livestock owner

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Client (date / signature)

.....

RIPAC-verification (date / signature)

→ Please order autogenous vaccines separately (Tel. +49-331-581840-0/Fax +49-331-581840-10)