



# Analysis Request Form (Please submit with samples)

Send To: **Idaho Udder Health Systems, P.C.**  
**105 Country Lane**  
**Jerome, ID 83338**

**Phone : (208) 825-1806**  
**Fax : (208) 644-9380**  
**jerome@udderhealth.com**  
**www.udderhealth.com**

Sample(s) Submitted For:

Email Reports to:

Client#: \_\_\_\_\_

Service Provider: \_\_\_\_\_

Client Name: \_\_\_\_\_

Client Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Service Provider....send results to Client also?  Yes  No  
Preferred method(s) of receiving results?  Mail  Email

**On-Farm Services Also Available:**  
CMT Survey  
Environmental Sanitation Evaluation  
Equipment Evaluation  
Milker Training  
Parlor Optimization Study  
Sample Collection  
Udder Exams

Put sample information on vial: Cow#, Sample Date, and Time! Check desired test(s).

| COW MILK ANALYSIS                |                                      | OK to Freeze? |
|----------------------------------|--------------------------------------|---------------|
| <input type="checkbox"/> 103     | Standard Milk Culture                | Y             |
| <input type="checkbox"/> 103M    | Standard + Myco Culture              | Y             |
| <input type="checkbox"/> 103MP   | Standard + Myco + Proto Culture      | Y             |
| <input type="checkbox"/> 125     | Myco Selective Culture               | Y             |
| <input type="checkbox"/> 125P    | Myco Culture + PCR- w/Pooling ^      | Y             |
| <input type="checkbox"/> 125CPCR | Myco Culture + PCR- No Pooling       | Y             |
| <input type="checkbox"/> MYCOPC  | Myco PCR- w/Pooling ^ (No Culture)   | Y             |
| <input type="checkbox"/> 160     | Prototheca Selective Culture         | Y             |
| <input type="checkbox"/> 160M    | Proto + Myco Selective Culture       | Y             |
| <input type="checkbox"/> MP2     | P/A: Staph aureus, Strep ag          | Y             |
| <input type="checkbox"/> MP3     | P/A: Staph aureus, Strep ag + Myco   | Y             |
| <input type="checkbox"/> MP2G    | Staph aureus, Strep ag (MCM)         | Y             |
| <input type="checkbox"/> MP3G    | Staph/Strep + Myco Agar (MCM)        | Y             |
| <input type="checkbox"/> MP3PCR  | MP3 + Myco PCR- w/Pooling ^          | Y             |
| <input type="checkbox"/> MP2P    | P/A: Staph aureus, Strep ag + Proto  | Y             |
| <input type="checkbox"/> MP4     | Staph aureus/Strep ag + Myco + Proto | Y             |
| <input type="checkbox"/> BVDCOW  | BVD Cow Milk PCR                     | Y             |

Write in Test Request: \_\_\_\_\_

Put sample info on sample: ID/Source, Sample Date, and Time! Check desired test(s).

| OTHER ANALYSIS                 |                                   | Sample Type   | OK to Freeze? |
|--------------------------------|-----------------------------------|---------------|---------------|
| <input type="checkbox"/> 104   | Bedding Analysis                  | Environmental | N             |
| <input type="checkbox"/> 122   | Towel Analysis                    | Environmental | N             |
| <input type="checkbox"/> 213   | Bacteria Isolation (For Dairy Cli | Environmental | N             |
| <input type="checkbox"/> 161   | Prototheca Filter Culture         | Environmental | N             |
| <input type="checkbox"/> 200   | Water Analysis: TC & EC, P/A      | Water         | N             |
| <input type="checkbox"/> 201   | Dairy Water Quality Test          | Water         | N             |
| <input type="checkbox"/> 202   | Dairy Pathogen Water Analysis     | Water         | N             |
| <input type="checkbox"/> MALDI | MALDI-TOF Identification          | Isolate       | N             |
| <input type="checkbox"/> 125M7 | Mycoplasma Speciation- PCR        | Isolate       | N             |

Write in Test Request: \_\_\_\_\_

Put sample info on vial: Tank/Pen#, Sample Date, and Time! Check desired test(s).

| BULK/STRING MILK ANALYSIS         |                                      | OK to Freeze? |
|-----------------------------------|--------------------------------------|---------------|
| <input type="checkbox"/> 105PCRG  | Bulk Tank Culture (MCM) + Myco PCR   | Y             |
| <input type="checkbox"/> 105P     | String Culture Prototheca Selective  | Y             |
| <input type="checkbox"/> 125BTPCR | Myco PCR w/Speciation (Bulk/String)  | Y             |
| <input type="checkbox"/> BTCOMP   | BT Components (BF,Lac,Pro,Sol,etc) ~ | N             |
| <input type="checkbox"/> BTMUN    | Milk Urea Nitrogen (BT) ~            | N             |
| <input type="checkbox"/> BTSCC    | Bulk Tank Somatic Cell Count ~       | N             |
| <input type="checkbox"/> 105PI    | BT Culture + PIC (+SPC)              | N             |
| <input type="checkbox"/> LPC      | Lab Pasteurization Count (LPC + SPC) | N             |
| <input type="checkbox"/> LPCPIC   | LPC + PIC (+SPC)                     | N             |
| <input type="checkbox"/> LPPITC   | LPC + PIC + TC (+SPC)                | N             |
| <input type="checkbox"/> PIC      | Pre-Incubation Count (PIC + SPC)     | N             |
| <input type="checkbox"/> SPC      | Standard Plate Count (SPC)           | N             |
| <input type="checkbox"/> SPCTC    | SPC + Total Coliform                 | N             |
| <input type="checkbox"/> TC       | Total Coliform Count                 | N             |
| <input type="checkbox"/> BVDBT    | BVD Bulk Tank PCR                    | Y             |

Write in Test Request: \_\_\_\_\_

**Please write sample information (Cow#s, Sample Location, Date Taken, etc.) on the sample or back of this ARF or results may not be readable!**

^ = Test may include additional charges for individual PCR testing  
~ = Test may include additional shipping fees for outlab shipping