



Lab ref

Trichinella Testing Submission Form for Feral/Wild Boar

Laboratory of Destination:

APHA Parasitology Group (Wildlife)
National Reference Laboratory: Trichinella & Echinococcus,
NAFIC Site
Sand Hutton, York, YO41 1LZ

Contact:

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FOR COMPLETION BY HUNTER SUBMITTING THE SAMPLES	
Unique identification number:	
Name: Address: Telephone: Email:	
Preferred method for communication of results (circle): Tel / Email <i>Please provide number/email if different to above</i>	
Location of kill:	Map reference (if available):
Date of kill:	Sex of Boar (circle): M / F
Age of Boar (circle): <ul style="list-style-type: none"> • Up to 6 months • 6-12 months • 1-2 years • 2-3 years • 3+ years Adult • Unsure 	Sample Type (circle): <ul style="list-style-type: none"> • Pillar of Diaphragm • Other (please state)
No. samples pooled:	Date sent to Lab:
Signature:	

FOR COMPLETION AT LABORATORY	
DATE ARRIVED:	TEST RESULT (circle): <ul style="list-style-type: none"> • <i>Negative</i> • <i>Suspect Positive (Re-test Required)</i> • <i>Confirmed Positive after Re-test</i> • <i>Confirmed Negative after Re-test</i> • <i>Inadequate Sample (Re-test Required)</i>
DATE TESTED:	
SIGNATURE:	