SEROLOGY-VIROLOGY DEPARTMENT OF PATHOBIOLOGY COLLEGE OF VETERINARY MEDICINE



OFFICE	USE ONLY	'

DATE:_ ASSIGNED_

1130 Wire Road / 261 Greene Hall Auburn University Auburn, AL 36849-5519

NAME

ADDRESS

LAB USE ONLY:

SEROLOGY-VIROLOGY FAVN Rabies Antibody Test

REFERRING VETERINARIAN:

CLINIC NAME

E-mail: virology@vetmed.auburn.edu Phone: 334-844-2659

CLINIC & BILLING INFORMATION: (ALL FIELDS REQUIRED)

Contact person: Theresa Wood (Virology Lab Manager)

OWNER INFORMATION (ALL FIELDS REQUIRED)

Fax: 334-844-2652

CITY			ADDRESS			
STATE	ZIP CODE		CITY			
ANIMAL NAME			STATE	ZIP CODE		
SPECIES	BREED		LICENSE NO	STATE		
SEX			PHONE			
AGE	MONTH	YEAR	RESULTS (check all that apply)	FAY		
MICROCHIP NUMBER			EMAIL	FAX		
(ONLY tubes labeled with name & chip number will be processed)			ACCOUNTING (check all that apply)			
			EMAIL	FAX		
FAVN RABIES ANTIBODY TEST: \$65.00 DESTINATION OF ANIMAL BEING EXPORTED: DATE COLLECTED:						
DESTINATION OF AMIN	AL DEING E	DATE COLLE	CTED.			
RABIES VACCINATION HISTORY:						
SIGNATURE OF VETER			DATE:			
Signature acknowledges identity of animal and microchip number						

THE SERUM SAMPLE HAS BEEN TESTED FOR ANTIBODIES TO RABIES VIRUS BY THE OIE-FAVN TEST

RESULT LABEL	
ACCESSION #:	
RECEIVED DATE:	
MICROCHIP #:	
TITER:	

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Theresa M. Wood, Lead Medical Technologist, Virology Laboratory Auburn University, College of Veterinary Medicine 261 Greene Hall, Auburn, AL 36849-5519

A titer of 0.5 IU/ml or above indicates an acceptable rabies antibody level for the purpose of export.