Barcode	For lab use only			
	Barcode	Notes	LABORATORIES	
			IDEXX Vet·Med·Lab	
	Fill in the form completely, print it out, sign and stamp it, attach your barcode and submit it with the sample.		Vet Med Labor GmbH Division of IDEXX Laboratories Mörikestr. 28/3 D-71636 Ludwigsburg Tel. + 49 – 1802 – 838 633 Fax + 49 – 7141 – 6483 238 vetmedlab@idexx.com	
			www.idexx.com	
Reason for testi	ng		Rabies antibody testing	SK/INT
Travel to United Kingo	lom		in animals	NL
Ireland		Sweden		
Import into EU Malta Import to other European countries**			Using "fluorescent antibody virus neutralisation" (FAVN) test according to the O.I.E. "Manual of standards of diagnostic tests and vaccines"	
** Please inform yourself about the valid travelling guidelines before travelling to not Europeans countries.			Please use this form only <b>(complete in capitals or typewritten)</b> . In accordance with regulations of the importing countries only fully completed sample submission forms can be processed.	
Other Other For titer level	only		Sample material*: minimum of 1ml Serum	
Submitting veter	inary clinic		Owner	(obligatory)
Clinic address/Co	untry		Family name/First name Address/Country Signature of the owner	
Animal	For import to the required prior to	UK and the Republic of Ireland a microchip implantation is he vaccination.	Rabies vaccination	
Species			Vaccine Brand	
Name			Batch No.	
Sex	Male	Female Neutered	Date of last vaccination	MMYYYY
Date of Birth/Age			Date of sample collection and microchip reading	MMYYYYY
Breed			I hereby confirm the above details are correct.	
Microchip-No.			] [	

\*Please note: ONLY GOOD QUALITY SERUM SAMPLES (not lipaemic and not haemolytic) can be processed. No other tests can be performed on the sample. Please ensure correct identification of the sample with microchip No., animal's name and owner's name, and barcode where applicable.

Date

SK/INT-000-0708

Signature and stamp of the submitting veterinary surgeon

Tattoo No.

Date of implantation