Guide to Completing AI Incident Submission Form

Use for all avian influenza samples sent to MSU BVC & UK VDL during an avian influenza incident. Detailed information at LPAI Sampling and Shipping Guide

ONLY ONE PREMISES PER FORM

SECTION A:
Commercial premises information will be pre-filled by KY Official State Agency or KY Incident Command. Submission Forms will be distributed at time of Incident.

Backyard will be completed as identified. 2nd round of surveillance (if applicable) can be pre-filled through incident command after a PIN is established.

SECTION B:
Place the Federal Premises Identification Number (PIN) barcode label on the designated area. Only premises with a PIN will have a barcode. KY OSA or IC will provide PIN barcode label.

SECTION C:
FAD Diagnostic’s: samples that are submitted as part of the original FAD investigation or for testing directly associated with the outbreak meeting the requirements of State /Federal response.
Interstate Movement: This is testing conducted by producers/companies for the purpose of movement, not required by the State/Federal response and therefore not reimbursable.
Trace back (Epi): Epidemiologic trace back investigation
High Risk Wildlife: Wild bird testing
Surveillance: Surveillance testing reported when enhanced surveillance is underway in surveillance zones during outbreaks or in areas where the goal is to provide absence of disease.

SECTION D:
Select the appropriate type of sample being submitted and write in collection date, collector and phone number. Be sure PRINT is legible.

SECTION E:
Check the bird category

SECTION F:
Total Number of Birds Represented on Premises. Total # of Barns (Environmental Form Only)

SECTION G: Complete a line for each tube. PCR tubes, up to 5 swabs (3ml tube) or up to 11 swabs (5.5ml tube)

Unique Sample ID Sticker- REQUIRED-Place paired unique sample ID sticker on the PCR tube and place corresponding ID sticker on the line of submission form that corresponds with the tube.
Type of Sample- PCR - must list the number of swabs represented in tube.
Farm ID-Complex/Company ID for the premises
Complete -the House/Barn ID, Age, # sick, # dead and total # of birds for each PCR tube.
Continuation Page-a second page is available for additional samples from a single premises.

***The “Page 1 of ___” should be completed on Page 1 to indicate how many total pages are included.

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