

# FAVN REPORT FORM

Rabies Antibody Titer for Export Animals

**The Rabies Laboratory** Kansas State University 2005 Research Park Circle Manhattan, KS 66502 **Phone: 785-532-4483** Fax : 785-532-4474 Email: rabies@vet.ksu.edu www.vet.ksu.edu/rabies RABIES LAB USE ONLY

Results are reported on this form. Please complete on-line and printout. If handwritten, print clearly. Handwritten information is subject to interpretation by laboratory personnel. Once submitted, information cannot be altered\*. **Required fields are bolded.** 

Submitting Clinic:		Phone:	
City:	State/Country:	/Z	ipcode:
Owner Name: First	Last		
Animal Name:			
	nly the first one will be on the result labe		n/dd/yyyy):///
Species/Breed:		Sex: M 🔲 F 🛄	Age:
Vaccination history is for laboratory r	eference only. Please include up to thre or general research without compromi-	e recent vaccinations dates if avail	

Test will be cancelled if sample tube is unlabeled or arrives without the microchip number\*.

RABIES LAB USE

RABIES LAB USE ONLY	Opened by:	Processed by:	Computer Entry:	
	Transferred by:	Payment by: CC CK	Other	Courier

\* Please see instructions for FAVN submission and reporting at www.vet.ksu.edu/rabies. This submission form is a legal binding contract between KSVDL and the submitting clinic. The submitting clinic is responsible for all fees incurred and is the recipient of the FAVN report. Please see billing policy. Fees may be paid by check (payable to KDAS), credit card, money order or electronic bank transfer. A 1.5% finance charge will be accessed on all charges over 30 days.

## The Kansas State University Rabies Laboratory Checklist for Animal Export

### **Destination requirements** have been verified, such as:

- □ is microchip brand compatible with destination scanners?
- □ is timing of the vaccination(s) and sample draw date correct?
- □ is there a quarantine period before travel?
- □ is more than one FAVN test required?

#### "FAVN REPORT FORM" Instructions:

- □ Information is typed, or if handwritten, printed clearly.
- □ Microchip number is verified and correct.
- □ Animal's name and owner's last name are spelled correctly.
- Dates are correct and in format: mm/dd/yyyy.
- □ Pet owner has reviewed the completed form.
- □ Veterinarian has signed the form.
- □ If payment and "COURIER DELIVERY FORM" are included, they are attached to the "FAVN REPORT FORM"(s) in a sealed plastic bag inside the package.

#### **Specimen Requirements:**

- □ If serum separator tube was used, the serum has been transferred into a plastic leak-proof 5mL tube with no additives.
- □ Sample tube is labeled with microchip number which matches exactly the microchip number on the "FAVN REPORT FORM".
- □ Sample tube label will not detach or become illegible.
- □ Sample tube cap is sealed to prevent leakage.
- □ Sample tube is in sealed plastic bag with absorbent material and sufficient cushioning to prevent breakage.
- □ Sample tube is shipped with frozen gel packs.

### **Shipping Instructions:**

- □ International clients Check for customs regulations and include declaration. Attach a copy of the "FAVN REPORT FORM" to the outside of the package.
- □ Send sample by a courier delivery service that allows package tracking to:

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#### **Processing Time:**

□ Refer to our website at <u>www.vet.ksu.edu/rabies</u> or call our laboratory at 785-532-4483 for the current turnaround time and prices, as they are subject to change. *If you need results in less than 3 weeks, contact our laboratory <u>before</u> submitting your samples.*