



Rabies Inventory Record Division of Laboratories

Use when two or more specimens are submitted.

This form is designed to be used when two or more specimens are submitted to an IDPH laboratory for rabies testing.

INSTRUCTIONS

Submitter Information: Completely fill out the information requested by clearly and legibly entering the Submitter Name, Contact Person, Shipping Date, and phone and Fax numbers with area code. Include a Rabies Specimen Submission form for each specimen.

Specimen Information: Completely fill out the specimen information by entering the Type of Animal Submitted and, if applicable, the Submitter's Animal ID #.

DEFINITION: Submitter – Entity or facility that sends specimens to be tested (e.g., Animal Control Facility, Veterinary Clinic, Animal Hospital, etc.)

Complete the following Rabies Inventory Record and place it inside the shipping container. Once specimens are received, the form will be faxed back to you.

Submitter (Facility) _____

Contact Person _____

Shipping Date _____

Phone Number _____

FAX Number _____

Type of Animals Submitted	Submitter Animal ID#	IDPH Lab Specimen #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

Date Received by Laboratory _____ Initials _____