Please submit samples to:
SRUC Veterinary Services, Mill of Craibstone, Bucksburn, Aberdeen, AB21 9TB
Tel: 01224 711177   Fax: 01224 711184

**CLIENT'S NAME:**

**ADDRESS:**

**CPH:**

**VETERINARY PRACTICE**

**Shetland Vets**

**DATE SAMPLED**

**NO. CLOTTED BLOOD SAMPLES:**

**NO. HEPARIN BLOOD SAMPLES:**

**NO. FAECAL SAMPLES:**

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**JOHNE'S STATUS OF HERD OF ORIGIN:**

1) JOHNE'S ACCREDITED   NO OF YEARS  2) JOHNE'S TESTED   NO OF CLEAR TESTS   3) UNKNOWN

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**TUBE NO.** | **FAECAL SAMPLE** | **ANIMAL IDENTIFICATION** | **BREED** | **SEX** | **AGE** | **DATE OF CALVING**
---|---|---|---|---|---|---
1 | | | | | | |
2 | | | | | | |
3 | | | | | | |
4 | | | | | | |
5 | | | | | | |
6 | | | | | | |
7 | | | | | | |
8 | | | | | | |
9 | | | | | | |
10 | | | | | | |

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**SHETLAND ANIMAL HEALTH SCHEME (SAHS)**

**BVD/JOHNE'S – IMPORTED ANIMALS CATTLE**

**SRUC VETERINARY SERVICES ABERDEEN**

**Lab. Ref:**

**Date:**

**SRUC Veterinary Services complies with the standards set by The Data Protection Act 2018 and the GDPR**

By submitting this form you accept our Standard Terms and Conditions. These can be found at https://www.sruc.ac.uk/vets/terms