



Yard member number	er <b>H</b>	Yard name			
Submitting veterinary	practice				
Veterinary email / fax	(for results)				
Clinician					
Horse passport number	Horse name	Owner	Strep. equi ELISA	Strep. equi PCR	If retest, please provide previous reference number (e.g. E123456)
Samples submitted Strangles Scheme s respiratory disease showing such signs.	hould be from h	norses which have	e not show	n clinical :	signs of infectious
If samples are related	d to a clinical pr	oblem please pro	vide details	below	

By submitting these samples for testing you accept our Standard Terms and Conditions. These can be found at <a href="https://www.sruc.ac.uk/vets/terms">https://www.sruc.ac.uk/vets/terms</a>





## Sample submission continued

Horse passport number	Horse name	Owner	Strep. equi ELISA	Strep. equi PCR	If retest, please provide previous reference number (e.g. E123456)