



# Salmonella Enteritidis Testing: Environmental Swab Submission Form

| CUSTOMER NUMBER                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              | YOUR REFERENCE                           |           | QUOTE NUMBER                          |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------|---------------------------------------|-----------|
|                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| <b>COSTS</b>                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| NSW Food Authority will pay subsidy of 100% for 1 test of pooled samples submitted in accordance with mandatory <i>Salmonella</i> Enteritidis testing every 12-15 weeks. If you wish to get results for individual sheds you will be responsible for paying all testing fees. For more information contact Customer Service on 1800 675 623. |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| <b>SUBMITTER DETAILS</b> Results will be reported to the submitter's email address provided below                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| Submitter name:                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              | Company:                                 |           |                                       |           |
| Postal address:                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              | ABN:                                     |           |                                       |           |
| Email:                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                              | Phone:                                   |           |                                       |           |
| <b>OWNER DETAILS</b>                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| Owner name:                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                              | Phone:                                   |           |                                       |           |
| Property address:                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | PIC:                                     |           |                                       |           |
| Email:                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                              | Licence number:<br>(NSW Food Authority)  |           |                                       |           |
| <b>Case History</b>                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| Farm Details:                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                              | No of dead animals:                      |           | Sample collection date:               |           |
| Species: POULTRY                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                              | No of sick animals:                      |           |                                       |           |
| Breed:                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                              | No of animals at risk:                   |           | Reason for testing:                   |           |
| Number of sheds:                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                              | Cage: Barn: Free Range:                  |           | PCR S. Enteritidis and S. Typhimurium |           |
| Charge to WBS/Project code:                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| <b>SPECIMEN DETAILS (TYPE: Environmental Swab and QUANTITY: Number of samples)</b>                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| ENVIRONMENTAL SWABS:                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                              | DRAG SWAB                                |           | BOOT SWAB                             |           |
| <b>SUBMITTING SAMPLES</b>                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| 1. Completed swabs must be protected from direct sunlight and stored in the fridge until collect for dispatch                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| 2. Samples are sent to EMAI as soon as possible and within 24hrs after collection                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| 3. Samples are securely packaged with the correct laboratory submission paperwork                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| <b>NOTE:</b> Samples are to be sent by Australia post or courier. Postage and delivery costs are the responsibility of the farm business                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| POST                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                              | EMAI Private Bag 4008, Narellan NSW 2567 |           | COURIER                               |           |
|                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              |                                          |           | EMAI Woodbridge Rd, Menangle NSW 2568 |           |
| <b>KEY-LIST</b> If submitting >10 samples please contact Customer Service (laboratory.services@dpird.nsw.gov.au) for an electronic key-list                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| Sample No                                                                                                                                                                                                                                                                                                                                    | Sample ID                                                                                                                                                                                                                                                                                                                                                    | Sample No                                | Sample ID | Sample No                             | Sample ID |
| 1                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | 6                                        |           | 7                                     |           |
| 2                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | 7                                        |           | 8                                     |           |
| 3                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | 8                                        |           | 9                                     |           |
| 4                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | 9                                        |           | 10                                    |           |
| 5                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                              | 10                                       |           |                                       |           |
| <b>DECLARATION</b>                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| By signing below, I declare that I am authorized to request analysis on the samples listed above and I have read and agree to the <a href="#">NSW DPIRD Laboratory Services Terms and Conditions</a> that can be accessed on the website or provided to me by Customer Services.                                                             |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| Name:                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                              | Signature:                               |           | Date:                                 |           |
|                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| <b>LAB USE ONLY</b>                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |
| QA                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> AI <input type="checkbox"/> E <input type="checkbox"/> Other <input type="checkbox"/> NOTIFIABLE <input type="checkbox"/> EXOTIC <input type="checkbox"/> ACCREDITATION <input type="checkbox"/> TSE <input type="checkbox"/> RESIDUE <input type="checkbox"/> ANIMAL WELFARE |                                          |           |                                       |           |
| Total samples received:                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                              |                                          |           |                                       |           |

Use this form when submitting samples for diagnostic testing. Completed forms and associated samples can be submitted to the laboratory at Woodbridge Road, Menangle. For assistance in completing this form contact Customer Service on 1800 675 623. For current pricing refer to the [Veterinary Test List](#). Please read the [privacy statement](#) for information about how the NSW Department of Primary Industries and Regional Development manages your personal information.