 **M DoD Food Analysis & Diagnostic Laboratory**

Date/Time Received

Lab Accession Number

ATTN: Diagnostic Receiving

Public Health Command – West (PHC, W)

2899 Schofield Road, Suite 2630

JBSA Ft Sam Houston, TX 78234-7583

Primary Phone: (210) 221-3323

Alternate Phone: (210) 295-4387/4605

E-mail: [**usarmy.jbsa.phc-west.list.phc-w-rabies-favn-sa@health.mil**](mailto:usarmy.jbsa.phc-west.list.phc-w-rabies-favn-sa@health.mil)

**Submitting Veterinarian**

VTF Address: Clinic Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Name of Submitter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **FOR FADL USE ONLY** | | | FOR CLINIC USE ONLY | | |
| Blood  (Vol) | Serum  (Vol) | Lab Accession Number | Dog’s Name | Tattoo Number | Date Samples Drawn |
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**NOTE:** Blood and serum samples will be stored for future analysis and testing.