

2013 Bluetongue Proficiency Test

FAX or EMAIL Results to: 515-337-6508 carolyn.j.myers@aphis.usda.gov

Laboratory Number _____

Set Number _____

Laboratory Name and Physical Address _____

Telephone Number _____ FAX _____

Date Received _____ Test Used _____ AGID _____ ELISA _____

Manufacturer of Test Reagents _____

Test Kit Lot Number _____ Expiration Date _____

Condition of samples when received _____ Frozen _____ Thawed _____ Other _____

Number of BT tests conducted at this laboratory in 2012: AGID _____ ELISA _____

Name of Person Conducting Test (please print) _____

Signature of Person Conducting Test _____

Signature of Laboratory Director _____

Laboratory Director email address: _____

Please Record results by legibly printing 'Positive' or 'Negative' below.

Code Number	Result (Positive/Negative)	Code Number	Result (Positive/Negative)
1		11	
2		12	
3		13	
4		14	
5		15	
6		16	
7		17	
8		18	
9		19	
10		20	

Comments:

NVSL USE ONLY

Date Results Received _____ Scored _____ # Correct _____ # Incorrect _____ P/F _____