National Veterinary Services Laboratories
PO Box 844
Ames, Iowa 50010
Phone: 515-337-7514 **Fax**: 515-337-7938
FEDERAL RELAY SERVICE (Voice/TTY/ASCII/Spanish) 1-800-877-8339
The USDA is an equal opportunity provider and employer.

FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith Farms
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-044297**
Date Collected:
Date Received: 09/03/2010
Date Completed: 09/30/2010
Collected By:
Purpose: General Diagnostic
FAD Number:
Referral Number: 10-L12598
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 98-723B **Specimen Type:** Culture **Animal ID:** **Species:** Chicken, Domestic (No breed specified)

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 9/30/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Commission, Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith Farms

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10-L12598

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☒ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	98-723B	9505	enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D1, Suspect S.E.

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
9-2-10

(NVSL USE ONLY)
SEROTYPED BY:
9/27/10 PB PG

10-044297
DBL-BI
09/03/2010
3239

VS FORM 10-3
OCT 2009

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
9501		ψ+	ψ+	ψ+	ψ+	ψ+	ψ+		Acrit	24 (223) →			cerro
9502		—					+		10+	e (h)	1 (5)		muenster
9503		+		—						24 (223) →	—		cerro
9504		—	—	—	—	+	—		9+	g (m) →	—		enteritidis
9505			—			+			9+	g (m) →	—		↓
9506			—	—	—		+		10+	e (h) →	1 (6)		amatum
9507		—	—	—	—	+	—		9+	g (f) →	—		dublin
9508		—	—	—	—	+	—		9+	g (f) →	—		↓
9509			+	—	—		—		5+	i →	1 (2)		typhimurium
9510			+	—	—		—		5—	i	1 (2)		typhimurium var 5—
9511			+	+	—		—		4×7 — 5—	i →	1 (2)		↓
9512		—	—	—	—	+	—		9+ 46+	229 →	—		ruakam
9513			—	—	—		+		19+	g (s) (t) →	—		senftenberg
9514			—	—	—		+		19+	g (s) (t) →	—		↓
9515			—	—	—		+		19+	g (s) (t) →	—		↓
9516		—	—	—	—	—	—	Pool II	16+ 7-8- Acrit	210	e (n) (215)		III 16: 210: e,n,x 215
9517			—	+	—		—		7+	210 →	e (n) (215)		mbandaka
9518			—	+	—		—		7+	210 →	e (n) (215)		↓
9519			—	—	—		+		19+	g (s) (t) →	—		senftenberg
9520			+	—	—		—		5+	i →	1 (2)		typhimurium
9516a		—	—	—	—	—	—	Pool II	16+ 7—	210 →	e (n) (215)		
b		—	—	—	—	—	—	Pool II	16+ 7—	210 →	e (n) (215)		
9501a		ψ+	—	—	—	—	—			24 (223) →	—		
b		ψ+	—	—	—	—	—			24 (223) →	—		

9/29/10 TP

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Commission, Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☐ YES

6. ACCESSION/REFERRAL NUMBER
10-L16229

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle ☐ Goat ☒ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification:
Drag Swab

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

	10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A.	Salmonella	29-745F 12074	1		
B.					
C.					
D.					
E.					
F.					
G.					
H.					
I.					
J.					

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D, suspect S.E.

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
11-3-10

(NVSL USE ONLY)
SEROTYPED BY:

10 – 056023
DBL – BI
11/04/2010
3239

VS FORM 10-3
OCT 2009

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Commission, Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☐ YES

6. ACCESSION/REFERRAL NUMBER
10-L16228

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☒ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	28-734F — 12078			
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D, suspect S.E.

IP

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
11-3-10

(NVSL USE ONLY)
SEROTYPED BY:

D

10 – 056022
DBL – BI

11/04/2010
3239

VS FORM 10-3
OCT 2009

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Commission, Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☐ YES

6. ACCESSION/REFERRAL NUMBER
10-L16226

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle ☐ Goat ☒ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*) *Additional Description/Specification:*
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs Drag Swab
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	26-690F – 12097			
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D, suspect S.E.

ISP

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
11-3-10

(NVSL USE ONLY)
SEROTYPED BY:

10 – 056021
DBL – BI
11/04/2010
3239

VS FORM 10-3
OCT 2009

National Veterinary Services Laboratories
PO Box 844
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The USDA is an equal opportunity provider and employer.

FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-037374**
Date Collected:
Date Received: 07/30/2010
Date Completed: 08/13/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-10637
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 10637-91 **Specimen Type:** **Animal ID:** **Species:** Chicken, Domestic (No breed specified)

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 8/13/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)	2. NVSL SUBMITTER ID	3. HERD/FLOCK OWNER
Arkansas Livestock & Poultry Commission, Amanda Smart	301	Keith Smith
EMAIL ADDRESS: arowland@alpc.ar.gov		OWNER CITY & STATE: Hot Springs, AR
PHONE NO.: 501-907-2458	FAX NO.: 501-907-2410	
SUBMITTER ADDRESS (*Street, City, State, ZIP Code*): #1 Natural Resources Drive, Little Rock, AR 72205		PREMISES ID

4. EXAMINATIONS REQUESTED: ☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP): ☒ YES

6. ACCESSION/REFERRAL NUMBER: 10L-10637

7. PAYMENT METHOD

☒ USER FEE ACCOUNT NO.: 716018598VB

☐ CHECK/MONEY ORDER (*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number: Exp Date:

8. SPECIES OR SOURCE

☐ Cattle ☐ Goat ☒ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☐ Environment (*specify*) ☐ Other

Additional Description/Specification: Salmonella Culture from Intestine

9. CLINICAL ROLE

☒ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	10637-9 I	7841	enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS

Salmonella group D1, suspect S.E. Follow up testing for previous S.E. positive birds.

16. SUBMITTED BY (Name and Title)	17. DATE SUBMITTED
Amanda Smart, Lab Technician	7-28-2010

(NVSL USE ONLY)
SEROTYPED BY: 8/11/10 TP

10 – 037374 10
DBL – BI
07/30/2010
3239

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
7841		–	+	–	–	+	–		9+	g(m) →	—		enteritidis
7842			–			+			9+	g,(p) →	—		dublin
7843		–	–	+	+	–	–	Pools	7– Ac 5+ 8–	pools not →			not salmonella
7844		–	–	–	–	–	–	Pool II	17+	l(v) →	1,(5)		michigan
7845		–	–	–	–	–	–	Pool II	17+	l(v) →	1,(3)		↓
7846			+	–	–		–			d	1,(7)		schwarzengrund
7847			+	+	–		–		4+7–	(f),g,(s) →	—		agona
7848			–			+			9+	g,(p) →	—		dublin
7849		+		–						24,(223) →	—		cerro
7850			+		–					(f),g 15–9 [illegible]	—		derby
7851			+		–				5–	i →	1,(2)		typhimurium var 5–
7852			+	–	~~+~~ 8/5 TP		–			r →	1,(2)		heidelberg
7853			~~+~~ TP 8/5	–	+		–		8+20+	i	26		Kentucky
7854			+	–	–					(f),g,(s) →	—		agona
7855			+	–	–		–			(f),g,(s) →	—		↓
7856			+	–	–		~~+~~ 8/5 TP			r →	1,(2)		heidelberg
7857			–	–	–		+		15+	E Z10 →	1,(5)		lexington var 15+
7858			–	–	–		+		19+	g,(f) →	—		senftenberg
7859			–			+			9+	g,(m) →			enteritidis
7860		–	–	–	–	+	–		9+46+	E– Z29 →	229		ouakam
7845a		–	–	–	–	–	–	Pool II	17+	l(v)	1,(5)		
b		–	–	–	–	–	–	Pool II	17+	l(v)			

8/12/10 TP

National Veterinary Services Laboratories
PO Box 844
Ames, Iowa 50010
Phone: 515-337-7514 **Fax**: 515-337-7938
FEDERAL RELAY SERVICE (Voice/TTY/ASCII/Spanish) 1-800-877-8339
The USDA is an equal opportunity provider and employer.

FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-030918**
Date Collected:
Date Received: 06/30/2010
Date Completed: 07/08/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-8750
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 8750-6 PO **Specimen Type:** Culture **Animal ID:** **Species:** Chicken, Domestic (No breed specified)

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 7/8/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Comm., Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-8750

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE
☐ Cattle ☐ Goat ☒ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☐ Environment (*specify*) ☐ Other

Additional Description/Specification:
Salmonella Isolate from Pooled Organs

9. CLINICAL ROLE
☒ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	8750-6 PO	O350	Enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.			TM	

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D1, Suspect S.E. Sample from pooled organs of environmental S.E. positive flock 10L-7675.

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
6/29/2010

(NVSL USE ONLY)
SEROTYPED BY: MK 7/7/10 DB

NVSL ACCESSION NO.
10-030918
DBL-BI
06/30/2010
3239

MK 7/8/10

SALMONELLA ORKSHEET

Document Number: **BTYPFN 1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
6341			+	–	–		–		5+	i →	i	48:1	4,5,12:i:–
6342		–	–	–	–	+	–		9+	g(p) →	–		Dublin
6343			–	–	+		–		6+8+	e(h)	1,(2)		Newport
6344			+	–	–		–		5–	i →	i	48:1	4,12:i:–
6345		–	–	–	–	–	+	ACR–	ESF– DOOL+ E	Z29 →	–		Cubana
6346			+	–	–		–		5+	i →	1,(2)		Typhimurium
6347				+	–				7+	g(m)(s) →	–		Montevideo
6348		–	–	–	+ NS	–	–		8– III+ (40)+	b	e(n)(x)		Johannesburg
6349			–		+				8+(20)+	i	Z6		Kentucky
6350		–	–	–	–	+	–		9+	g(m) →	–		Enteritidis
6351		+	–	–	–	–	–		–	Z4(Z23) →	–		Cerro
6352 RUSH				+	–				7+	g(m)(s) →	–		Montevideo
6353			–		+				8+(20)+	i →	Z6		Kentucky
6354			+	–	–		–		5–	f(g)(s) →	–		Agona
6355		–	–	–	–	–	–		– PV–	–	–	Mot: OXI+	Not Salmonella
6356			–			+			9+	g(m) →	–		Enteritidis
6357			–			+			9+	g(m) →	–		↓
6358			–			+			9+	g(m) →	–		↓
6359			–			+			9+	g(m) →	–		↓
6360			–			+			9+	g(p) →	–		Dublin
6345	A	–	–	–	–	–	–		I+ 13(23)+	Z29 →	–		Cubana
	B	–	–	–	–	–	–		I+ 13,(23)+	Z29 →	–		↓

National Veterinary Services Laboratories
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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-029495**
Date Collected:
Date Received: 06/22/2010
Date Completed: 07/07/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-8750
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 8750-2 PO **Specimen Type:** **Animal ID:** **Species:** Chicken, Domestic (No breed specified)	
Salmonella Serotyping	Enteritidis
Sample: 8750-17 PO **Specimen Type:** **Animal ID:** **Species:** Chicken, Domestic (No breed specified)	
Salmonella Serotyping	Enteritidis
Sample: 8750-24 PO **Specimen Type:** **Animal ID:** **Species:** Chicken, Domestic (No breed specified)	
Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 7/7/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock & Poultry Comm., Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-8750

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE
☐ Cattle ☐ Goat ☒ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☐ Environment (*specify*) ☐ Other

Additional Description/Specification:
Salmonella Isolate from Pooled Organs

9. CLINICAL ROLE
☒ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	8750-2 PO (01560)		Enteritidis	
B. Salmonella	8750-17 PO (01567)		↓	
C. Salmonella	8750-24 PO (01568)		↓	
D.				
E.				
F.				
G.				
H.				
I.				
J.			TM	

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D1, Suspect S.E. Samples from pooled organs of environmental suspect S.E. positive flock. Pending environmental samples sent in 6/2/10 and 6/15/10 (10L-7675 and 10L-8169) for serotyping.

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
6/21/2010

NVSL ACCESSION NO
10 – 029495
DBL – BI
06/22/2010
8239

(NVSL USE ONLY)
SEROTYPED BY:
RB 7-2-10

VS FORM 10-3
OCT 2009

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
6141		+	−	−	−	−	−	Pool Is F. −		Z4(22:3) → −			Cerro
6142			+		−				5−	i → 1,(2)			Typhimurium var 5−
6143			−			+			9+ mot→−	Pools − mot→ b:0→ g,(p)	48→− NEW→−		Dublin
6144			−			+			9+ mot→	g,(p) → −			Dublin
6145				+	−				7+	r → 1,(5)			Infantis
6146			+		−				5+	i → 1,(2)			Typhimurium
6147			+		−					f,(g),(s) → −			Agona
6148			+		−				5+	1st→ i	1,(2)		Typhimurium
6149			+		−				5+	i	1,(2)		↓
6150			+		−				4+ 10-15'	1,(v) → 1,(7)			Bredeney
6151				+	−				7+ mot→−	1st − Pools −	48→− TSI = K/A+ NEW→ A-T−		6,7: Non-motile Chlorochus Arizonae
6152			+		−					f,(g),(s) → −			Agona
6153				+	−				7+	r ← 1,(5)			Infantis
6154			−			+			9+ mot→−	Pools −	48→− NEW→−		9,12: Non-motile
6155			−				+	Arint	mot→ [y] l,v w+	Z28 w+	1,(v) → 1,(v) NEW→ 1,(7)		Give
6156		−	−	−	−	+	−			g,(m) → −			Enteritidis
6157		−	−	−	−	+	−			g,(m) → −			↓
6158		−	−	−	−	+	−			g,(m) → −			
6159		−	−	−	+	−	−		8+ 6+	B − g,(e),(h)	H → 1,(2)		Newport
6160		−	−	−	−	−	−		50+ mot→	Pools − D w+ = Z	V− → −	new→ D=r 48→ D=r	III 50:r:Z
6155 (a) (Shimey) only got today		−	−	−	−	−	+		10+	D 1,(v) → 1,(7)			

7-7-10

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-028378**
Date Collected:
Date Received: 06/16/2010
Date Completed: 06/29/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-8169
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 8169N **Specimen Type:** **Animal ID:** **Species:** Chicken, Domestic (No breed specified)

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 6/29/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock and Poultry Comm., Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith

EMAIL ADDRESS
arowland@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-8169

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☒ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	8169N 58109		enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D1, Suspect S.E.

TM

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
6/15/2010

NVSL ACCESSION NO
10 – 028378
DBL – BI

(NVSL USE ONLY)
SEROTYPED BY: 6/23/10 TP

VS FORM 10-3
OCT 2009

06/16/2010
3239

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
5861			+	−	−		−		5−	Auto Agglut auto			tf 6/28 ~~Cano~~ cerro
5862			wk	−	−		−		5−	Auto Agglut auto	—	2nd 48 → −	
5863			wk	−	−		−		5−	Auto Agglut auto	Auto Agglut		
5864			wk	−	−		−		5−	Auto agglut auto	Auto Agglut		cerro
5865		+	−	−	−	−	−			24,(23) →	—		cerro
5866			+	−	−		−		5+	i →	1,(2)		Typhimurium
5867			+	−	−		−		5−	i →	1,(2)		Typhimurium var 5−
5868			+		−				5+	i →	1,(2)		typhimurium
5869		-	−	−	−	+	−		9+	3,(10) →	—		enteritidis
5870			−				+		10+	e,(1) →	1,(5)		muenster
5871			−			+			9+	g,(9) →	—		dublin
5872													Rough Broken In-Transit tf 6/27
5873			+		−					r →	1,(2)		Heidelberg
5874				wk	−				7+	g(m)(s) →	—		TF 6/27 ~~enteritidis~~ montevideo
5875			−		+				8+ 20w+	24,(24) →	—		albany
5876			−			+			9+	3(m) →	—		enteritidis
5877			+		−				5−	i →	1,(2)		Typhimurium var 5−
5878			−		+				8+ 20+	i	2,8		kentucky
5879			+		−				5+	i →	1,(2)		Typhimurium
5880			−		+				8+ 6− 20− Stationary 6−	E-21	E (6) x		istanbul
5880a			−	−	+		−		Stationary 6− 8+ 20−	21 →	(6)(7)		
b			−	−	+		−		6− 8+ 20− Stationary 6−	21 →	e(6)(8)		
~~5881~~													
~~5882~~													

~~5883a~~
~~5884~~

6/30/10 TF

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith Company
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-026424**
Date Collected:
Date Received: 06/03/2010
Date Completed: 06/22/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-7675
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 75-693B **Specimen Type:** Drag Swab **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 6/22/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
AR Livestock and Poultry Commission Amanda Smart

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith Company

EMAIL ADDRESS
amrowla@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2458

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-7675

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☐ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	75-693B 5414		enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.			TM	

15. COMMENTS/SPECIAL INSTRUCTIONS
Salmonella Group D1, Suspect S.E.

16. SUBMITTED BY (Name and Title)
Amanda Smart, Lab Technician

17. DATE SUBMITTED
6/2/10

(NVSL USE ONLY)
SEROTYPED BY: 6/16/10 TS GW

10 – 026424
DBL – BI
06/03/2010
3289

VS FORM 10-3
OCT 2009

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
5401		—	—	—	wt	—	—	Pool #	40+	B - Bs - not →	B - Bs -	2nd → Pools - 48 → Pools -	not salmonella
5402			+		—				5+		1, 2		typhimurium
5403		—	+	—	—	—	—	Pools	Acrit	B - e, h →			contaminated
5404			+	—	—		—		5+	1 →	1, 2		typhimurium
5405			+		—				5+	1 →	1, 2		↓
5406			+		—				5+	1 →	1, 2		↓
5407			—				+		10+	l, 2, 3	1, 5		uganda
5408			+	—	—		—		5+	1 →	1	2nd → B - 48 → B -	4, 5, 12 : 1 : —
5409		—	—	—	—	+	—		9+	g, p →	—		dublin
5410			—	—	+		—		6+8+	e, h →	1, 2		newport
5411			+	—	—		—		5+	1	1, 2		typhimurium
5412			+	—	—		—			r →	1, 2		heidelberg
5413			—	—	+		—		6+8+	l, v →	1, 2		litchfield
5414			—			+			9+	g, m →	—		enteritidis
5415			—			+			9+	g, m →	—		↓
5416			—			+			9+	g, m →	—		↓
5417			—			+			9+	g, m →	—		↓
5418			—			+			9+	g, m →	—		↓
5419			+	—	—		—		5+	1 →	1	2nd → B - 48 → B -	4, 5, 12 : 1 : —
5420				+	—				7+	g, ms →	c g, ms		Montevideo PB 6-10-10
5403a		—	—	—	—	—	—	Pools	Acrit	Pools - not →	Pools -		
b		—	—	—	—	—	—	Pools	Acrit	Pools - not →	Pools -		

6/17/10 TP

National Veterinary Services Laboratories
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Phone: 515-337-7514 **Fax**: 515-337-7938
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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith Company, LLC
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-012098**
Date Collected:
Date Received: 03/16/2010
Date Completed: 04/05/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-3041
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 3041-608F **Specimen Type:** Drag Swab **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Contaminated
Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 4/5/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock & Poultry Commission

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith Company LLC

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-3041

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☐ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

	10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A.	Salmonella	3041-608F MK 3/30/10 2438	2440	(1) Contaminated	
B.				(2.) Enteritidis	
C.					
D.					
E.					
F.					
G.					
H.					
I.				Tm	
J.					

15. COMMENTS/SPECIAL INSTRUCTIONS
Sample submitted on TSA slant.

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
3-15-2010

(NVSL USE ONLY)
SEROTYPED BY: MK 3/30/10

10 – 012098
DBL – BI
03/16/2010
3239

VS FORM 10-3
OCT 2009

MK 3/30/10

*MK apologizes for all of the crossouts. She lost her head apparently!

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
2421			+			—			5−	i →	1,(2)		Typhimurium var 5−
2422	FSIS		—			+			9+	g(P) →	—		Dublin 3-16-10
2423			+	—	—		—		(5)+	i →	1,(2)		Typhimurium
2424			~~+~~ MK	+	—		—		~~5~~ MK + (7)+	r →	1,(5)		Infantis
2425			+	~~+~~ MK	—		—		~~7~~ MK + 5−	g MK r →	1,(2)		Heidelberg
2426			+	—	—		—		5−	g MK r →	1,(2)		↓
2427	[illegible]	+	~~+~~ MK	—	—	—	—		~~5~~ MK	74 (7,23) →	—		Cerro
2428		~~+~~ MK	+	—	—	—	—		(5)+	i →	1,(2)		Typhimurium
2429			~~+~~ MK	+	—		—		(7)+	r →	1,(5)		Infantis
2430		—	—	~~+~~ MK	—	+	—		(9)+	g(m) →	—		Enteritidis
2431 RUSH.	FSIS			+	—				(7)+	g(m)(S) →	—		Montevideo
2432		—	—	—					POOL 1 13,(23)	Z	← L(W)		Worthington
2433			—		+				(8)+ (20)+	i	← Z6		Kentucky
2434			—			+			(9)+	g(m) →	—		Enteritidis
2435	FSIS		—			+			(9)+	g(m) →	—		Enteritidis
2436			+			—			(5)+	i →	1,(2)		Typhimurium
2437	Rechand	—	—	—	—	—	—	ACR−	POOL− HP−	—	—	Mot PV+ At	No-1 Salmonella
2438			—				+		(19)+	g(t) →	—		Senftenberg
2439			—	+	—		—		(7)+	Z10 →	e(n)(Z15)		Mbandaka
2440 ODORUS		—	—	—	—	+	—		(9)+	g(m) →	—		① Contaminated
2437a													② Enteritidis
b													

MK 3/1

MK 3/22

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

Biochem	glu	lac	suc	sal	dul	TSI/ H_2S	ind	MR	VP	cit	urea	tart	mot	lys/ H_2S	NaMal	KCN	ONPG	malt	orn	ara	tre	oxi	Rs
2437	+	+	–	–	+	K/A	–	+	X		–		+/–	K/K	–		–						
2437	+	–	–	–	+	K/A			X	–	–	–	+/–	K/A	–		–	+	+				–
2440											+			–									
2427		–			+							+			–		–						

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The USDA is an equal opportunity provider and employer.

FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith, Cobb Vantress
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-007953**
Date Collected:
Date Received: 02/19/2010
Date Completed: 03/26/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-01211
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 1211-651B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Contaminated

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/26/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock and Poultry Commission, Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith (Cobb Vantress)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-01211

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE
☐ Cattle ☐ Goat ☐ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification:
Drag Swabs

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	1211-651B 1600		Contaminated	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.			TM	
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
2-18-2010

(NVSL USE ONLY)
SEROTYPED BY: MK 3/17/10

JF
FEB 19 2010

10 – 007953
DBL – BI
02/19/2010
3239

VS FORM 10-3
OCT 2009

MK 3/17/10

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
1581		–	–	–	–	+	–		9+	L,Z28	L,5		Javiana
1582		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1583		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1584		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1585		–	–	–		+	–		9+	L,Z28	1,5		↓
1586		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1587		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1588		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1589		–	–	–	–	+	–		9+	L,Z28	1,5		↓
1590		–	–	–	–	+	–		9+ orig: gm	gm →	~~B,E~~ MR —		Enteritidis
1591		–	–	–	–	+	–		9+	gm →	C gm	gm: C gm	↓
1592		–	–	–	–	+	–		9+	gm →	E → Z6	gm: E Z6	2. Enteritidis Multiple Serotypes
1593		–	–	–	–	+	–		9+	gm →	D+ r, 1,(2)	gm: r D+ 1,(2)	↓
1594		–	–	–	–	+	–		9+	gm →	—		Enteritidis
1595 P		–	+	–	–	–	–		9+	gm →	B,E 1,Z6	gm: B 1,Z6	Multiple Serotypes
1596		–	–	–	–	+	–		9+	gm →	D r	gm D a	↓
1597		–	–	–	–	+	–		9+	gm →	C gm	gm: C gm	Enteritidis
1598		–	–	–	–	+	–		9+	gm →	E Z6	gm: E Z6	Multiple Serotypes
1599		–	–	–	+	–	–	8+ 20+	8+ 20+ HP+	1	← Z6	Mat: E	Kentucky
1600		–	–	–	–	+	–		9+	gm →	HP-		Contaminated
595	A								C	gm →			
	B								E		← Z6		

Biochem	glu	lac	suc	sal	dul	TSI/ H_2S	ind	MR	VP	cit	urea	tart	mot	lys/ H_2S	NaMal	KCN	ONPG	malt	orn	ara	tre	oxi
1600						K/K⁻					+			+			+					
Control	⊕	−	−	−	⊕	K/A⁺	−	+			−	+	+	+	−		−					

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith, Cobb Vantress
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-007950**
Date Collected:
Date Received: 02/19/2010
Date Completed: 03/26/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-01210
Country Origin/Destination: /

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 1210-604B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Multiple Serotypes

Sample: 1210-604F **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Kentucky

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/26/2010

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OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock and Poultry Commission, Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith (Cobb Vantress)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-01210

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle ☐ Goat ☐ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification:
Drag Swabs

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	1210-604B 1598		Multiple Serotypes	
B. Salmonella	1210-604F 1599		Kentucky	
C.				
D.				
E.				
F.				
G.				
H.				
I.			TM	
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
2-18-2010

(NVSL USE ONLY)
SEROTYPED BY: MK 3/16/10

JF
FEB 19 2010

10-007950
DBL-BI
02/19/2010
3239

VS FORM 10-3
OCT 2009

MK 3/17/10

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
1581		–	–	–	–	+	–		9+	L,Z28	L,5		Javiana
1582		–	–	–	–	+	–		9+	L,Z28	1,5		
1583		–	–	–	–	+	–		9+	L,Z28	1,5		
1584		–	–	–	–	+	–		9+	L,Z28	1,5		
1585		–	–	–		+	–		9+	L,Z28	1,5		
1586		–	–	–	–	+	–		9+	L,Z28	1,5		
1587		–	–	–	–	+	–		9+	L,Z28	1,5		
1588		–	–	–	–	+	–		9+	L,Z28	1,5		
1589		–	–	–	–	+	–		9+	L,Z28	1,5		
1590		–	–	–	–	+	–		9+ orig: gm	gm →	~~B,E~~ —		Enteritidis
1591		–	–	–	–	+	–		9+	gm →	C gm	gm: C gm	
1592		–	–	–	–	+	–		9+	gm →	E Z6	gm: E Z6	2. Enteritidis Multiple Serotypes
1593		–	–	–	–	+	–		9+	gm →	D+ r,1,2	gm: r D+ 1,2	
1594		–	–	–	–	+	–		9+	gm →	—		Enteritidis
1595 P		–	+	–	–	–	–		4+	gm →	B,E i,Z6	gm: B i,E Z6	Multiple Serotypes
1596		–	–	–	–	+	–		9+	gm →	D r	gm D d	
1597		–	–	–	–	+	–		9+	gm →	C gm	gm: C gm	Enteritidis
1598		–	–	–	–	+	–		9+	gm →	E Z6	gm: E Z6	Multiple Serotypes
1599		–	–	–	+	–	–	8+ 20+	8+ 20+ HP-	i	← Z6	Mat: E	Kentucky
1600		–	–	–	–	+	–		9+	gm →	HP-		Contaminated
595	A								C	gm →			
	B								E		← Z6		

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

MK 4/12/10 - plated for suspect Enteritidis. Were multiple serotypes!

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
~~19821~~ 1592	A	–	–	–	–	+	–		9+ C	gm →	–		Enteritidis
~~19822~~	B	–	–	–	–	+	–		9+ C	gm →	–		↓
~~19823~~													
~~19824~~ 1593	A	–	–	–	–	+	–		9+ C	gm	–		
~~19825~~	B	–	–	–	–	+	–		9+ C	gm	–		
~~19826~~													
~~19827~~ 1595	A		–	–	+		–		8+ 26+ B	i →	E Z6		Kentucky
~~19828~~	B	–	–	–	–	+	–		9+ C	gm →	D 1-		
~~19829~~													–
~~19830~~ 1596	A	–	–	–	–	+	–		9+ C	gm →	–		Enteritidis
~~19831~~	B	–	–	–	–	+	–		9+ C	gm →	–		↓
~~19832~~													
~~19833~~ 1598	A	–	–	–	–	+	–		9+ C	gm →	–		
~~19834~~	B	–	–	–	–	+	–		9+ C	gm →	–		
~~19835~~													
~~19836~~													
~~19837~~													
~~19838~~													
~~19839~~													
~~9840~~													

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith, Cobb Vantress
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-007949**
Date Collected:
Date Received: 02/19/2010
Date Completed: 03/26/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-01209
Country Origin/Destination: /

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 1209-608F **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/26/2010

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OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock and Poultry Commission, Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith (Cobb Vantress)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-01209

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☐ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swabs
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	1209-608F 1597		Enteritidis	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.			TM	
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
2-18-2010

(NVSL USE ONLY)
SEROTYPED BY: MK 3/16/10

FEB 19 2010

10 – 007949
DBL – BI
02/19/2010
3239

VS FORM 10-3
OCT 2009

MK 3/17/10

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
1581		–	–	–	–	+	–		9+	L,(Z8)	1,6		Javiana
1582		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1583		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1584		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1585		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1586		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1587		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1588		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1589		–	–	–	–	+	–		9+	L,(Z8)	1,6		↓
1590		–	–	–	–	+	–		9+ dig: gm	gm → ~~g,m~~			Enteritidis
1591		–	–	–	–	+	–		9+	gm → C gm	gm: C gm		↓
1592		–	–	–	–	+	–		9+	gm → E Z6	gm: E Z6		Multiple Serotypes
1593		–	–	–	–	+	–		9+	gm → H 1,(2)	gm H 1,2		↓
1594		–	–	–	–	+	–		9+	gm → —			Enteritidis
1595		–	+	–	–	–	–		9+	gm → B,E 1,Z6	gm B,E 1,Z6		Multiple Serotypes
1596		–	–	–	–	+	–		9+	gm → D 1,–	gm D 1,–		↓
597		–	–	–	–	+	–		9+	gm → C gm	gm: C gm		Enteritidis
598		–	–	–	–	+	–		9+	gm → E Z6	gm: E Z6		Multiple Serotypes
599		–	–	–	+	–	–	(8+)(20+)	8+ 20+/– H–	1 ← Z6	Ma: E		Kentucky
600		–	–	–	–	+	–		9+/–	gm → H–			Contaminated
595	A								C	gm →			
	B								E	← Z6			

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith, Cobb Vantress
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-007947**
Date Collected:
Date Received: 02/19/2010
Date Completed: 03/26/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10L-01208
Country Origin/Destination: /

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 1208-615B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental	
Salmonella Serotyping	Multiple Serotypes
Sample: 1208-615F **Specimen Type:** Culture **Animal ID:** **Species:** Environmental	
Salmonella Serotyping	Enteritidis
Sample: 1208-622B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental	
Salmonella Serotyping	Multiple Serotypes
Sample: 1208-623B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental	
Salmonella Serotyping	Multiple Serotypes

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/26/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock and Poultry Commission, Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith (Cobb Vantress)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10L-01208

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE
☐ Cattle ☐ Goat ☐ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification:
Drag Swabs

9. CLINICAL ROLE
☐ Infection ☒ Monitor/Environmental ☐ Research ☐ Other (specify)

	10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A.	Salmonella	1208-615B 1593		Multiple Serotypes	
B.	Salmonella	1208-615F 1594		Enteritidis	
C.	Salmonella	1208-622B 1595		Multiple Serotypes	
D.	Salmonella	1208-623B 1596		↓	
E.					
F.					
G.					
H.				TM	
I.					
J.					

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
2-18-2010

(NVSL USE ONLY)
SEROTYPED BY: MK 3/16/10

FEB 19 2010

10 – 007947
DBL – BI
02/19/2010
3239

VS FORM 10-3
OCT 2009

MK 3/17/10

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
1581		–	–	–	–	+	–		9+	L,Z28	L,5		Javiana
1582		–	–	–	–	+	–		9+	L,Z28	1,5		
1583		–	–	–	–	+	–		9+	L,Z28	1,5		
1584		–	–	–	–	+	–		9+	L,Z28	1,5		
1585		–	–	–		+	–		9+	L,Z28	1,5		
1586		–	–	–	–	+	–		9+	L,Z28	1,5		
1587		–	–	–	–	+	–		9+	L,Z28	1,5		
1588		–	–	–	–	+	–		9+	L,Z28	1,5		
1589		–	–	–	–	+	–		9+	L,Z28	1,5		
1590		–	–	–	–	+	–		9+ orig: gm	gm →	~~B,E~~ MK —		Enteritidis
1591		–	–		–	+	–		9+	gm →	C gm	gm: C gm	
1592		–	–	–	–	+	–		9+	gm →	E Z6	gm E Z6	2. Enteritidis Multiple Serotypes
1593		–	–	–	–	+	–		9+	gm →	D+ r,1,2	gm: r D+ 1,2	
1594		–	–	–	–	+	–		9+	gm →	—		Enteritidis
1595 P		–	+	–	–	–	–		4+	gm →	B,E i,Z6	gm B i, E Z6	Multiple Serotypes
1596		–	–	–	–	+	–		9+	gm →	D r	gm D a	
1597		–	–	–	–	+	–		9+	gm →	C gm	gm: C gm	Enteritidis
1598		–	–	–	–	+	–		9+	gm →	E Z6	gm: E Z6	Multiple Serotypes
1599		–	–	–	+	–	–	8+20+	8+ 20+/– HP–	i	← Z6	Ma: E	Kentucky
1600		–	–	–	–	+	–		9+/–	gm →	HP–		Contaminated
595	A								C	gm →			
	B								E		← Z6		

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

MK 4/12/10 - plated for suspect Enteritidis. Were multiple serotypes!

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
~~19821~~ 1592	A	—	—	—	—	+	—		9+ C	gm →	—		Enteritidis
~~19822~~	B	—	—	—	—	+	—		9+ C	gm →	—		↓
~~19823~~													
~~19824~~ 1593	A	—	—	—	—	+	—		9+ C	gm	—		
~~19825~~	B	—	—	—	—	+	—		9+ C	gm	—		↓
~~19826~~													
~~19827~~ 1595	A		—	—	+		—		8+ 26+ B	i →	E Z6		Kentucky
~~19828~~	B	—	—	—	—	+	—		9+ C	gm →	D K		
~~19829~~													
~~19830~~ 1596	A	—	—	—	—	+	—		9+ C	gm →	—		Enteritidis
~~19831~~	B	—	—	—	—	+	—		9+ C	gm →	—		↓
~~19832~~													
~~19833~~ 1598	A	—	—	—	—	+	—		9+ C	gm →	—		
~~19834~~	B	—	—	—	—	+	—		9+ C	gm →	—		↓
~~19835~~													
~~19836~~													
~~19837~~													
~~19838~~													
~~19839~~													
~~19840~~													

National Veterinary Services Laboratories
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Ames, Iowa 50010
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The USDA is an equal opportunity provider and employer.

FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith (Cobb Vantress)
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-002807**
Date Collected:
Date Received: 01/20/2010
Date Completed: 03/04/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10-L-179
Country Origin/Destination: /

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 179-604B **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/4/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
Arkansas Livestock & Poultry Comm. Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
Keith Smith (Cobb Vantress)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
Hot Springs, AR

PHONE NO.
501-907-2436

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
10-L-179

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
716018598VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle ☐ Goat ☐ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification:
Drag Swab

9. CLINICAL ROLE
☐ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A. Salmonella	179-604B 380		Enteritidis TP	
B.				
C.				
D.				
E.				
F.				
G.				
H.				
I.				
J.				

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED
1-19-2010

(NVSL USE ONLY)
SEROTYPED BY:
PB 3-2-10

EN JAN 20 2010

ACCESSION NO
10 – 002807
DBL – BI
01/20/2010
3239

VS FORM 10-3
OCT 2009

MK 2/18/10

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
361		–	+	–	–	–	–		4+ 5-	i →	1,(2)		Typhimurium var 5-
362		–	–	–	–	–	+		19+	(gst) →	—		Senftenberg
363		–	–	+	–	–	–		7+	(mt) →	—		Oranienburg
364		–	–	–	–	+	–		9+	(gp) →	—		Dublin
365		–	–	+	–	–	–		7+	(fg) →	—		Rissen
366		–	+	–	–	–	–		4+	r →	1,(2)		Heidelberg
367		–	–	–	+	–	–		8+ 20+ *(6)+(8)+	Z10	← (n)(x)		Hadar
368		–	+	–	–	–	–		4+	r →	1,(2)		Heidelberg
369		–	+	–	–	–	–		4+ 5-	i →	1,(2)		Typhimurium var 5+
370		–	–	+	–	–	–		7+	(gms) →	—		Montevideo
371		–	+	–	–	–	–		4+ 5-	(fg) →	—		Derby
372		–	–	+	–	–	–		7+	r →	1,(5)		Infantis
373		–	–	+	–	–	–		7+ HP+	—	—	Mot: – N: –	6,7: non-motile
374		–	+	–	–	–	–		4+	r →	1,(2)		Heidelberg
375		–	+	–	–	–	–	ACR –	4+ (4)+ FSF+	L(v) →	1,(7)		Bredeney
376		+	–	–	–	–	–			Z4(Z23) →	—		Cerro
377		–	–	–	–	+	–		9+	(gm) →	—		Enteritidis
378		–	–	–	–	–	+		10+	(eh)	← 1,(6)		Anatum
379 Rush 1		–	–	–	–	+	–		9+	(gm) →	–		Enteritidis
380 +		–	–	–	–	+	–		9+	(gm) →	–		↓

*MK 2/17/10

National Veterinary Services Laboratories
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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith (Cobb Vantress)
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **10-002806**
Date Collected:
Date Received: 01/20/2010
Date Completed: 03/04/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 10-L-178
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 178-606F **Specimen Type:** Culture **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 337-7565

Date Generated: 3/4/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)	2. NVSL SUBMITTER ID	3. HERD/FLOCK OWNER
Arkansas Livestock & Poultry Comm. Dr. Erdal Erol	301	Keith Smith (Cobb Vantress)

EMAIL ADDRESS: eerol@alpc.ar.gov

OWNER CITY & STATE: Hot Springs, AR

PHONE NO.: 501-907-2436 FAX NO.: 501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 Natural Resources Drive
Little Rock, AR 72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER: 10-L-178

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.: 716018598VB
☐ CHECK/MONEY ORDER (*Enclosed, payable to USDA in US dollars*)
☐ CREDIT CARD Number Exp Date:

8. SPECIES OR SOURCE
☐ Cattle ☐ Goat ☐ Chicken ☐ Zoo (*specify*) ☐ Food (*specify*)
☐ Swine ☐ Horse ☐ Turkey ☐ Wildlife (*specify*) ☐ Feedstuffs
☐ Sheep ☐ Reptile (*specify*) ☐ Other bird (*specify*) ☒ Environment (*specify*) ☐ Other

Additional Description/Specification: Drag Swab

9. CLINICAL ROLE
☐ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

	10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A.	Salmonella	178-606F 379		Enteritidis	TP
B.					
C.					
D.					
E.					
F.					
G.					
H.					
I.					
J.					

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title): Dr. Erdal Erol, Veterinary Microbiologist

17. DATE SUBMITTED: 1-19-2010

NVSL ACCESSION NO: 10-002806

(NVSL USE ONLY)
SEROTYPED BY: DB 3-2-10

EN JAN 20 2010

DBL – BI
01/20/2010
3239

VS FORM 10-3
OCT 2009

MK 2/18/10

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
361		-	+	-	-	-	-		4+ 5-	i →	1,(2)		Typhimurium var 5-
362		-	-	-	-	-	+		19+	(z6) →	—		Senftenberg
363		-	-	+	-	-	-		7+	(m t) →	—		Oranienburg
364		-	-	-	-	+	-		9+	g (p) →	—		Dublin
365		-	-	+	-	-	-		7+	(f g) →	—		Rissen
366		-	+	-	-	-	-		4+	r →	1,(2)		Heidelberg
367		-	-	-	+	-	-		8+ 20+ (6) (8)	z10 ← (e n x)			Hadar
368		-	+	-	-	-	-		4+	r →	1,(2)		Heidelberg
369		-	+	-	-	-	-		4+ 5-	i →	1,(2)		Typhimurium var 5-
370		-	-	+	-	-	-		7+	g (m) (s) →	—		Montevideo
371		-	+	-	-	-	-		4+ 5-	(f g) →	—		Derby
372		-	-	+	-	-	-		7+	r →	1,(5)		Infantis
373		-	-	+	-	-	-		7+ H-	—	—	Mot: — N: —	1,7: non-motile
374		-	+	-	-	-	-		4+	r →	1,(2)		Heidelberg
375		-	+	-	-	-	-	ACR-	4+ (4) + FSF-	l,(v) →	1,(7)		Bredeney
376		+	-	-	-	-	-			z4 (z23) →	—		Cerro
377		-	-	-	-	+	-		9+	g (m) →	—		Enteritidis
378		-	-	-	-	-	+		10+	e (h) ← 1,(6)			Anatum
379 (Rush)		-	-	-	-	+	-		9+	g (m) →	—		Enteritidis
380 +		-	-	-	-	+	-		9+	g (m) →	—		↓

Page 2 of 3

*MK 2/17/10

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FINAL REPORT

Laboratory Test Report

****** This is a confidential report intended for official use only. ******

Owner
Keith Smith (Cobb Vantress)
Hot Springs, AR

Animal Location

Submitter - 3239
AR Livestock & Poultry Commission
Veterinary Diagnostic Lab
#1 Natural Resources Dr.
Little Rock, AR 72205
FAX# 501-907-2410
PH# 501-907-2430

Accession Number: **09-036086**
Date Collected:
Date Received: 12/29/2009
Date Completed: 02/17/2010
Collected By:
Purpose: General Diagnostic
Referral Number: 09-L-18802
Country Origin/Destination:

This is not a billable case.

NOTE: Condition of the sample(s) was adequate unless otherwise noted.

Sample: 18802-604 Belt **Specimen Type:** Drag Swab **Animal ID:** **Species:** Environmental

Salmonella Serotyping	Enteritidis

Results authorized by: Dr. Matthew Erdman, Head, Bacterial Identification Section, Diagnostic Bacteriology Laboratory (515) 663-7565

Date Generated: 2/17/2010

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0007. The time required to complete this information collection is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved
0579-0007
Exp.: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IA 50010

REQUEST FOR SALMONELLA SEROTYPING

1. SUBMITTER: (*Business Name and Name of Individual Contact*)
ARKANSAS LIVESTOCK AND POULTRY COMM.
Dr. Erdal Erol

2. NVSL SUBMITTER ID
301

3. HERD/FLOCK OWNER
KEITH SMITH (COBB VANTRESS)

EMAIL ADDRESS
eerol@alpc.ar.gov

OWNER CITY & STATE
HOT SPRINGS, AR

PHONE NO.
501-907-2441

FAX NO.
501-907-2410

SUBMITTER ADDRESS (*Street, City, State, ZIP Code*)
#1 NATURAL RESOURCES DRIVE
LITTLE ROCK, AR
72205

PREMISES ID

4. EXAMINATIONS REQUESTED
☒ SEROTYPING ☐ PHAGE TYPING ☐ PFGE ☐ OTHER (*Specify in Block 15*)

5. NATIONAL POULTRY IMPROVEMENT PLAN (NPIP) ☒ YES

6. ACCESSION/REFERRAL NUMBER
09-L-18802

7. PAYMENT METHOD
☒ USER FEE ACCOUNT NO.
7160185 98VB

☐ CHECK/MONEY ORDER
(*Enclosed, payable to USDA in US dollars*)

☐ CREDIT CARD Number
Exp Date:

8. SPECIES OR SOURCE

☐ Cattle	☐ Goat	☐ Chicken	☐ Zoo (*specify*)	☐ Food (*specify*)	*Additional Description/Specification:*
☐ Swine	☐ Horse	☐ Turkey	☐ Wildlife (*specify*)	☐ Feedstuffs	Drag Swab
☐ Sheep	☐ Reptile (*specify*)	☐ Other bird (*specify*)	☒ Environment (*specify*)	☐ Other	

9. CLINICAL ROLE
☐ Infection ☐ Monitor/Environmental ☐ Research ☐ Other (specify)

	10. SPECIMEN CULTURED	11. CULTURE NO.	12. O GROUP	13. SEROTYPE	14. PHAGE TYPE
A.	SALMONELLA	18802-604 BELT 19764		enteritidis	
B.					
C.					
D.					
E.					
F.					
G.					
H.					
I.					
J.					

15. COMMENTS/SPECIAL INSTRUCTIONS

16. SUBMITTED BY (Name and Title)
Dr. ERDAL EROL, Veterinary Microbiologist

17. DATE SUBMITTED
12-28-09

(NVSL USE ONLY)
SEROTYPED BY:
2/16/10 TT

NVSL ACCESSION NO
09 – 036086
DBL – BI
12/29/2009
3239

VS FORM 10-3
OCT 2009

DB DEC 29 2009

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
19761	FSIS		+		−				(1) (4+)	d →	1,(7)		Schwarzengrund
19762			+		+				4+ 6,8+ 20+ B	i →	Z10		MK ~~Kentucky~~ Rough O:i:Z10
19763		−	−	−	−	+	−		4− 9+	g(m) →	—		Enteritidis
19764		−	−	−	−	−	−			g(m) →	—		enteritidis
19765		−	−	−	−	+	−		3 TF 3/11 + 9+	g(m) →	—		enteritidis
19766			−			+			3 TF 3/11 + 9+	g(m) →	—		↓
19767			+		−				4+	(7)g 3-7+9+ →	—		derby
19768			−		+				1+2+	i	2b		Kentucky
19769			−		+				3+10+	i →	2b		↓
19770			−			+			(9+)	g(m) →	—		Enteritidis
19771			−			+			(3+)	g(m) →	—		↓
19772			−		+				(3+) 6,7	e(h)	1,(2)		newport
19773		+	−	−	−	−	−			24,(23) s	—		cerro
19774				+	−				(7+) g,m,s E	g,m,s →	E ~~7,(8)~~		Montevideo
19775			+		−				(4+) 5+	i →	1,(5)		Typhimurium
19776		−	−	−	−	−	−		6 1+	—	1,(5),(7)		III 61:−1,5,7
19777			−	−	−	−	−			24,(23) →	—		cerro
19778		+	−	−	−					24,(23) →	—		↓
19779			−		+				(3+20+)	i	2b		Kentucky
19780				+	−				(7+)	1,2,(7) e(h) →	e,n,(z15)		braenderup
19762	A		+	−	+		−		(4+) (8+)	i →	Z10		Rough O:i:Z10
	B		+	−	+		−		(4+) (8+)	i →			
19764a			−			+			9+	g,(m) →	—		enteritidis
b			−			+			9+	g,(m) →	—		↓

2/17/10 TP

*Put on same plate as 19781 gms & grew out so I had to re-do both 19774 & 19781.

Biochem	glu	lac	suc	sal	dul	TSI/ H_2S	ind	MR	VP	cit	urea	tart	mot	lys/ H_2S	NaMal	KCN	ONPG	malt	orn	ara	tre	oxi
19764		−		−	(+)							−			−		−					
19773		−		−	(+)							−			−		−					
19776		(+)		−	−							−			+		+					
19777		−		−	(+)							−			−		−					
19778		−		−	(+)							−			−		−					
Arizona control		−		−	−							−			+		+					

585603
National Veterinary Services Laboratories
1800 Dayton Road Ames, Iowa 50010
Phone (515) 663-7266 Fax (515) 663-7397
Salmonella Serotyping Report Page 1 of 1

FEDERAL RELAY SERVICE (Voice/TTY/ASCII/Spanish)
1-800-877-8339
****** This is a confidential report for official use only.
******

Date Received: 12/30/2008

Accession: 585603

Submitted By:
DR. PAUL NORRIS
ARKANSAS LIVESTOCK & POULTRY

COMMISSION DIAG LAB POBOX 8505
#1 NATURAL RESOURCES DRIVE
LITTLE ROCK, AR 72205
Fax: 5019072410

Owner:
SMITH, KEITH
City:

State:

Referral Number: 21526
Source Animal: AVIAN

Herd/Flock Size:

Clinical Role: Monitor Sample

Number Sick:

Age Group: Immature

Number Dead:

Condition on Arrival: NONE

LABORATORY FINDINGS

Sample ID	Specimen	SALMST
21526	TISSUE COMPOSITE	Not Salmonella

DISTRIBUTION:
Submitter

/S/ Dr. Thomas Bunn 11/09/2010
Director, Diagnostic Bacteriology Laboratory

Public reporting burden for this collection of information is estimated to average .066 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, D.C. 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

This report is required by Regulations (9 CFR 145). Failure to report will hinder investigation of disease to determine origin of the infection.

FORM APPROVED: OMB NO. 0579-0007

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IOWA 50010

REQUEST FOR SALMONELLA SEROTYPING

INSTRUCTIONS: Use a separate request for each flock or herd problem. All cultures from the same flock or herd problem should be on one request. **Items 17, 18, 19, 20 - to be completed by the NVSL.**

1. NAME AND MAILING ADDRESS OF HERD/FLOCK OWNER (Include Zip Code)	2. LAB CODE	3. ACCESSION NO./REFERRAL NO.
Keith Smith Thunder Hill #1	301	21526
	4. SOURCE ANIMAL Avian	5. ORIGINAL NO. IN HERD/FLOCK
	6. NO. IN HERD/FLOCK AFFECTED	7. NO. IN HERD/FLOCK DEAD

8. AGE GROUP ("X" one) 19 WKS

☐ Prenatal ☐ Newborn ☐ Immature ☐ Mature ☐ Mixed Ages ☐ Not Applicable

9. CLINICAL ROLE ("X" one)

☐ Primary Infection ☐ Secondary Infection ☒ Monitor Sample ☐ Environmental ☐ Feeds ☐ Research ☐ Other

10. BACTERIAL TYPING ("X" one)

☒ Salmonella ? ☒ Arizona ? ☐ Other (specify)

11. POULTRY SPECIMENS ONLY

A. NAME AND ADDRESS OF HATCHERY (Include Zip Code)

Thunder Hill #1
Hot Springs AR

B. SPECIMEN SOURCE ("X" one)

☐ Primary Breeding Flock ☒ Commercial Flock
☐ Multiplier Breeding Flock ☐ Other

C. TYPE ("X" one)

☐ Egg Type Chicken ☐ Turkeys
☒ Meat Type Chicken ☐ Waterfowl, Exhibition Poultry and Game Birds

12. SPECIMEN CULTURED	13. CULTURE NO.	14. O GROUP	17. SEROTYPE
A. Pooled Intestines	21526	Salm vs. Arizona? 4957	not salmonella
B.			
C.			
D.			
E.			
F.			
G.			
H.			
I.			
J.			

15. SUBMITTED BY (Name and Title)	16. DATE SUBMITTED	18. SEROTYPED BY
Susan House	12/22/08	2/20/9 TP

19. ACCESSION NO. FX 8664865 48354

20. RECEIVED BY 585603

12.30.8

VS FORM 10-3
(JUL 92)

Replaces APHIS Form 8003 which may be used.

SALMONELLA WORKSHEET

Document Number: **BTYPFMA1102.02**

SALM #	SPECIES	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		RESULTS
4941			+		–					r	1 (2)		heidelberg
4942			+		–					r →	1 (2)		
4943			+		–					r	1 (2)		
4944			+		–					r →	1 (2)		
4945			+		–					r →	1 (2)		
4946			+		–					r →	1 (2)		
4947			+		–					r →	1 (2)		
4948			+		–					r →	1 (2)		
4949			+		–					r →	1 (2)		
4950			+		–					r →	1 (2)		
4951			+		–					r →	1 (2)		
4952			+		–					r →	1 (2)		
4953			+		–					r →	1 (2)		
4954			+		–					r →	1 (2)		
4955			+		–					r	1 (2)		
4956			+		–					r →	1 (2)		
4957	[illegible]	–	–	–	–	–	–		[illegible]	[illegible]			not salmonella
4958			+		–				5		1 (2)		typh copenhagen
4959			+		–					(4), 9 (5) →	–		agona
4960			–			+			9+	9 (4) →	–		dublin

2/23/97

Biochem	glu	lac	suc	sal	dul	TSI/ H_2S	ind	MR	VP	cit	urea	tart	mot	lys/ H_2S	NaMal	KCN	ONPG	malt	orn	ara	tre	oxi
Az control		−			−							−			+		+					
4950	+	+	−	−	+	A/A+	+	+		−	−	+	v+	v−	−		+					
TSA control	+	−	−	−	+	K/A+	−	+		−	−	+	+	+	−		−					

National Veterinary Services Laboratories
1800 Dayton Road Ames, Iowa 50010
Phone (515) 663-7266 Fax (515) 663-7397
Salmonella Serotyping Report Page 1 of 1

FEDERAL RELAY SERVICE (Voice/TTY/ASCII/Spanish)
1-800-877-8339

****** This is a confidential report for official use only. ******

Date Received: 1/25/2007
Accession: 479659

Submitted By:
DR. PAUL NORRIS
ARKANSAS LIVESTOCK & POULTRY
COMMISSION DIAG LAB POBOX 8505
#1 NATURAL RESOURCES DRIVE
LITTLE ROCK, AR 72205
Fax: 5019072410

Owner:
KEITH SMITH FARMS
City: HOT SPRINGS
State: AR

Referral Number: L249
Source Animal: CHICK

Herd/Flock Size: 7000

Clinical Role: Environmental

Number Sick:

Age Group: Mature

Number Dead:

Condition on Arrival: NONE

LABORATORY FINDINGS

Sample ID	Specimen	SALMST	PHAGE
5	DRAG SWAB	Enteritidis	13
6	DRAG SWAB	Enteritidis	13

NVSL 479659
5E
L249
Little Rock, AR
Please phage type & report.
DM 3/8/07

DISTRIBUTION:
Submitter

/S/ Dr. David Miller, DVM
Bacterial Identification 3/12/20071

ublic reporting burden for this collection of information is estimated to average .066 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, D.C. 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

This report is required by Regulations (9 CFR 145). Failure to report will hinder investigation of disease to determine origin of the infection.

FORM APPROVED: OMB NO. 0579-0007

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
NATIONAL VETERINARY SERVICES LABORATORIES
AMES, IOWA 50010

REQUEST FOR SALMONELLA SEROTYPING

INSTRUCTIONS: Use a separate request for each flock or herd problem. All cultures from the same flock or herd problem should be on one request. **Items 17, 18, 19, 20 - to be completed by the NVSL.**

1. NAME AND MAILING ADDRESS OF HERD/FLOCK OWNER (Include Zip Code)	2. LAB CODE	3. ACCESSION NO./REFERRAL NO.
Keith Smith Farms P. O. Box 3800 Hot Springs, AR 71914	301	L249
	4. SOURCE ANIMAL: Chicken	5. ORIGINAL NO. IN HERD/FLOCK: 7000
	6. NO. IN HERD/FLOCK AFFECTED: Not applicable	7. NO. IN HERD/FLOCK DEAD: Not applicable

8. AGE GROUP ("X" one)

☐ Prenatal ☐ Newborn ☐ Immature ☒ Mature ☐ Mixed Ages ☐ Not Applicable

9. CLINICAL ROLE ("X" one)

☐ Primary Infection ☐ Secondary Infection ☐ Monitor Sample ☒ Environmental ☐ Feeds ☐ Research ☐ Other

10. BACTERIAL TYPING ("X" one)

☒ Salmonella ☐ Arizona ☐ Other (specify)

11. POULTRY SPECIMENS ONLY

A. NAME AND ADDRESS OF HATCHERY (Include Zip Code)

B. SPECIMEN SOURCE ("X" one)

☒ **Primary Breeding Flock** ☐ **Commercial Flock**
☐ **Multiplier Breeding Flock** ☐ **Other**

C. TYPE ("X" one)

☐ **Egg Type Chicken** ☐ **Turkeys**
☒ **Meat Type Chicken** ☐ **Waterfowl, Exhibition Poultry and Game Birds**

12. SPECIMEN CULTURED	13. CULTURE NO.	14. O GROUP	17. SEROTYPE
A. Drag swab of Flock 6057	5	D C1C1	13 enteritidis 2/7/TP
B. Drag swab of Flock 6058	6	D C1C1	↓ enteritidis MK
C.			MK/TP 3/10/07
D.			
E.			
F.			
G.			
H.			
I.			
J.			

TE

15. SUBMITTED BY (Name and Title)	16. DATE SUBMITTED	18. SEROTYPED BY
Hashim Ghori, DVM. Ph.D.	01/23/2007	2/17/TP 479659

19. ACCESSION NO. 1-25-07 11

20. RECEIVED BY

VS FORM 10-3
(JUL 92)

Replaces APHIS Form 8003 which may be used.

Fed Ex 8600278611 9

Salmonella Worksheet

SALM #	Species	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		Results
6081			+		−				5−	i	1 2		typh copenhagen
6082			−	+	−		−		7+	y → e,n,x			hartford
6083			+	−	−		−			i	1 2		Heidelberg
6084			−	+	−		−		(7+)	1,5	← 1,5	LIFE HIT	Chukwa mississippi anatum agona aE1-3x
6085			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		not salmonella
6086			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		↓
6087			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		
6088			−			+			9+	l z28	1 5		javiana
6089			+		−					(f) g,(s) →	—		agona
6090			−		+				8+20+	i →	26		Kentucky
6091			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		not salmonella
6092			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		↓
6093			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		
6094			−	−	−	−	−	Pool IV	4,4+	Pools not →	—		
6095			−			+			9+	e 1,5 ←	1,5	2nd → 48 → 1,5	9 12 : − : 1,5
6096			+		−				5+	i →	—	2nd → 48 → 1,7	4, 5, 12 : i : −
6097			+		−					(f) g,(s) →	—		agona
6098			+		−					(f) g,(s) →			↓
6099			−	+	−		−		7+	1,5 ←	1,5	2nd → 48 → 1,5	thompson
6100			−			+			9+	g,m →	—		enteritidis

2/11/7 TP

Salmonella Worksheet

SALM #	Species	18	B	C1	C2	D	E		Single Factors	Phase 1	Phase 2		Results
6101			−			+			9+	9,(w) →	−		enteritidis
6102			−			+			9+	g,(p) → −			Dublin
6103			−		+				8+ 20+	i → Z6			Kentucky
6104			−		+				8+ 20+	i → Z6			↓
6105			−				+		10+	(r) → 1,(2)			Agona
6106				+	−				7+	Z10 → e,(n),Z15			Typhimurium
6107			+			−			5+	i → 1,(2)			Typhimurium
6108			+			−				r → 1,(2)			Heidelberg
6109			+			−				r ← 1,(2)			↓
6110			+			−			5+	i → − 48 →	New −		4, 5, 12 : i : −
6111			+	+	+	+	+		7+ Na 8 20+	8+ i →		1,2 Z6	Kentucky
6112			−		+				8+ 20+	i		Z6	Kentucky
6113			−		+				8+ 20+	i →		Z6	↓
6114			−			+			9+	g,(m) → −			Enteritidis
6115			−		+				8+ 20+	i		Z6	Kentucky
6116			+			−				r →		1,(2)	Heidelberg
6117				+	−				7+	g,(m) →			Montevideo
6118			+			−				(r) →		1,(7)	Bredeney - NFA-1-07
6119		−	−	−	−	−	−	(+2)	~~5+~~ 4 7+	G - 24 (32) →			contaminated
6120			−		+				6+ 8+	e (4)		1,(2)	newport
6119a		−	−	−	−	−	−	(+2)	4 7+	24 (32) →			
6119b		−	−	−	−	−	−			24 (32) →			

2/12/07 TP