



RABIES VIRUS SEROLOGY REQUEST FORM

- Use one submission form per animal
- Send a minimum of 1ml serum (preferable or 2ml clotted blood)
- Clearly label sample with the animal's microchip number
- For the purposes of the UK Pet Travel Scheme, a test titre result of 0.5IU/ml or above indicates that the dog or cat has an acceptable rabies antibody level

Send sample to:

PTDS
Unit 2a, Manor Farm Business Park,
Higham Gobion, Hitchin, Herts, SG5 3HR

PTDS ref No:

Owner's Details

Name: _____

Address: _____

Post Code _____

Submitting Veterinary Surgeon's Details

Name: _____

Signature of submitting veterinary surgeon: _____

Address: _____

Post Code _____

Name in
BLOCK LETTERS: _____

Tel: _____

Fax: _____

Date: _____

Animal's Details

Microchip Number: _____

Animal Name: _____

Date of birth _____

Date of last rabies vaccination: _____

Species: _____

Vaccine Make _____

Date of sampling & microchip reading _____

Batch Number _____

For Biobest Use Only

Date Received: _____

QC: _____

F: _____

I: _____

Biobest Ref: _____