

BIOSECURITY SCIENCES LABORATORY	GEN-008JEV
SPECIMEN ADVICE SHEET – JAPANESE ENCEPHALITIS SUPPLEMENT You may choose to complete the Specimen Advice Sheet with the information provided below, OR provide this sheet <u>as an attachment</u> to the Specimen Advice Sheet . The Department of Primary Industries is collecting the information on this form to provide government with information to perform diagnostic testing for animal disease management and control. This information will only be accessed by authorised employees within the department. Some information may be given to external laboratories (as listed in the link) for the purpose of further diagnostic testing if required while some information may be provided to other state and federal animal health authorities (as listed in the link) for the purpose of animal disease management, control and reporting. Your information will not be disclosed to any other parties unless authorised or required by law.	
Veterinarian details	
Name:	
Clinic:	
Animal owner details	
Name:	
Animal details	
Names/IDs:	
Animal type: <input type="checkbox"/> Horse <input type="checkbox"/> Pigs <input type="checkbox"/> Other (specify)	
Specimen collection	
Specimen type: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> CSF</div> <div style="width: 33%;"><input type="checkbox"/> Blood (EDTA)</div> <div style="width: 33%;"><input type="checkbox"/> Blood (clotted)</div> <div style="width: 33%;"><input type="checkbox"/> Brain</div> <div style="width: 33%;"><input type="checkbox"/> Abdominal and thoracic fluid</div> <div style="width: 33%;"><input type="checkbox"/> Fresh semen (boars)</div> <div style="width: 33%;"><input type="checkbox"/> Aborted foetus/es</div> <div style="width: 33%;"><input type="checkbox"/> Tissues – fresh (post-mortem)</div> <div style="width: 33%;"><input type="checkbox"/> Tissues – formalin-fixed (post-mortem)</div> </div> Tissues, please specify:	
Ever diagnosed for:	
Flavivirus/Arbovirus <input type="checkbox"/> West Nile (Kunjin virus) <input type="checkbox"/> Murray Valley encephalitis <input type="checkbox"/> Other If yes, please specify:	
Horse: <input type="checkbox"/> HeV exclusion (If yes, add job number):	
Any activity: (Potential vector activity on farm or neighbouring properties)	
<input type="checkbox"/> Mosquito <input type="checkbox"/> Water birds <input type="checkbox"/> Other <input type="checkbox"/> On Farm <input type="checkbox"/> Neighbouring Farm/s	
Clinical signs	
Pigs <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Abortions</div> <div style="width: 33%;"><input type="checkbox"/> Stillbirths</div> <div style="width: 33%;"><input type="checkbox"/> Foetal mummification</div> <div style="width: 33%;"><input type="checkbox"/> Congenital malformations</div> <div style="width: 33%;"><input type="checkbox"/> Encephalitis (< 6 months)</div> <div style="width: 33%;"><input type="checkbox"/> Neurological abnormalities</div> <div style="width: 33%;"><input type="checkbox"/> Recumbency/Paddling</div> <div style="width: 33%;"><input type="checkbox"/> Weak piglets (at birth)</div> </div> Horses <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Ataxia</div> <div style="width: 33%;"><input type="checkbox"/> Facial paralysis</div> <div style="width: 33%;"><input type="checkbox"/> Muscle tremors/fasciculations</div> <div style="width: 33%;"><input type="checkbox"/> Hyperaesthesia</div> <div style="width: 33%;"><input type="checkbox"/> Hypermetria</div> <div style="width: 33%;"><input type="checkbox"/> Paresis/paralysis/recumbency</div> <div style="width: 33%;"><input type="checkbox"/> Circling</div> <div style="width: 33%;"><input type="checkbox"/> Blindness</div> <div style="width: 33%;"><input type="checkbox"/> Altered mentation/depression</div> </div> Other	
Please specify other clinical signs not described above:	
Additional comments	
E.g.: Animal movement, floods, etc.	