



HPAI in Livestock Certified Tester Application

State Veterinarian's Office
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Dairy Name:	Premises ID:
Owner Name:	Phone:
Vet/Vet Clinic:	Phone:

The following individuals will be the certified testers for this dairy (maximum 2 per dairy):

	Name	Phone
Tester 1		
Tester 2		

Testers must initial below to indicate their understanding of the testing requirements:

Tester 1	Tester 2	Requirement
		I will only collect milk samples if approved by the herd veterinarian.
		I have watched the video on aseptic sample collection.
		I will collect 3-10 ml milk per cow. All functional quarters will be sampled. Each tube will only contain the milk from one cow.
		I will assign a tube number to each cow, and I will record the cow's official ID number*. The official ID number and corresponding tube number will be submitted to UVDL with the sample.
		Samples will be kept cool until they are submitted to UVDL in Logan. Samples cannot be frozen. Overnighted samples will be sent in an insulated container with an ice pack.
		I understand that if less than 30 animals are being shipped, that I must collect samples on every cow. If more than 30 animals are being shipped, I will collect samples on 30 cows.

*Official ID Number = brucellosis tag, silver brite tag, or RFID tag number

I understand that if the testing requirements above are not met, the approval for the certified testers will be revoked and future samples may only be collected by a veterinarian.

Owner Signature and Date:	Veterinarian Signature and Date:

UDAF Only Approved by: _____ Date: _____