

## Pennsylvania Veterinary Laboratory 2305 North Cameron Street, Harrisburg, PA 17110 Phone: 717-787-8808 FAX: 717-772-3895

padls.agriculture.pa.gov

| (For Lab Use Only) |  |  |  |  |  |
|--------------------|--|--|--|--|--|
| Date Received:     |  |  |  |  |  |
| Accession #:       |  |  |  |  |  |
| # of Samples:      |  |  |  |  |  |
| Courier:           |  |  |  |  |  |
| Condition:         |  |  |  |  |  |

## Contagious Equine Metritis (CEM)/*Taylorella* species Culture Submission Form

- Please contact the lab prior to sample collection to schedule testing
- Samples may be rejected if this form is not completely filled out
- Contact USDA VS IMPORT& EXPORT Office to determine sampling requirement for testing.
- Samples must be submitted in Amies transport medium with charcoal and on ice packs.
- Samples must arrive at the laboratory promptly to allow setting up of culture within 48 hours of collection.

| Veterinarian/Submi                   | tter:  |                                | Owner:                |                      |          |  |
|--------------------------------------|--------|--------------------------------|-----------------------|----------------------|----------|--|
| Clinic:                              |        |                                | Business Name:        |                      |          |  |
| Address:                             |        |                                | Address:              |                      |          |  |
| City, State, Zip:                    |        |                                | City, State, Zip:     |                      |          |  |
| Phone:                               |        |                                | Phone:                |                      |          |  |
| Fax:                                 |        |                                | Fax:                  |                      |          |  |
| E-Mail:                              |        |                                | E-Mail:               |                      |          |  |
| Report Preference:                   |        |                                | Report Prefere        | nce:                 |          |  |
| ☐ US Mail                            | ☐ Fax  | ☐ E-Mail                       | ☐ US Mail             | ☐ Fax                | ☐ E-Mail |  |
| <b>Horse Location</b>                |        |                                | Horse Information     |                      |          |  |
| Address:                             |        |                                | Name:                 | <b>Registration:</b> | Breed    |  |
| City:                                | State: | Zip:                           |                       |                      |          |  |
|                                      |        |                                | Age:                  | Sex:                 | Color:   |  |
| PURPOSE OF TEST                      | TING   |                                |                       |                      |          |  |
| ☐ IMPORT ☐ EXPORT                    |        |                                |                       | □ PREBREEDING EXAM   |          |  |
| Country of Origin: Importing cou     |        | ıntry:                         | Collection Date:      |                      |          |  |
| Collection Date: Collection Date     |        | ite:                           | Collection Tim        | ne:                  |          |  |
| Collection Time:                     |        | Collection Tin                 | me:                   |                      |          |  |
| SAMPLING SITES                       |        |                                |                       |                      |          |  |
| Stallion:                            |        |                                | Mare:                 |                      |          |  |
| ☐ 1. Shaft of penis and prepuce      |        | ☐ 1. Clitoral fossa            |                       |                      |          |  |
| ☐ 2. Urethral sinus or diverticulum  |        |                                | ☐ 2. Clitoral sinuses |                      |          |  |
| ☐ 3. Fossa glandis or urethral fossa |        | ☐ 3. Distal cervix/endometrium |                       |                      |          |  |
| ☐ 4. Distal urethra                  |        |                                |                       |                      |          |  |
|                                      |        |                                |                       |                      |          |  |

SIGNATURE OF VETERINARIAN:



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# Sample Collection and Submission Guidelines for Contagious Equine Metritis (CEM) Testing / Taylorella species Culture

Pennsylvania Veterinary Laboratory (PVL) is approved by the USDA for offering bacterial culture for CEM testing.

- Testing requirements vary for import, export and disease trace-back purposes. Please confirm sampling requirements for regulatory testing before specimen submission.
- Please contact the lab prior to sample collection to schedule testing.
- All submissions for CEM testing are considered official; suspect samples will be sent to NVSL for confirmation.
- Cost of culture is \$20.00 per swab with no accession fee.

### **Specimen Collection**

- Rayon swabs are preferred for sample collection. Avoid using calcium alginate swabs.
- Collect swabs from the recommended sampling sites.
  - Open Mares: Clitoral fossa, clitoral sinuses and distal cervix/uterus
  - o <u>Pregnant mares</u>: Clitoral fossa, and clitoral sinuses
  - Stallions: Shaft of penis and prepuce, urethral sinus, fossa glandis (urethral fossa), and distal urethra
- Insert swabs deep into tube containing Amies transport medium with charcoal with one swab/ tube.
  - Small diameter (~ 2 mm) swabs (e.g. Hardy Diagnostics Cat # 4116BX) for sample collection from clitoral sinuses, and double guarded long (~ 33") uterine culture swabs for cervical samples are needed. If needed, limited quantities of sampling supplies can be ordered from NVSL (Tel # 515-337-7565; E-mail: NVSL concerns@aphis.usda.gov; www.aphis.usda.gov/nvsl).

#### Sample Shipment

- Ship swabs in the transport media with enough ice packs to PVL.
- A completed submission form showing the collection date must accompany samples. The CEM submission form can be accessed online at padls.agriculture.pa.gov
- Samples must arrive at the laboratory promptly to allow setting up of culture within 48 hours after collection.

### Reporting

- Negative culture results are reported after 7 days.
- Samples suspected for *Taylorella* species are sent to NVSL for final confirmation.
- Another set of samples are requested if samples are not suitable for testing or if overgrowth of contaminants is observed.