

# STONY LANE LABORATORIES LTD TRADING AS CROWSHALL VETERINARY SERVICES



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## LION CODE **Salmonella Sample Submission Form**

Shaded boxes below must be filled in for UKAS/LION CODE Compliance

Company Name		Site Name	
Company Address		Site Address	
Name of person taking sample(s)		Contact phone number / email (in case we need to discuss issues with samples or paperwork)	
Date of Sampling DD/MM/YYYY		Producer Establishment Number	__ UK __

WHERE WERE SAMPLES TAKEN?	PLEASE TICK	TYPE OF BIRDS	PLEASE TICK
SHED / HOUSE WITH BIRDS PRESENT		BREEDER LAYERS	
EMPTY SHED / HOUSE		BREEDER PULLET REARING	
MULTI-TIER HOUSE		PULLET REARING	
MOBILE HOUSING		LAYERS	
HATCHERY		OTHER (PLEASE SPECIFY)	
FEED MILL			

Were birds receiving antibiotic at time of sampling? (Please Circle as Appropriate)	YES / NO
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Shed / House Number or Area	Age (Days)	Age (Weeks)	Date Housed MM/YYYY	Shed / House Number or Area	Age (Days)	Age (Weeks)	Date Housed MM/YYYY

**PLEASE NOTE: INFORMATION PROVIDED ON THIS FORM WILL BE USED TO GENERATE THE TEST REPORT. THE LABORATORY CANNOT ACCEPT RESPONSIBILITY FOR THE ACCURACY OF THIS INFORMATION OR ANY IMPACT ON THE VALIDITY OF RESULTS. FOR UKAS/NCP/LION CODE COMPLIANCE PLEASE ENSURE ALL REQUIRED INFORMATION IS SUPPLIED AND ACCURATE.**

PLEASE ENTER SAMPLE DETAILS OVERLEAF.

**PLEASE USE A SEPARATE FORM FOR EACH SAMPLE TYPE AND TEST**

**All Sample Types tested by MSRV**

Sample Type	No. Samples Submitted	Declaration / Additional Information				
<b>BOOTSWABS</b> (2 PAIRS PER HOUSE)						
<b>BOOTSWABS</b> (5 PAIRS PER HOUSE)						
<b>MOBILE HOUSING ONLY</b> <b>BOOT SWABS</b> (1 PAIR PER MOBILE – minimum 2 pairs, maximum 6 pairs)						
<b>MULTI-TIER HOUSING ONLY</b> <b>POOLED BOOT SWABS / MUCK BELT HAND SWABS</b> (1 pair boot-swabs, 2 hand swabs in a pool)						
<b>CHICK BOX LINERS</b> (MINIMUM 10 required for compliance)						
<b>COMPOSITE FAECES</b> (60g)						
<b>COMPOSITE FAECES</b> (2 x 150g)						
<b>DEAD ON ARRIVAL CHICKS / POULTS</b> (MAXIMUM 60)						
<b>POULTRY FEED</b> (50g required for compliance)						
<b>DUST</b> (50g required for compliance)		IF LESS THAN 50g AVAILABLE PLEASE SUBMIT ALL AVAILABLE DUST AND SIGN DECLARATION BELOW: <b>I CONFIRM THAT THERE WAS LESS THAN 50g DUST AVAILABLE TO SUBMIT</b>  <b>SIGNED</b> .....				
<b>HATCHER TRAY LINERS – DAY OLD</b> (MINIMUM 10 required for compliance)						
<b>BREEDER PULLET REARING 6 x POST CLEANING GAUZE SWABS</b> (FLOORS for litter houses <u>OR</u> MANURE BELTS/DROPPINGS BOARDS for cage houses, WALLS, HIGH BEAMS, FANS, IN-HOUSE FEEDERS, IN-HOUSE DRINKERS) <b>PLUS, ALL AVAILABLE RODENT FAECES</b> (UP TO 25g)  <b>The faeces or bait box swab <u>MUST</u> be submitted in a separate bag to the post-cleaning swabs.</b>		<b>Where no rodent faeces are available you <u>MUST</u> submit a swab from areas around the rodent boxes (bait box) and declare that no rodent faeces was available.</b>  <b>RODENT FAECES SUBMITTED (PLEASE CIRCLE)</b>  <b>YES / NO*</b>  <b>* I CONFIRM THAT THERE WERE NO RODENT FAECES AVAILABLE TO SAMPLE &amp; A RODENT BOX SWAB HAS BEEN SUBMITTED</b>				
<b>LAYING BIRDS 9 x POST CLEANING GAUZE SWABS</b> (FLOORS, WALLS, HIGH BEAMS, FANS, MANURE BELTS, IN HOUSE FEEDERS, IN HOUSE DRINKERS, NEST BOXES, EGG DELIVERY BELTS) <b>PLUS, ALL AVAILABLE RODENT FAECES</b> (UP TO 25g)  <b>The faeces or bait box swab <u>MUST</u> be submitted in a separate bag to the post-cleaning swabs.</b>		<b>Where no rodent faeces are available you <u>MUST</u> submit a swab from areas around the rodent boxes (bait box) and declare that no rodent faeces was available.</b>  <b>RODENT FAECES SUBMITTED (PLEASE CIRCLE)</b>  <b>YES / NO*</b>  <b>* I CONFIRM THAT THERE WERE NO RODENT FAECES AVAILABLE TO SAMPLE &amp; A RODENT BOX SWAB HAS BEEN SUBMITTED</b>  <b>SIGNED</b> .....				
<b>MOBILE HOUSING ONLY</b> <b>POST CLEANING COMPOSITE GAUZE SWABS -</b>		<table border="1"> <tr> <td><b>NUMBER OF MOBILES</b></td> <td></td> <td><b>NUMBER OF GAUZE SWABS PER MOBILE</b></td> <td></td> </tr> </table>	<b>NUMBER OF MOBILES</b>		<b>NUMBER OF GAUZE SWABS PER MOBILE</b>	
<b>NUMBER OF MOBILES</b>		<b>NUMBER OF GAUZE SWABS PER MOBILE</b>				
<b>VEHICLE GAUZE SWABS</b> (MINIMUM 3 for compliance - CRATES/MODULES, TRUCK BED, CAB AND FOOT-WELL)						
<b>OTHER</b> (PLEASE SPECIFY)						

**SAMPLES MUST BE RECEIVED BY THE LABORATORY TO ALLOW TESTING TO COMMENCE WITHIN 4 DAYS OF SAMPLING. IT IS THE OWNER'S RESPONSIBILITY TO ENSURE THIS TIMELINE IS ADHERED TO. IT IS RECOMMENDED THAT GUARANTEED NEXT-DAY DELIVERY SERVICES ARE USED FOR SAMPLES SUBMITTED BY POST.**