IDEXX DAIRY DIAGNOSTICS bioPRYN®

Blood-Pregnancy Sample Submission Form

REPORT SENT TO:

Company: _____ Phone: _____

Name: _____ Email: _____

Address: _____ CC Email: _____

_____

Red Top Tube

Animal species:

_____

(Cattle/Goat/Sheep)

Reporting Method:

☐ Email

☐ Phone

Shipping / Drop-off Locations:

Lander Vet North –
25650 E. Lone Tree Rd. Escalon, CA 95320
(209) 838-0526

Lander Vet Turlock –
4512 S. Walnut Rd. Turlock, CA 95380
(209) 634-0826

Tube #	Animal ID	Days Bred		Tube #	Animal ID	Days Bred
1				21		
2				22		
3				23		
4				24		
5				25		
6				26		
7				27		
8				28		
9				29		
10				30		
11				31		
12				32		
13				33		
14				34		
15				35		
16				36		
17				37		
18				38		
19				39		
20				40		

Test date: M, W, Thur
Cost: $5.00
Payment required with samples.

Payment Included: ☐
Amount included: _____

Circle: Cash, Check, Voucher, Will call with Credit card.
Check # _____

Tube #	Animal ID	Days Bred		Tube #	Animal ID	Days Bred
41				71		
42				72		
43				73		
44				74		
45				75		
46				76		
47				77		
48				78		
49				79		
50				80		
51				81		
52				82		
53				83		
54				84		
55				85		
56				86		
57				87		
58				88		
59				89		
60				90		
61				91		
62				92		
63				93		
64				94		
65				95		
66				96		
67				97		
68				98		
69				99		
70				100		