



ANALYSIS REQUEST FORM



SAMPLE SUBMISSION AND ANALYSIS FORM

1. RECOMMENDATIONS AND INSTRUCTIONS FOR SAMPLE SUBMISSION

For the safety of the samples you send to our laboratory and the quality of the analysis, please follow the steps below:

- Form Completion: A separate sample submission form must be sent for each farm and case. Please fill in the information specified in the sample submission form completely, especially the data related to the pathological process.
- Acceptance Condition: Only samples sent with a properly completed sample submission form will be accepted.
- Packaging: Follow the laboratory instructions.
- Timing: Ensure that samples are delivered on business days.

SHIPPING ADDRESS:

Avitek Ar-Ge

Ankara Üniversitesi Teknokent Ek Alanı Kalaba Mahallesi Kütükçü Alibey Caddesi No:2B/201, 06120 Keçiören/Ankara

Tel: +905345012753 | E-mail: info@avitekarge.com metinilemin@mtaqua.com

SENDER AND FARM INFORMATIO	N
Dates	Company Information
	Company
Sample Collection Date://20	Name:
Sample Submission Date://20	Farm
	Name:
	•••
Sender	B (B) B (
Name:	Person to Receive Results:
Water Tarres and the same a	Email:
Water Temperature:°C	Email:
Mortality Rate (%):	Morbidity (Disease) Rate (%):

FARM TYPE: [] Hatchery [] Pre-growing [] Grow-out [] Others



SAMPLE AND ANALYSIS INFORMATION
Fish Species:
REQUESTED ANALYSIS: [] Microbiological Analysis [] Molecular Diagnosis (PCR etc.) [] Necropsy / Pathology
PATHOLOGICAL PROCESS AND CLINICAL FINDINGS Please check the observed symptoms: GENERAL CONDITION AND BEHAVIOR: [] No Symptoms [] Anorexia (Loss of Appetite) [] Lethargy / Listlessness [] Erratic Swimming
VISUAL / EXTERNAL SYMPTOMS: [] Lesions on Fins [] Exophthalmia (Pop-eye) [] Hemorrhage (Bleeding) [] Anal Prolapse [] Abdominal Distension (Belly swelling) [] Melanosis / Darkening [] Eye Damage [] Head Ulcers
INTERNAL / INTERNAL ORGAN SYMPTOMS: [] No Symptoms [] Liver Hemorrhages [] Intestinal Hemorrhages [] Ascites Fluid (Fluid in abdominal cavity) [] Muscle Hemorrhages [] Kidney Lesions [] Brain Congestion [] Splenomegaly (Enlarged spleen) [] Swim Bladder Hyperinflation [] Granulomatous Lesions
ADDITIONAL INFORMATION Treatments Applied: Vaccines Used: Estimated Diagnosis (if any): Additional Comments:

LEGAL DISCLOSURE AND APPROVAL

The data contained in this form will be recorded in the MTaqua database, and the responsibility for the samples belongs to our company from the time of their delivery to our laboratory. Your personal data is protected under KVKK (Law on Protection of Personal Data) and will only be processed for the purpose of carrying out technical/commercial processes.

Date: .../.../20... Signature: