

Research centers
Microbiological test
1-888-8-BIOVET • sac@biovet-inc.com

Order number
RESERVED SPACE
BIOVET

SUBMITTING INFORMATION

Institute: _____
 Submitter: _____
 Address: _____

 Phone: _____
 Fax/Email: _____

SAMPLES

Sampling date: _____
 Type of sample: _____

 Collected by: _____

Sample Identification

#	Identification
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____
16	_____
17	_____
18	_____
19	_____
20	_____

HISTORY /COMMENTS

Please write in block letters

STERILITY TESTING

(Food, Reagent, Water as a reagent ...)

Aerobic culture
 Level 1 2 3

Aerobic culture + Yeasts and Moulds
 Level 1 2 3

Aerobic and Anaerobic culture
 Level 1 2 3

Aerobic and Anaerobic culture + Yeasts and Moulds
 Level 1 2 3

Level 1 : Enrichment + Membrane Filter Concentration
 Level 2 : Inoculation after enrichment
 Level 3 : Direct Inoculation

BIOBURDEN (feces, Wound, Litter ...)

Aerobic culture and Aerobic colony counts

Anaerobic culture and Aerobic colony counts

IDENTIFICATION OF ISOLATES

Identification of a bacterial isolate by Maldi-tof

Bacterial identification by sequencing

Yeasts / Molds Identification by sequencing

Protozoan identification by sequencing

ENVIRONMENTAL MONITORING

Aerobic colony counts [swab]
 avec identification (si oui cochez)

Yeasts and Moulds [swab]
 with identification (check if requested)

Ampoule for checking the autoclave efficiency

Environmental air control [Agar] (Including Aerobic colony counts, Yeasts and Moulds)

OTHER (specify)

Tests in black are done in-house – Fast transmission of the results.
 Tests in blue are done externally.

Please ask for any special tests that are not listed on this request form.