



**NC Tick Identification Program Submission Form: Animal (companion, livestock, and wildlife)
Submissions**

Veterinary professionals, shelter personnel, wildlife rescue personnel, and members of the public who find ticks on animals should use this form to submit a tick for species identification. The North Carolina Department of Health and Human Services, Division of Public Health, and Communicable Disease Branch will conduct tick identification. This service is provided for surveillance purposes and should not be used for diagnostic purposes. Pathogen testing will not be conducted.

Please provide the following information regarding your tick submission:

Name of veterinary practice/shelter/facility Name of veterinarian/tech/personnel Office phone number Email Address

Date of collection Name/ID # of animal Animal species Age Sex Breed

Home county of animal home zip code of animal

Has the animal traveled outside of its home county in the past two weeks? Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/>		
Travel Start Date	Travel End Date	City, County, and State of Travel

Was a SNAP 4DX test done for this animal within the past six months? Yes No Don't know

If no, was the SNAP test offered after tick noted/removed from patient? Yes No Don't know

SNAP 4DX test result(s): *A. phagocytophilum/platyis* *B. burgdorferi* *E. canis/ewingii* No tickborne pathogens

Where were the tick/ticks found on the animal (i.e. head, behind ears, abdomen)? _____

Is the animal healthy (yes/no). If **NO**, describe: _____

Is this animal on tick prevention? Yes No Don't know Started at visit

If **YES**, specify product: _____ Last application: _____

Any Additional Comments: _____

(For state health office use only)

Species	ID number	Desiccated/ Damaged	Engorged	# of females	# of males	# of nymphs	# of larvae	Total

Submission Instructions

1. Place tick in a water-tight container (e.g., Ziploc bag or plastic vial) with a paper towel/cotton ball doused with alcohol to prevent desiccation.
2. Fill out the specimen submission form (above) for each submission and attach the specimen(s). Each animal host should have its own submission form.
3. Cut and keep these instructions.
4. Package specimen(s) and the submission form(s) carefully to avoid damage during shipment.
5. Use the prepaid postage envelopes provided for specimens in Ziploc bags or plastic vials. For larger containers, please mail them to:

NC Tick Identification Program
c/o Dr. Vishvapali Kobbekaduwa
1902 Mail Service Center
Raleigh, NC 27699-1902
6. Results will be returned via email.

For more information about tickborne disease surveillance in North Carolina or if additional envelopes are needed, please contact the Communicable Disease Branch at (919) 733-3419. Additional information about ticks and tickborne disease can be found at www.cdc.gov or at our website: <https://epi.dph.ncdhhs.gov/cd/diseases/ticks.html>.