



UNIVERSITY OF CALGARY
FACULTY OF VETERINARY MEDICINE
Veterinary Outbreak Investigation Service

Investigation Request Form

This form is to request assistance with a veterinary outbreak investigation through the UCVM Veterinary Outbreak Investigation Service (VOIS). Submission of this form does NOT guarantee funding or investigation assistance. Each request is considered on a case-by-case basis.

Return completed form to VOIS@ucalgary.ca.

Date: _____

Support level requested

- ☐ **Diagnostic (complete page 1 ONLY):** request for funding support for diagnostics in a disease investigation. No formal UCVM faculty support (does not exclude informal consultation). Diagnostics to be performed or facilitated through the Diagnostic Services Unit (DSU). For ruminant cases only, investigation can be elevated to full support at the request of the referring veterinarian.
 - ☐ Samples will be submitted following approval of VOIS funding.
 - ☐ Samples have already been submitted to the DSU with this form and a DSU submission form.
 - ☐ Please proceed with diagnostic testing regardless of VOIS approval. If VOIS support is denied, testing fees will be billed back to the clinic.
 - ☐ Please hold tissues until VOIS funding is approved. Only proceed with testing with VOIS funding. A hold fee will apply and be billed back to the clinic if testing is not pursued.
- ☐ **Full (ruminants only; complete ENTIRE form):** investigation led by VOIS Species Lead. Final report of investigation and recommendations will be provided at conclusion of investigation.

Contact Information

Veterinarian: _____ Veterinary Clinic: _____

Phone: _____ Email: _____

Owner/Animal Information

Owner/Farm name: _____ Animal location (nearest city/town): _____

Related DSU case #'s: _____

Species affected: _____ Commodity or use: _____

of animals: susceptible _____ sick _____ dead _____

Brief history and reason for request:

PLEASE NOTE: DATA PROVIDED FOR VOIS INVESTIGATIONS MAY BE ANONYMIZED AND USED FOR EDUCATIONAL PURPOSES.

The submitter acknowledges and agrees that the DSU may share test results, data, and contact information necessary for the purpose of relevant federal and provincial legislation regarding reportable or notifiable diseases and for the purpose of surveillance of animal or public health in Alberta.





History Form for Full Investigation

Please complete this form if you are requesting a full disease investigation with VOIS. Additional information may be requested throughout the investigation.

Additional Animal Information:

Breed: _____ Production stage (if applicable): _____

Sex/age(s) affected: _____ Animal location(s): _____

Reason for investigation:

- ☐ Outbreak (sudden increased morbidity/mortality)
☐ Production limiting disease
☐ Other: _____

History

Differential Diagnoses:

Clinical signs in affected animals:

Duration of problem:

Vaccination status: unknown none vaccinated

Vaccinated with:	Date of vaccination:



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Deworming status: unknown none vaccinated

Dewormed with:	Date of deworming:

Treatments/interventions to this point:

Diagnostic testing and results to this point (please submit copies of results that are not DSU cases, e.g., bloodwork):

Housing and management:

Feed (ration type, amount fed, feeding schedule, etc.):

Supplements, minerals, vitamins, and medications (including dose/amount and schedule):

Water source:

Recent changes (history of travel, new additions, management, feed, water, etc.):

Additional information (if applicable: environmental observations, access to toxins, signs of predation vs. other cause of injury/death):

[illegible]