

Owner name
and surname



IDEXX Reference Laboratories

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submission:
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MICROBIOLOGY 2026 ZA

BARCODE LABEL	PATIENT DETAILS	LAB USE ONLY	SUBMITTING VETERINARY CLINIC (STAMP)
<p>Please attach your barcode here</p>	<input type="checkbox"/> canine <input type="checkbox"/> male <input type="checkbox"/> feline <input type="checkbox"/> neutered <input type="checkbox"/> equine <input type="checkbox"/> female <input type="checkbox"/> bovine <input type="checkbox"/> spayed <input type="checkbox"/> avian age: years months <input type="checkbox"/> other please specify! <input type="checkbox"/> Patient name	<input type="checkbox"/> U <input type="checkbox"/> Sw <input type="checkbox"/> SM <input type="checkbox"/> eSW <input type="checkbox"/> F <input type="checkbox"/> HA <input type="checkbox"/> SS <input type="checkbox"/> FL <input type="checkbox"/> GS	Name Signature Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>By submitting this request, you agree to the terms and conditions found under the website: www.idexx.co.za For further information regarding processing of personal data, please see the following link: www.idexx.com/privacy.</p>

Date of sampling:	<i>please specify</i>	Duration of symptoms:	<i>please specify</i>
Clinical History/Treatment/Provisional diagnosis:			
<i>please specify</i>			

MATERIAL	EXAMINATION
<input type="checkbox"/> Eye (conjunctiva)	<input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Trachea	<input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Nasal	<input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Ear	<input type="checkbox"/> EARC Bacteriology, aerobic culture (yeasts included) <input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture (Otitis media) <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Genitals <input type="checkbox"/> Prostate, uterine etc	<input type="checkbox"/> CUEQ Mare Swab (Bacteriology - equine pre-breeding) <input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture (e.g. deep necrotic wound post partum) <input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Wound	<input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture (e.g. deep wounds esp. bite wounds) <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Swab, skin	<input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi (e.g. <i>Malassezia</i> sp.) (for dermatophytes please submit a skin scraping/biopsy)

MATERIAL	EXAMINATION
<input type="checkbox"/> Swab, rectal/cloaca	<input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture (enteropathogenic micro-organisms - see faeces) <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Swab, other <i>please specify</i>	<input type="checkbox"/> CUAE Bacteriology, aerobic culture <input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Skin biopsy/ scraping/ hair	<input type="checkbox"/> CUAE Bacteriology, aerobic culture (take scraping before alcohol disinfection) <input type="checkbox"/> CUFU Mycology, yeasts & dermatophytes (take scraping before alcohol disinfection) <input type="checkbox"/> DERMP Dermatophyte PCR Profile (Microsporum spp., Microsporum canis, Trichophyton) Canine&Feline
<input type="checkbox"/> Aspirate <input type="checkbox"/> - Joint <input type="checkbox"/> - Thoracic cavity <input type="checkbox"/> - Abdominal cavity <input type="checkbox"/> - Cerebrospinal Fluid (CSF) <input type="checkbox"/> - Bile	<input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture <input type="checkbox"/> CUFU Mycology, yeasts & fungi
<input type="checkbox"/> Other: <i>please specify</i>	

Antibiograms come standard when pathogenic organisms are grown.

	MATERIAL	EXAMINATION
<input type="checkbox"/>	Urine	<input type="checkbox"/> CUAE Bacteriology, aerobic culture including bacterial count and inhibition test
<input type="checkbox"/>	Cystocentesis	<input type="checkbox"/> URINCU Urinalysis, with sediment exam and culture
<input type="checkbox"/>	Catheter sample	<input type="checkbox"/> CURINP Urinalysis, with sediment exam, culture and cytological examination by a pathologist.
<input type="checkbox"/>	Free flow sample	
<input type="checkbox"/>	Poultry	<input type="checkbox"/> DUST Dust swabs
		<input type="checkbox"/> EGGS Eggs Pooled
		<input type="checkbox"/> GENSWABS General swabs
		<input type="checkbox"/> HATCHERY Hatchery paper
		<input type="checkbox"/> LITTER Litter/faeces

	MATERIAL	EXAMINATION
<input type="checkbox"/>	Blood culture	<input type="checkbox"/> CUBL Bacteriology, aerobic and anaerobic culture (incl. yeasts) (Special blood culture bottle on request (BCBOTTLE))
<input type="checkbox"/>	Other	<input type="checkbox"/> CUAE Bacteriology, aerobic culture
	please specify	<input type="checkbox"/> CUAN Bacteriology, aerobic & anaerobic culture
		<input type="checkbox"/> CUFU Mycology, yeasts & fungi

	EXAMINATION
<input type="checkbox"/>	Faeces
<input type="checkbox"/>	PROFA_SA Diarrhoea Profile A; canine; feline; ferret Enteropathogenic micro-organisms (including differentiation and resistance testing), parasitology (faecal flotation), <i>Giardia</i> SNAP, faecal occult blood
<input type="checkbox"/>	PROFED Diarrhoea Profile B; canine Enteropathogenic micro-organisms (including differentiation and resistance testing), parasitology, (flotation test), <i>Giardia</i> antigen immunoassay, <i>Cryptosporidium</i> ELISA and canine faecal elastase, Faecal Dx™ Antigen Profile (<i>Dipylidium caninum</i> (Tapeworm) Roundworm, Whipworm, Hookworm, <i>Cystoisospora</i>)
<input type="checkbox"/>	CDPP Comprehensive Diarrhoea Profile; canine Canine Enteric Coronavirus CECoV, Canine Parvovirus 2 CPV-2, Canine Distemper virus CDV (qualitative), <i>Clostridium perfringens</i> alpha toxin gene (quantitative), <i>Clostridium perfringens</i> Enterotoxin gene (quantitative), <i>Giardia</i> spp., <i>Cryptosporidium</i> spp., <i>Salmonella</i> spp.
<input type="checkbox"/>	FDPP Comprehensive Diarrhoea Profile; feline Feline Coronavirus FCoV (RNA), Feline Parvovirus FPV (DNA), <i>Tritrichomonas foetus</i> (DNA), <i>Clostridium perfringens</i> alpha toxin gene (DNA, quantitative), <i>Clostridium perfringens</i> enterotoxin gene (DNA, quantitative), <i>Giardia</i> spp., <i>Cryptosporidium</i> spp., <i>Toxoplasma gondii</i> , <i>Salmonella</i> spp.
<input type="checkbox"/>	PHDH Haemorrhagic Diarrhoea PCR Profile, canine Canine Parvovirus 2 CPV-2 (DNA), Canine Circovirus (DNA), <i>Clostridium perfringens</i> E/F toxin gene (DNA, quantitative).
<input type="checkbox"/>	PDP Diarrhoea Profile – Adult Equine Aerobic culture (enteropathogenic micro-organisms + antibiogram), Parasitology (flotation-, sedimentation method), <i>Clostridium difficile</i> Toxin A-Gen (PCR), <i>Clostridium difficile</i> Toxin B-Gen (PCR), <i>Clostridium perfringens</i> alpha-Toxin-Gen (PCR), <i>Clostridium perfringens</i> Enterotoxin-Gen (PCR), Equine Coronavirus (PCR)
<input type="checkbox"/>	PDF2 Diarrhoea profile – Foal Aerobic culture (enteropathogenic micro-organisms + antibiogram), Parasitology (flotation-, sedimentation method), <i>Clostridium difficile</i> Toxin A-Gen (PCR), <i>Clostridium difficile</i> Toxin B-Gen (PCR), <i>Clostridium perfringens</i> alpha-Toxin-Gen (PCR), <i>Clostridium perfringens</i> Enterotoxin-Gen (PCR), <i>Lawsonia intracellularis</i> (PCR), <i>Prescottella (Rhodococcus) equi</i> (PCR), Equine Rotavirus (PCR), Equine Coronavirus (PCR)

	EXAMINATION
	Bacteriology and mycology
<input type="checkbox"/>	CUAN Bacteriology, aerobic & anaerobic - enteropathogenic micro-organisms (<i>Clostridium perfringens</i> , <i>Campylobacter</i> , <i>Yersinia</i> , <i>E.coli</i> & other species-specific pathogenic micro-organisms)
<input type="checkbox"/>	CUFU Mycology (yeasts, culture, quantitative)
<input type="checkbox"/>	HELIP <i>Helicobacter</i> spp. (DNA) PCR
	PARASITOLOGY
<input type="checkbox"/>	PARF6 Faecal flotation incl. <i>Coccidia</i> spp.
<input type="checkbox"/>	LAE <i>Giardia</i> (ag) – Antigen Immunoassay
<input type="checkbox"/>	GIARD SNAP <i>Giardia</i> Rapid Test
<input type="checkbox"/>	GIARSP <i>Giardia</i> spp. PCR ³
<input type="checkbox"/>	KRE <i>Cryptosporidia</i> (ag) – ELISA
<input type="checkbox"/>	CRYPSP <i>Cryptosporidium</i> spp PCR
<input type="checkbox"/>	TREM Trematode egg recovery and identification
<input type="checkbox"/>	MCMFAEC McMaster Nematode Egg Count
<input type="checkbox"/>	SPIRO Identification of <i>Spirocerca lupi</i> eggs
<input type="checkbox"/>	MFCFF Microfilariae concentration; canine & feline filariasis
	Enteropathogenic virus
<input type="checkbox"/>	FCPVP Canine Parvovirus-2 PCR (DNA)
<input type="checkbox"/>	FCVP Coronavirus, feline enteric FCoV PCR
<input type="checkbox"/>	FPVP Feline Parvovirus PCR (DNA)
<input type="checkbox"/>	EMFAE General virology (electron microscopy)
	Other examinations (faeces)
<input type="checkbox"/>	ELA Elastase – ELISA (canine only)
<input type="checkbox"/>	OCC Occult blood

Antibiograms come standard when pathogenic organisms are grown
This list is not exhaustive. Please refer to the Directory of Services for a full list of diagnostic tests.
Please use the submission form "Molecular diagnostics" for further PCR tests