



Virus Diagnostic Laboratory Request Form

1. CLIENT INFORMATION

Submitter / Client Name	Company Name (If Applicable)
Mailing Address	State & Zip
Daytime Phone Number	E-mail Address (Test results will be emailed unless otherwise requested)
Date Submitted	Signature (Please see terms and conditions below)

IN OBTAINING THESE SERVICES THE CLIENT AGREES:

- i. To pay for said services in full at CPCNW-VDL prices in effect on the date of the submission of this testing request. An invoice for services will be issued by the CPCNW-VDL within 30 days of the completion of the tests requested. The Client is responsible for said payments within ten business days of receiving the invoice.
- ii. That a positive or negative result for a known virus is accurate within the limits of the diagnostic test, state of knowledge of the pathogen, and sensitivity of the platform used. The CPCNW makes no assurances about the status of new or novel viruses.
- iii. Should submitted materials provided be found to contain a quarantine pest or select agent as defined by either WSDA or USDA-APHIS, the CPCNW shall report its presence to the appropriate agency.

2. SAMPLE INFORMATION

Sample No.	Species / Common Name	Type of Material Submitted (please describe)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Please follow the tissue sampling and preparation instructions on the CPCNW website (<http://cpcnw.wsu.edu>), and send or deliver samples to: CPCNW/WSU-Prosser, 24106 N Bunn Rd, Prosser, WA 99350



CPCNW

3. VIRUS DIAGNOSTIC TESTS REQUESTED

The Client requests the following virus diagnostic tests to be conducted in the plant material submitted (please select one):

- Complete Virus Test Panel:** The CPCNW-VDL will conduct molecular diagnostic testing, either ELISA or PCR for all viruses and viral-like pathogens listed for that commodity on the CPCNW-VDL website.
- 'Canary' Virus Panel:** The CPCNW-VDL will conduct testing for a limited number of 'Canary' viruses and viral-like pathogens listed for that commodity on the CPCNW-VDL website.
- Targeted Virus/Disease Testing:** The CPCNW-VDL will conduct testing for specific virus(es) or virus-like pathogen(s). Please list the pathogens to be tested for below.

Virus species to be tested for
1.
2.
3.
4.
5.

- High-Throughput Sequencing:** The CPCNW will prepare and submit samples for high-throughput sequencing, and will analyze the data once sequenced for the presence and identify of known and novel viruses. Please contact CPCNW before submitting HTS samples.

CPCNW-VDL USE ONLY

Diagnostic tests performed by	Tests completed on (date)
Pathogens identified	
Results reviewed by / date	Results reported to client on (date)
<i>CPCNW Staff: Please attach completed diagnostic protocol sheets to this form, and ensure that Virus Diagnostic Laboratory Manager or CPCNW Director has signed above before filing.</i>	