

Data sheet for Influenza sample collection

1. **Date of specimen collection**..... **Time**.....

2. **Sample collection site** Mukdahan, Thailand
 Savannakhet, Lao PDR
 Quang Tri, Vietnam

3. **Collection place and type of samples**

Fresh market

Dead Chicken

Cloacal swab..... samples Tracheal swab..... samples

Dead Duck

Cloacal swab..... samples Tracheal swab..... samples

Slaughter house.....

*Slaughter house can be defined as the place for killing the chicken and duck, even themselves.

Live Chicken

Cloacal swab..... samples Tracheal swab..... samples

Live Duck

Cloacal swab..... samples Tracheal swab..... samples

4. **Total number of collected specimens****samples**

5. **Sample collection by:**

Signature.....

(.....)

Date:

Data sheet for Influenza processing and isolation

Date of sample collection..... Time of sample collection..... Country.....

No.	Pre-identified sample code	Place	Chicken /Duck	Type of sample CS/TS	Pre-identified samples				Post-isolation samples						Remark
					Total volume of VTM (ml)	Aliquot (µl)	No. of Tubes	Storage condition	Egg No. 1		Egg No. 2		Egg No. 3		
									days	HA titer	days	HA titer	days	HA titer	
Ex	STFCCS001-201114	Fresh market	Chicken	CS	2.2	500	4	-80 °C	7	256	7	128	7	64	
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															

1st Letter: S=Specimen, I= Isolate
 2nd Letter: T=Thailand, L=Lao PDR, V=Vietnam
 3rd Letter: F=Fresh market, S=Slaughter house
 4th Letter: C=Chicken, D=Duck
 5th Letter: CS=Cloacal swab, TS= Tracheal swab
 6th Order: 001=Sample number 1
 7th order: Day-Month-Year

Sample recipient by:

 (.....)
 Date:

Sample processing by:

 (.....)
 Date:

Sample Isolation and HA by:

 (.....)
 Date:

Data sheet for Influenza positive sample and subtyping

No.	Pre-identified sample code	Post-identified sample code	from Egg No.	Storage				RT-PCR screening result (influenza A positive or negative)	Influenza subtyping		Remark
				Total volume of VTM (ml)	Aliquot (µl)	No. of Tubes	Storage condition		HA subtype	NA subtype	
Ex	STFCCS001-201114	ITFCCS001-201114	1	10	1,000	10	-80°C	positive	H6	N1	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

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7th order: Day-Month-Year

Influenza subtyping by:

 (.....)
 Date:

Result validated and approved by:

 (.....)
 Date: