

SUBMISSION FORM FISH

Submission number

Sperimentale delle Venezie						
INVOICE DETAILS Mandatory data if test(s) are either charged to private customer or a business*		OW	OWNER DETAILS			
BUSINESS NAME		NAME AND SURNAME				
ADDRESS		ADDRESS				
TOWN/CITY	POSTAL CODE PROVINCE	TOWN/CITY	POSTAL CODE PROVINCE			
VAT NUMBER **		TELEPHONE				
TAXPAYER NUMBER/ID NUMBER	t	E-MAIL				
TELEPHONE NUMBER						
E-MAIL						
* It is sufficient to fill in the "Bu	siness Name/Sender's name" box only if already re		atory only if the customer has a VAT number.			
	REC	ORDER DATA				
NAME AND SURNAME	ADDRESS					
TOWN/CITY	POSTAL CODE PROVINCE TELEP	HONE/FAX E-MAIL				
Terms of payment	SPECIFIC TEST PLAN/AGREEMTN/PERIODIC INV	OICING PagoPA				
Results delivery mo	de if other than online		www.izsvenezie.it			
AT THE LABORATORY	☐ VIA LAND MAIL:	E-MAIL:	FAX:			
Results have to be sent to:						
☐ RECORDER ☐ OWNER ☐ BUSINESS/FARM ☐ OTHER:						
	SAM	MPLING SITE				
BUSINESS/FARM COD						
Mandatory only for registered fis						
□ HATCHERY		FAF	RMED SPECIES			
☐ ON GROWING FARM		□ RAINBOW TROUT	□ CAT FISH			
☐ PUT AND TAKE FISHER	RY	□ BROWN TROUT	□ SEA BREAM			
☐ FISHING VALLEY		□ MARBLE TROUT	□ SEA BASS			
□ WILD FISH		□ CARP	- ELL			
□ OTHER:		□ OTHER:				
SAMPLE INFORMATION						
SUBMITTED SAMPLE(S):	□ Live animals n° □ Carcasses n	° □ Organs:				
□ Blood/Serum		□ Other:				
IDENTIFICATION OF SUBMITTED SAMPLES:						
SPECIES:		AGE:	MORTALITY RATE (%):			
DIAGNOSTIC SUSPICION: DATE OF FIRST EPISODE:						
WATER TEMPERATURE (C°):		OXYGEN (PPM):	OXYGEN (PPM):			
SYMPTOMS:	□ abnormal swimming □ pop eyes	□ enophthalmos □ melano	sis □ apathy			
□ skin lesions	□ Other: □ gills damage					

REQUESTED ANALYSES						
DIAGNOSTIC TESTS	I L L L L L L L L L L L L L L L L L L L		OGICAL TESTS			
T NECROSCOPY/ANATOMORATHOLOGICAL SURVEY		QUALITATIVE PARASITOLOGICAL TEST - PARASQL (optical microscope)				
□ SPECIES IDENTIFICATION – IDITT (PC	CR + sequencing) ANIS	AKIDAE - ANIAU+ANIDE (necroscop	py+artificial digestion method)			
` ' '		NISAKIDAE identification - ANISPCR (RFLP)				
HISTOLOGICAL/BACTERIOLOGICAL TESTS		HEMATOLOGICAL/SEROLOGICAL TESTS				
□ MICROBIOLOGICAL TESTS - BATREE		□ VIRAL HAEMORRHAGIC SEPTICAEMIA (VHS) ANTIBODIES - VHS/A (SN) □ INFECTIOUS HAEMATOPOIETIC NECROSIS (IHN) ANTIBODIES - IHN/A (SN)				
□ ANTIBIOGRAM - ANTI (antibiogram)	□ VIRAI	URAL ENCEPHALOPATHY AND RETINOPATHY ANTIBODIES - ERV/A (SN)				
HISTOLOGICAL TEST - ISTO (histologi	ical test) □ PLOII	□ PLOIDY DIAGNOSIS - PLOIDIA (flow cytometry)				
□ IMMUNOHISTOCHEMISTRY- IHC (Immunohistochemistry)	□ VIRAI	L ENCEPHALO - RETINOPATHY AN	NTIBODIES - ERV/ELI (ELISA)			
□ OTHER:	□ OTHE					
		RON MICROSCOPY				
UROLOGICAL TEST - VIRME (electron	127	0T0/D10M01 F001 AD TF0T0				
A CURENCE DE PROVINCIO A COMO DE		STS/BIOMOLECOLAR TESTS				
□ ACIPENSER IRIDOVIRUS ACIV (rPCR)						
□ CARP EDEMA VIRUS CEV/RTPCR (
□ CATFISH VIRUS IPG/V (virus isolation)						
□ CYPRINIDS HERPES VIRUS - CYHVPCR (nested PCR)						
□ EEL HERPES VIRUS - HVAVIR (virus isolation)						
□ KARPA KOI HERPES VIRUS - KHV/VR	PCR (rPCR)					
□ INFECTIOUS HAEMATOPOIETIC NECROSIS VIRUS - IHNPCR (RTrPCR)						
□ INFECTIOUS PANCREATIC NECROSIS VIRUS - IPN/V (virus isolation)						
□ INFECTIOUS PANCREATIC NECROSIS VIRUS - IPN/VPCR (RTrPCR)						
□ SPRING VIRAEMIA OF CARP VIRUS -	SVC/V (virus isolation)					
□ SPRING VIRAEMIA OF CARP VIRUS - SVC/VPCR (rPCR)						
□ TILAPIA LAKE VIRUS - ARTILVPCR (R	RTrPCR)					
UROLOGICAL TEST - VIR (virus isolati	ion)					
UVIRAL HAEMORRHAGIC SEPTICEMIA	(VHS) VIRUS - VHSPCR (F	RTrPCR)				
URAL ENCEPHALO - RETINOPATHY	VIRUS - ERV/VVIR (virus iso	olation)				
UIRAL ENCEPHALO - RETINOPATHY VIRUS- ERV/VPCR (PCR)						
UIRAL ENCEPHALO - RETINOPATHY GENOTYPING VIRUS - ERV/VGEN (RTPCR)						
□ OTHER						
	credia.it) for a complete list of the acc	redited tests. All samples are destroyed after co	and the price list referring to the service fees (Tariffario – Price mpletion of a test, except for those cases regulated by specific from www.izsvenezie.it			
as "IZSVE"), with offices at 35020 Legnaro (PD), Vial particular, data will be processed only by staff members with Article 37 GDPR (RPD/DPO). Categories of data a by the IZSVe and will be used to start and manage the acceptance of samples, reporting and invoicing. Persor carried out both on paper and electronically. Legal bas as well as on the legitimate interest of IZSVe. Obligatio concerned to carry out the actions foreseen by data pr Rights of the individual concerned: the Party concerne	e dell'Università 10, Italy, fiscal code s belonging to the IZSVe facilities conc and sources: common data, personal a e relationship between the IZSVe and nal data are also processed for perforr is for the processing: processing is bar n. the provision of data is mandatory. occessing activities. Data recipients: a d may exercise his rights to access, r a complaint to the Data Controller (or	and VAT n. 00206200289, represented by Gen verned. The IZSVe Data Controller (Data Protectic and identification data. All data arise from the Pa the Party concerned in order to allow the applica ning all the legal, tax and contractual obligations sed on the consent expressed through the volunta Failing this, IZSVe cannot perform the activity rela Il data may be communicated to subjects specific atify, cancel, limit, to guarantee portability and op CDPO). relationship whenever the applicant belie	ICO SPERIMENTALE DELLE VENEZIE (hereinafter referred to ceral Manager, tel. 0498084242, email dirgen@izsvenezie.it. In on Officer) can be contacted at dpo@izsvenezie.it in compliance or you cartivities related to access the IZSVe facilities to carry out activities related to connected to the aforesaid relationship; data processing will be any provision of data, on the fulfillment of a contractual obligation ated to data processing and, therefore impossible for the person cally appointed by IZSVe or kept until the consent is withdrawn position by communicating his intention via email to IZSVe. eves that EU Regulation 2016/679 has not been complied with			
Urgent analyses and/or need to	receive partial results	S				
☐ URGENT ANALYSES: ☐ ANALYSES TO INCLUDE IN PARTIAL REPO	DRTING:					
Temperature at delivery: (To be filled in by IZSVe)	ROOM TEMPERATURE	REFRIGERATED°C	□ FROZEN/DRY ICE			
Sampling date	Delivery date	Client Signature	IZSVe operator Signature			