

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

APPLICATION TO CONDUCT LABORATORY EQUINE
INFECTIOUS ANEMIA (EIA) TESTING

This document serves as a reference point to begin the application process for APHIS VS approval of a laboratory to conduct EIA testing. Include the requirements in VS 15201.1 in your responses.

1. Describe anticipated client base (*check all that apply*).

- Veterinary Practice Specific Sales Barn Regional University Statewide National

2. Describe anticipated hours of operation and staffing plan.

3. State the anticipated annual number of samples to be tested.

4. Are there plans for mobile or satellite laboratory testing?

- Yes No

5. Describe proposed operational start date and training plans for personnel.

6. Describe the proposed laboratory space or plans for creating the proposed laboratory space.

7. List attached documentation (*e.g. photographs or plans*), as appropriate, of the proposed facility laboratory space.

8. By signing below I am acknowledging the requirements and regulatory obligations inherent in the operation of an EIA testing laboratory; they include, but are not limited to:

- a. Facility requirements;
- b. Personnel and training requirements;
- c. Proficiency testing requirements;
- d. Testing only acceptable samples, accompanied by official forms, and submitted by accredited veterinarians;
- e. Prompt referral of non-negative samples to NVSL;
- f. Prompt and accurate reporting; and
- g. Inspection requirements.

In addition, I am acknowledging familiarity with VS Guidance 15201.1 Laboratory Approval to Conduct EIA Testing and discussions with the APHIS Associate District Director or State Animal Health Official or both.

Some or all of these requirements may incur costs to be borne by the laboratory.

Laboratory Name:	Laboratory Physical Address:
Laboratory Telephone Number(s):	
Laboratory Email Address(s):	
Laboratory Director Name:	
Laboratory Director Signature:	Date Signed: