



You absolutely **MUST** call 706 247 6274 *before* shipment occurs.

KOILAB SUBMISSION FORM -

Please fill this out in faxable, legible, dark writing or type.

YOUR NAME

YOUR ADDRESS

CITY

STATE

ZIP

PHONE

CELL

FAX

EMAIL

NOTES:

This Form **MUST** Be included in the materials you send to KoiLab

Press CTRL+P to print this form. This is a **required** form to send with your specimens.

[How to ship fish](#) | [Koi Herpes Virus Testing](#) | [Organ Harvest](#) | [Services](#) | [Overview Simplified](#) | [Test Request Form](#) | [Warning and Disclaimer](#) | [Exactly WHEN to ship](#) | [Exactly WHERE to Ship](#) | [Who IS KoiLab?](#) | [Why Choose KoiLab?](#) | [Home Page](#)

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THIS IS A REQUIRED FORM - THIS FORM MUST BE PACKAGED WITH YOUR SAMPLE AND INCLUDED IN YOUR PACKAGE SENT TO KOILAB

CASE HISTORY FORM

1. HOW LONG HAVE YOU BEEN KEEPING FISH?
2. HOW MANY FISH ARE AFFECTED?
3. HOW MANY FISH ARE IN THE SYSTEM WITH THE AFFECTED FISH?
DID YOU GET ANY NEW FISH?
4. WHEN?
5. DID YOU QUARANTINE THE NEW FISH FOR AT LEAST 21 DAYS?
IF NOT, WHY NOT?

RECENT RECORDED TEST RESULTS (Numeric results, not "Okay" or "Normal" because then we know you didn't test.)

- Ammonia
- Nitrite
- Nitrate
- PH
- Carbonates

IS THE WATER AMBER OR TANNIN-STAINED?

HOW OFTEN DO YOU DO WATER CHANGES?

HOW MUCH DO YOU CHANGE AT A TIME?
WHEN WAS THE LAST WATER CHANGE?

ARE THERE PLANTS IN THE POND?

IS THE GRAVEL IN THE POND?

WHAT KIND OF FILTRATION IS THERE?

IS THERE A UV ON THE SYSTEM?

HOW MANY GALLONS OF WATER ARE IN THE SYSTEM?

HOW MANY TOTAL INCHES OF FISH ARE IN THE SYSTEM?

HOW WOULD YOU DESCRIBE THE FISHES' SYMPTOMS?

HAVE YOU TRIED ANYTHING?

IF SO, DESCRIBE TREATMENT, YOUR TECHNIQUE, AND RESULTS IN DETAIL.

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