



Contagious Equine Metritis (*Taylorella sp.*) Information Sheet

TESTING DETAILS

1. Veterinarians are required to follow USDA requirements for sample collection & shipment (http://www.aphis.usda.gov/import_export/animals/animal_import/equine/equine_import_cemcountry731days.shtml)
2. USDA determines “Import” requirements; contact destination country for “Export” requirements
3. All submissions for CEM testing are considered **OFFICIAL**; results will be reported to CDFA and USDA
4. CAHFS can provide Amies charcoal swabs at no charge; submitter must pay for shipping
5. Cost of culture: \$40.00 per swab tested; payment should be included with samples. Make checks payable to “**U.C. Regents**” or call 530-752-4613 to pay by credit card

SAMPLING INFORMATION FOR IMPORT:

1. Samples MUST be collected in **Amies Charcoal** swabs for shipment
2. Individual samples for import must be collected from each site
 - a. STALLIONS (collected once) have 4 sample sites: urethral orifice, urethral diverticulum, urethral fossa, prepuce
 - b. MARES (collected 3 times within 12 days) have 3 sample sites: clitoral fossa and clitoral sinus (from all three collections); cervix/endometrium (from the third of three collections)
3. Place culture swabs on ice packs or in refrigerator ASAP
4. Use CAHFS CEM submission form on page 2 of this document—fill out completely or samples may be rejected

SAMPLING INFORMATION FOR EXPORT OR SCREENING:

1. Samples MUST be collected in **Amies Charcoal** swabs for shipment
2. Individual samples must be collected. Pooling of samples will not be accepted. Contact destination country for “Export” requirements. For screening, contact your veterinarian.
3. Place culture swabs on ice packs or in refrigerator ASAP
4. Use CAHFS CEM submission form on page 2 of this document—fill out completely or samples may be rejected

SHIPPING INFORMATION

1. Samples must arrive chilled within 48 hours of collection
2. Ship overnight with enough ICE PACKS for samples to arrive cool
3. Do NOT use U.S. Mail for shipping samples
4. Send to the CAHFS DAVIS lab only
5. Shipped samples are accepted for testing at CAHFS Davis **Monday through Friday only**

REPORTING INFORMATION

1. Submitters will be notified ASAP if samples are unsuitable for testing or are contaminated with bacteria which inhibit the recovery of *Taylorella sp.*
2. Cultures that are suspicious for *Taylorella sp.* will be sent to NVSL for final confirmation. Submitters will be notified when suspect cultures are sent.
3. Results will be finalized as negative after 7 days (at the earliest)



CAHFS Accn. # _____
 Rec'd by _____
 Case Coordinator _____
 Program CEM-CEH CEM-Not CEH
 # of Samples _____
 Date Rec'd _____
 Section _____
 Bill To CEH Submitter
 Carrier _____

Contagious Equine Metritis (CEM) Submission Form

SAMPLES MAY BE REJECTED IF THIS FORM IS NOT COMPLETELY FILLED OUT

Payment Received

Veterinarian's Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____
 Report by Fax E-Mail
 # or address _____

Horse Location/Collection Site:
 Address _____
 City _____ State _____ Zip _____
 County _____

Owner's Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____

Horse Information:
 Name _____
 Registration _____
 Breed _____
 Age _____ Sex _____ Color _____
 Markings _____

Report to: USDA (000895) Fax: (916) 363-1125

**Samples must be submitted in Amies transport medium with charcoal and shipped on ice packs.
 Samples must be received at the Davis Lab within 48 hours of collection. Pooling of samples is not allowed.**

IMPORT: Country Of Origin: _____

Collection Date _____ Time _____
 Stallion: _____ Billing: _____
REQUIRED CULTURE SITES
 _____ 1. Prepuce
 _____ 2. Urethral orifice/distal urethra
 _____ 3. Urethral fossa
 _____ 4. Urethral diverticulum

Mare: _____ Billing: _____ Set _____ of _____ 3
REQUIRED CULTURE SITES
 _____ 1. Clitoral fossa
 _____ 2. Clitoral sinus

INCLUDE WITH ONE SET ON OPEN MARES
 _____ 1. Distal cervix/endometrium

EXPORT: Horse/Semen exported to: _____

Collection Date _____ Time _____
 Stallion: _____ Billing: _____
CULTURE SITES:

Mare: _____ Billing: _____
CULTURE SITES:

SHIP SAMPLES TO: CAHFS, Davis
 University of California, Davis
 620 W. Health Sciences Drive
 Davis, CA 95616
 General Info: (530) 752-8700
 FAX: (530) 752-6253

PAYMENT IS REQUIRED WITH EACH SUBMISSION
 Cost of testing is **\$ 40.00** per sample site.
Make Checks payable to: UC REGENTS
or call 530-752-4613 to pay by credit card

I understand that specimens submitted are the property of CAHFS. Client information provided to CAHFS, and the test results from samples submitted to CAHFS, will be treated as confidential information consistent with applicable legal standards, including, but not limited to, California Business and Professions Code section 4857 and Evidence Code section 1040. Such confidential information will not be divulged to third parties without written consent of the client, except when required by law, which includes requirements that test results be provided to regulatory agencies.

University, its officers, employees, and agents shall not be accountable for any loss, expense (including attorneys' fees), damage, or liability of any kind resulting from or arising out of services provided hereunder unless caused by negligent or willful acts or omissions by University, its officers, employees, or agents.

Signature of Submitter _____

Date _____