






GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-13259654	
This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory — GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11. Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
SERIAL NUMBER EIA-13259654	DATE SIGNED 2018-03-14	LAB/ACCESSION NUMBER ATCH00290297	COUNTY		
NAME & ADDRESS OF OWNER Reva Danzig 752 Clark Rd. Cutter, OH 45724 Phone: 740-551-9440 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Elizabeth Gorrell PO Box 1052 Conway, SC 29528 Phone: 843-340-9461		NAME & ADDRESS OF STABLE/MARKET Nikki Graham 14780 Highway 19 Nichols, SC 29581 Phone: 843-902-4637 PIN/LID: /	
VETERINARY LICENSE OR ACCREDITATION NO. Vet License State, OH, NOT found / 078481		TEST TYPE AGID	REASON FOR TESTING Annual		
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.					
SYNOPSIS OF FEDERALLY ACCREDITED VETERINARIAN  Elizabeth Gorrell 2018-03-14 15:43:10 -05:00			SIGNATURE NAME Elizabeth Gorrell	DATE BLOOD DRAWN 2018-03-13	
CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.					
SIGNATURE OF OWNER OR OWNER'S AGENT			SIGNATURE NAME Reva Danzig	SIGNATURE DATE 2018-03-14	
NAME OF HORSE Greymeadow's Can Do Katee	ID1 Barn Name: Peanut	ID2	ID3		
COLOR Flea Bitten Grey	AGE OR DOB 2007-01-01	BREED Welsh Pony	GENDER Female		
					
NARRATIVE DESCRIPTION:					
HEAD: Central whorl			OTHER MARKS AND BRANDS: /		
LEFT FORELIMB:			RIGHT FORELIMB:		
LEFT HINDLIMB:			RIGHT HINDLIMB:		
RARE VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN Sean Jones	TUBE NUMBER 101133987-1	DATE RECEIVED 2018-03-14	DATE REPORTED 2018-03-15	TEST RESULTS Negative	
TEST REMARKS					
LABORATORY Antech Diagnostics, Inc. - Atlanta 4895 S. Atlanta Rd Smyrna, GA 30080			SIGNATURE OF TECHNICIAN  Sean Jones 2018-03-16 10:11:35 -05:00		