Avian DNA Testing

Blood Collection Procedure

Please follow the steps below to collect blood for an avian DNA test. When collecting blood, use caution to avoid DNA sample cross-contamination and/or bird infection. Avoid touching the circle on the Avian Blood Sample Card where the blood is to be placed. If you are collecting samples from more than one bird, you should sanitise the nail clippers with alcohol and wash your hands thoroughly between each collection. Additional blood cards can be downloaded and printed from our website.

1. Label Each Avian Blood Sample Card to be Used

Before you start collecting the samples, label each Avian Blood Sample Card to be used with the submitter's name, species of bird collected, and a Bird ID. The Bird ID can be the bird's name, band number, or cage number. Use the same Bird ID on the Avian DNA Sexing Submission Form so that you can match the final DNA results to the correct bird.

2. Clip Toenail to Obtain a Blood Sample

With the bird under control, examine the toenail to ensure it is clean. A swab of alcohol can be used to clean the area, if necessary. Use a sanitized pair of nail clippers to clip the bird's toenail just enough to nick the vein (approximately 2/3 of the distance from the root of the nail) and produce blood flow. **See illustration.**

3. Spot Blood on the Blood Card

Remove the first bead of blood with a swab or absorbent cotton ball and discard. Next, carefully touch the Avian Blood Sample Card to the blood flow and absorb a few drops of blood onto the card. If the blood flow is slow, gently squeeze on the toe with a pumping action. It is not necessary to completely fill the circle on the card with blood; just be sure to collect enough blood to be visible (usually 1-3 drops of blood).



4. Allow the Blood Sample to Air Dry Completely

Once the sample has been collected, set the Avian Blood Sample Card aside to air dry on a clean surface. Check that the bird is no longer bleeding before returning it to its cage. To stop further bleeding, apply a coagulant, such as Kwik Stop, to the area. Cornstarch, flour, or baking soda may also be applied as alternatives.

Allow the card to air dry completely by leaving it at room temperature for 60-90 minutes. Once the card is completely dry, insert it into an envelope or small resealable plastic bag. Use one envelope or bag for each sample collected. Avoid touching the blood sample area while handling the card. Storage of blood cards in plastic, especially when cards are not completely dry, may lead to bacterial and fungal growth, which could render the sample unusable. Mail the sample to us as soon as possible after collection.

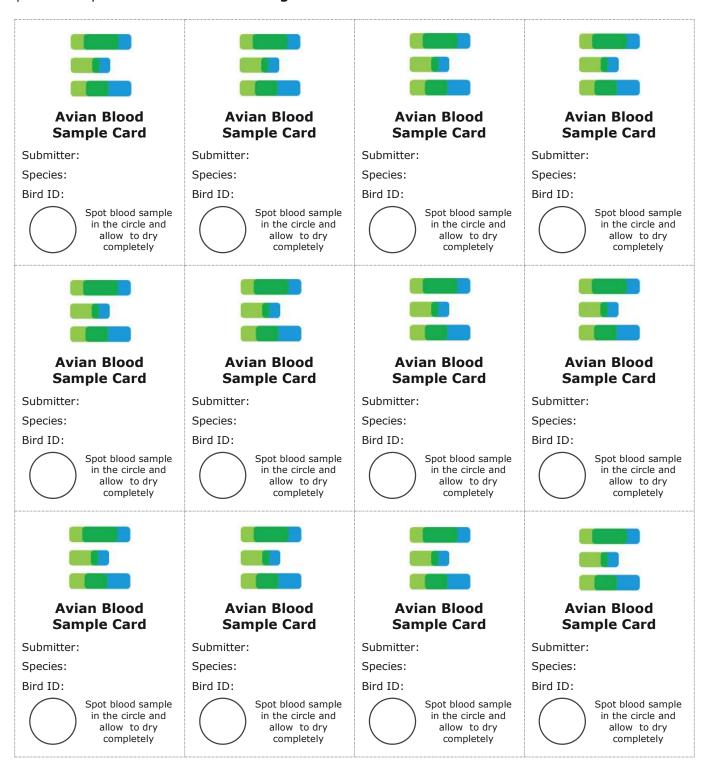
5. Fill Out the Avian DNA Sexing Submission Form

Complete the accompanying Avian DNA Sexing Submission Form with the submitter's information, information about each bird including Bird ID, and payment information. Place the individually sealed samples together with the completed submission form inside an envelope and mail to us at the address below.

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Blood Sample Cards

These cards can be used for Avian DNA Testing. Simply print on any ink jet or laser printer and cut along the dotted lines to separate the individual cards. Please refer to the **Avian Sample Collection Procedure – Blood Collection** document for instructions on sample collection. Also, please complete the **Avian DNA Sexing Submission Form**.



Avian DNA Testing

Submission Form

Please complete using **black** ink and BLOCK CAPITALS.

Section	1 1 – Submitter's II	nformation			
Organisat	tion (if applicable):				
Name:					
Address:					
Town/City:			County:	Post Code:	
Phone:			Fax:	·	
Email:			Website:	Website:	
Section	n 2 – Sample Infori	mation			
Sample	Species (required)		Name / ID of Bird (bird	Name / ID of Bird (bird's name, cage no., band no., etc.)	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
	n 3 – Payment Info	rmation			
Amount:			eque (payable to General Genetics Co	orporation) Card (see below)	
☐ Visa ☐ Visa Debit / Delta ☐ Visa Electron ☐ MasterCard				Expiry Date:	
Card No:				CVC No	
Billing Address:				(last 3 digits on reverse):	
Town/City:			County:	Post Code:	
Cardholder's Signature:			Date: / /		
Section 4 – Agreement			Additional Kits		
I hereby certify that the information provided on this form is correct and true to the best of my knowledge, and I affirm that the DNA sample was collected and labelled properly. I understand that all test results and documentation will be provided to only me, unless otherwise specified.			and (leave blank if not applicable	Number of additional kits required: (leave blank if not applicable)	
Signature:					
Date: / /					
Notes					
• Please [OO NOT send cash and che	eques in the post as	we do not accept these types	s of payments. Order your test	
	nd use one of our paymen		to carry out payment. number to ensure timely del	iverv.	