

Tuberculin PPD Users and Distributors – Helpful Information

Caudal Fold Tuberculin – Reagent Codes 131-B1, 131-B5, and 131-B10

1. Orders are usually processed within 2-3 business days.
2. We do not ship orders on Fridays.
3. Orders are shipped via Federal Express overnight delivery.
4. The VS Form 4-9 order form must be completed and may be found at https://www.aphis.usda.gov/library/forms/pdf/VS_Form4_9.pdf
5. Each order requires a completed Supplemental Form (included)
6. Orders must be faxed or emailed to: 515-337-7402 or nvsl_concerns@aphis.usda.gov. Please do not send orders to Teresa M. Sigafoose-Grimm or Randy Capsel. This will ensure that your order gets received and processed in a timely manner.
7. We will make every effort to provide you with your requested items. In the event that you do not receive exactly what you requested, it will be due to the following:
 - a. Short dated inventory – if we have product in stock that is short dated, we will distribute that product first so that it is not wasted. The 1ml, 5ml, and 10ml vials all contain the same product (*Mycobacterium bovis* strain AN5 PPD at a 1.0 mg/ml concentration). The PPD is acceptable for use up until the day it expires.
 - b. Decreased inventory
8. If you have any questions, please contact me at Teresa.m.sigafoose@aphis.usda.gov

Thank you



Teresa M. Sigafoose-Grimm
Microbiologist
Brucella and Mycobacterium Reagents Team
Hemoparasitic Reagents Unit
USDA APHIS VS National Veterinary Services Laboratories
1920 Dayton Ave. Ames, IA 50010



Supplemental Tuberculin Product Reagent Request Form

United States Department of Agriculture

Animal and Plant Health Inspection Service

Veterinary Services

National Veterinary Services Laboratories

1920 Dayton Avenue
P.O. Box 844
Ames, IA
50010

(515) 337-7151
FAX (515) 337-7284

A supplemental tuberculin product order form is being required to better allow the NVSL Brucella and Mycobacteria Reagent Team staff to evaluate the quantity of tuberculin PPD required and possible vial volume best suited for scheduled testing. The table to the right may assist in calculating the vial size and quantity to order. Please complete the information below and email this form along with the VS Form 4-9 directly to the NVSL User Fees Group at nvsl_concerns@aphis.usda.gov or fax to (515) 337-7402. If questions arise, please feel free to contact: Teresa M. Sigafoose-Grimm at: Teresa.M.Sigafoose@aphis.usda.gov. Please continue to follow the same instructions when submitting to NVSL the required reagent request form (VS Form 4-9). Thanks!!

Average Number of tests per vial	
131-B10	75-80
131-B5	35-40
131-B1	5-6
31-BAL	5-6
30-BAL	5-6
31-CER	15-17
131-B-caudal fold M. bovis PPD for bovine testing	
31-CER-double strength cervical M. bovis PPD – For use only by Federal/regulatory veterinarians	
31-BAL & 30-BAL – For use only by Federal/regulatory veterinarians	

This form will be required for all tuberculin orders. Please only order enough tuberculin for a 3 MONTH SUPPLY.

# Animals To Test	¹ Scheduled Testing Dates	² Past Use History	Date Reagent Required By	Comments

¹ Scheduled Testing Dates – Known dates when testing will be conducted

² Past Use History - To be completed when Scheduled Testing Dates are Unknown. Based off of product distribution from last order

Current inventory on hand

131-B10		31-CER	
131-B5		30-BAL	
131-B1		31-BAL	

Requested By (Printed Name): _____

NAN#: _____ Phone: _____

Email: _____

Signature: _____ Date: _____



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