

For Office Use:

Sample Submission Form Sheep



SR002

Phone: 07 849 6010

1344 Te Rapa Road

MilkTestNZ Unique Reference Number:								
Client Details								
Company Name		Submitter						
Company to Charge to		Phone						
Purchase Order Number		Dispatched Date						
Reference Number		Chilly Bin to be Returned?						
Email Addresses to Send Results								
Additional Comments								

Samples must be accompanied by a submission form. Submission forms that are filled out incorrectly will not be processed until they are corrected or clarified. Samples under query will be disposed of after 48 hours

Please refer to the information on page 2 and 3 to fill the table below.

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Sample Submission Details									
No.	No. Sample ID	Sample Date	Sample Type				Testing Requirements	For Office Use:	
		cample Date	L1	L2	L3	L4	Please list Test Numbers	Internal Reference ID	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

For Office Use:							
Chain of Custo	dy Details	Result Reporting Details					
Received by		Date	Tests	Technician	Invoiced	Scanned	
Date Received							
Time Received							
Number of Samples							
Temperature on Arrival							



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Approved customers only. Contact Sales Operations to register as a customer before sending samples

Our Terms of Trade can be found on our website (www.milktest.co.nz)

Sample Type Builder									
L1		L2		L3		L4			
Sheep	S	Milk	М	Skim	S	Raw	R		
Water	W	Cream	Cr	Whole	W	Pasteurised	Р		
		Colostrum	Co			Powder	Pow		
	Anhydrous Milk Fat		AMF						
Slurry		S							

Samples should be chilled not frozen. Please enquire before submitting frozen samples

		Д	vailable Tests				
Analytical/Reference Testing							
Test #	Test Name	Sample type restrictions					
13	Somatic Cell Count only	30 mL	Individual sample required (cannot be split for other testing)	Raw milk only			
11	Freezing Point only (Cryoscope)	5 mL	Individual sample required (cannot be split for other testing)	Raw milk only			
251	Fat (Roese Gottlieb)	10 mL					
252	Protein (Kjeldahl)	5 mL					
253	Lactose (HPLC)	1 mL					
254	Total Solids (Gravimetric)	3 mL	Reference method tests can be carried out from singular sample. Cannot be split for micro testing				
259	Solid Non-Fat (SNF)	N/A					
260	NCN (Kjeldahl)	15 mL					
261	NPN (Kjeldahl)	15 mL					
		-	Micro testing				
3	Bacterial Estimate (SPC)	3 mL					
33	Bacterial Estimate (SPC Neat)	3 mL	Pasteurised, Raw Milk for Consumption	Raw and pasteurised milk			
32	Bacterial Estimate (Petrifilm)	3 mL					
4	Coliforms	10 mL		Raw milk only			
34	Coliforms Neat	3 mL	Pasteurised, Raw Milk for Consumption	Raw and pasteurised milk			
5	Thermodurics	10 mL		Raw milk only			
8	Foreign Matter/Sediment	37 mL	Individual sample required (cannot be split for other testing)				
10	Senses	15 mL	Can be tested alongside Foreign Matter/Sediment	Raw milk only			
17	Sulphite Reducing Clostridia (SRC)	10 mL		Raw milk only			
84	E. coli in Water Presence/Absence	100 mL		Water only			
		Inhibito	ory Substance Testing				
9	Inhibitory Substances (Screening) – Delvo T	2 mL	Screening test to detect presence of Inhibitory Substances (e.g. Antibiotics or detergent residue)	Raw milk only			
65	Inhibitory Substances – Estimated Concentration	2 mL	Confirmation of a detected result from screening or suspected presence	Raw milk only			
173	Standard Antibiotic Residue Suite (LC-MS/MS)	2 mL	Identification and concentration of Antibiotic present in sample - NZ Antibiotic suite				
174	Australian Antibiotic Residue Suite (LC-MS/MS)	2 mL	Identification and concentration of Antibiotic present in sample - Australian Antibiotic Suite				



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Specialty/Residue Testing								
Test #	Test Name	Volume	Information about Test	Sample type restrictions				
126	Beta-Lactamase	5 mL						
175	Chlorhexidine	2 mL						
21	DDE	5 mL	Fat result is required for testing	Raw milk only				
210	Fatty Acids	5 mL						
6	IgG (HPLC)	5 mL						
360	Titratable Acidity	20 mL						
30	Aflatoxin	5 mL						
219	Bismuth	5 mL						
45	Detergent Residue Suite	5 mL						
19	lodine	5 mL						
149	Lactulose	5 mL/10 g						
147	Furosine	5 mL/10 g	Protein result is required for testing					
155	Minerals / Heavy Metals / Elements	5 mL	Must define which minerals and/or elements are required					
224	NP	5 mL						
144	Perchlorates and Chlorates	5 mL						
204	QAC and NPE	5 mL						
36	BOV Test	5 mL						