

Packaging and Shipping Supplies

**Veterinary Medical
Diagnostic Laboratory**
University of Missouri

Phone: 573-882-6811

Fax: 866-231-5125

E-mail:

UMCCVMVMDLReceiving@missouri.edu

Please note: All samples submitted for testing become the property of the MU VMDL. Prices effective 9/1/26 and are subject to change without notice.

Client Acct No: _____

Send to:

Veterinarian's Name: _____

Clinic Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

ITEM**Price****Qty****Total**

Plastic slide holders (set of 5)	NC		
3 tube foam mailer with outer cardboard sleeve (5 sets)	\$17.00		
Submission forms (available online at https://vmdl.missouri.edu/submission-forms/)	NC		
FedEx Billable Stamp	NC		
Biohazard specimen bags with absorbent	NC		
FedEx Clinical Pak (for exempt animal specimens and other noninfectious, non-toxic samples, max 15 per order). http://www.fedex.com/us/packaging/guides/Clinical_fxcom.pdf	NC		
3 oz. prefilled formalin containers with secondary containers and return boxes (quantity of 1 = 12 sets)	\$55.00		
3 oz. and 8 oz. prefilled formalin containers with secondary containers and return boxes (quantity of 1 = 6 sets of each size)	\$55.00		
8 oz. prefilled formalin containers with secondary containers and return boxes (quantity of 1 = 12 sets)	\$55.00		

Select preferred method of shipment:

☐ FedEx overnight ☐ FedEx 2nd day ☐ USPS ☐ Client pickup ☐ FedEx Ground

Shipping will be charged to your account. If no method is selected, items will be shipped at the discretion of the lab. Please allow 2-3 days for the order to be processed. All sales final. No returns or refunds.

Prepare specimens for shipment in compliance with applicable regulations and in accordance with requirements specific to the carrier (FedEx, USPS, UPS) and the Department of Transportation.

FOR VMDL USE ONLY: Date Order Received: _____

Subtotal:

Order Filled By: _____

Shipping:

Order Shipped: _____

Total Charges:

Bacteriology and Molecular Diagnostics Supplies



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BACTERIOLOGY

Client Acct No: _____
Send to:
Veterinarian's Name: _____
Clinic Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

	Price	Qty	Total
E-swab- Regular (Amies liquid media)	3.00		
Blood Plate	1.50		
BD-BACTEC Plus	21.00		
Rayon Mini-swabs (no media)	1.00		

MOLECULAR DIAGNOSTICS

	Price	Qty	Total
Trichomonas (InPouch®), orders of 1-5 pouches	13.00		
Trichomonas (InPouch®), orders of >5 pouches	11.00		
Universal Viral Transport Collection Kit	3.00		
Synthetic-tipped swabs, sterile, 2/pkg.	.25		

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