Instructions for Elephant Endotheliotropic Herpesvirus (EEHV) Sample Submission

Please submit all samples on plenty of dry ice in a styrofoam container.

- For a sick elephant with suspected active EEHV infection, please send 1-2 ml of whole blood (EDTA, lavender top tube) and at least 0.5 ml serum. It is best to transfer the samples to a freezer-safe tube (not glass) after thoroughly mixing with EDTA. We have received broken glass tubes in the past.

- For necropsy tissues, please freeze the tissues (preferably in liquid nitrogen or dry ice, or store in a –70 C freezer). Heart, liver, spleen, tongue, any organs with hemorrhages, lung nodules (may be very small, please breadloaf the lung and palpate) are requested.

- For newborn/stillborn/aborted elephants, please freeze a 3 cm² piece of placenta (preferably in liquid nitrogen or dry ice, or store in a –70 C freezer). Also send EDTA WB (1-2 ml) and serum (0.5 ml) from mother and baby, if possible.

- For EEHV titers, please send at least 0.5 mls of serum (preferably more). Freeze immediately. We are not currently doing EEHV serology. Serum samples may be sent; they will be banked for future testing.

- Please include all pertinent elephant information (including history) on the attached form.

- Please call/email Erin before shipping samples:

Erin Latimer: 202-633-4252 (W)  
703-855-9611 (C)  
latimere@si.edu

Please email the tracking number and an itemized list of the samples being sent.

Ship by FedEx Priority Overnight to:

Erin Latimer  
Smithsonian’s National Zoological Park  
Department of Pathology  
3001 Connecticut Ave. NW  
Washington, DC 20008
Request for EEHV testing
Department of Pathology
Smithsonian’s National Zoo
3001 Connecticut Ave. NW
Washington, DC 20008
(202) 633-4252

Date ________________________
Requestor’s name ______________________________________________________________
Institution _____________________________________________________________________
Address _______________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Phone/email _________________________________________________________________

Animal Name/ISIS # ____________________________
Age ____________________________
Species ____________________________

Reason for request (i.e. current symptoms of possible EEHV, or possible exposure to
EEHV) _________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Type of samples being sent ____________________________

Before sending samples, please call/email Erin Latimer  202-633-4252 (W)
703-855-9611 (C)
latimere@si.edu

Please send samples Priority Overnight on dry ice or ice packs in a styrofoam cooler.
I give consent for the results of Elephant Endothelial Herpes Virus (EEHV) testing to be used by the Species Survival Plan (SSP) and the National EEHV Laboratory to make recommendations on any elephant related issues (including, but not limited to, recommendations on relocations and breeding).

The results that could be reviewed and used by the SSP and the National EEHV Lab include Polymerase Chain Reaction (PCR), Enzyme-Linked Immunosorbent Assay (ELISA), and DNA sequencing of the EEHV virus.

I understand that all results and recommendations will be kept confidential.

_____ Yes, I agree to allow the SSP and the National EEHV Lab to use our testing results.

_____ No, I do not consent to the use of our testing results.

__________________________________________  __________
Signature, title         Date

___________________________________________________  _________________________
Printed name       Phone number

____________________________________________________  _________________________
Institution       Email address

____________________________________________________
Address