

Yard Worm Egg Count Request Form – please complete your details below

We recommend worm egg counts every 3 months (March-November) and to only worm horses with high worm egg counts.

However we advise worming most horses for encysted small red-worm (and tapeworm, if required) late autumn/early winter as these worms are not detected in worm egg counts. Tapeworm saliva or blood testing is recommended annually in September.

RESULTS ARE REPORTED TO A YARD REPRESENTATIVE AFTER PAYMENT.

Yard representative name:						
Yard Name & Address:						
Preferred method of contact for r	esults:					
Phone (contact number):						
Email:						
Costs: (including 5% prompt payn For 5 samples and above: £8.99 (i	•					
If paying by card please give detai advance.	ls below, alternatively you m	nay include a cheque or call to pay th	e clinic in			
CREDIT / DEBIT CARD NUMBER:	/					
VALID FROM/	EXPIRES/	3 DIGIT SECURITY NUMBER	_			
I HEREBY AUTHORISE THE COST OTHERWISE BY AGREEMENT	OF THIS SERVICE TO BE CH	HARGED UP TO THE INVOICED AMO	OUNT OR			
SIGNATURE	DATE					

CONTINUE OVERLEAF FOR WORM EGG COUNT FORM

	HORSE NAME	OWNER NAME (FIRST AND LAST)	RESULT OFFICE USE ONLY	ADVISED OFFICE USE ONLY
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				JSE ONLY

		C					
•		.		 	. ,	ıv	- 1

VET

COSTED: YES NO

PAID: YES NO