

Tick Specimen Identification Form

(Ticks submitted are for surveillance purposes only; NOT for diagnostic purposes)

When submitting a specimen please wrap the tick(s) in tissue/toilet paper and place along with a few blades of live grass (this helps prevent the insect from drying out) in a plastic Ziploc-type bag. Send the bag with this completed form in a standard envelope to:

Tick Surveillance Program
Attn: Ryan Smith
Department of Entomology
2310 Pammel Dr.
Ames, IA 50011

Name: _____ Date sample was collected: _____

Contact email address: _____

County and state where you reside: _____

Site where tick was acquired (if known): _____

County and state where tick was acquired (if known): _____

Circumstances where tick may have been obtained (if known): (e.g. walking in woods or tall grass, camping, etc.)

Tick found on: Human *Animal Other: _____

*If tick found on animal, what type of animal?: _____

If the location of where the tick was acquired is unknown, have you traveled out of your present county in the last 2 weeks? Yes No

If Yes: Start Date _____ End Date _____ County/State _____

FOR OFFICE USE ONLY

Sample #: _____

Sample Date: _____

Specimen Identification: _____

Specimen Life Stage: _____

Assumed County of Origin: _____