

Tick Sample Submission Form
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Instructions:

Please fill out the following form to the best of your ability. You are not required to provide any of the information, but it is strongly encouraged to note the town where the tick was acquired and the date the tick was found to establish regions of high-risk for encountering ticks.

Please include name of Parent or Guardian if under 18 years of age.

To remove ticks, grasp them with fine forceps as near to the skin as possible and pull directly out firmly and steadily. The barbed mouth parts may not let go easily, so a minute or more may be required. Do not handle ticks with your bare hands.

Samples may be submitted in folded clear masking tape, sealed ziplock containers, or capped and sealed vials containing 70% ethanol.

NOTE: Wood ticks do not transmit Lyme disease.
Please do not submit ticks where you can distinguish the characteristic white markings unique to the wood tick, a.k.a. dog tick.





Data Sheet: *Ixodes Scapularis* (Deer Tick) Collection

YOUR PLACE OF RESIDENCE	TODAY'S DATE:
NAME:	
ADDRESS:	
EMAIL:	
Parent/Guardian	

PLACE WHERE DEER TICK WAS ACQUIRED	DATE TICK FOUND:
NEAREST CITY:	STATE:

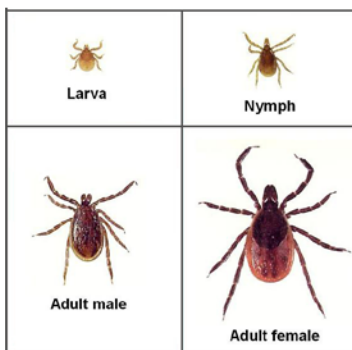
GPS (if available)	Latitude	Longitude
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Was the tick attached when found? YES NO

Tick found on: Person Animal Other _____

If found on animal, what type? Dog Cat Other _____

Sample #	Deer Ticks	
	Nymphs	Adult
1		
2		
3		
4		
5		



ADDITIONAL COMMENTS:

OFFICE USE ONLY

Sample number: _____

Date received: _____

Received by: _____

Date entered: _____

Entered by: _____