## **Free Tick Testing Order Form**

Please complete this form in full, prin	t and mail (with the tick) to:
Nieto Lab	
Department of Biological Sciences	
617 S. Beaver Street	
Northern Arizona University	
Flagstaff, AZ 86011	
DIRECTIONS:	
Put your tick in a small Ziploc baggie with a m	oist cotton ball or piece of wet paper towel. Include this docume
with your tick. Put the baggie and the docum	ent in a small padded envelope.
Please complete this 3-PAGE form in full and	SIGN THE WAIVER at the end of this form. No signature mean
no tick testing!	
Full name:	
Address:	
	Number of ticks submitted:
Where did you encounter or find this tick? (Pl	
City:	County:State:
	ED):
Frail, park or forest name ():	
L) Please describe your travel history over pre	evious week:
a) limited to within county b) outside count	y to neighboring county c) outside county within state

2) The tick was: (circle or highlight one)

d) outside state e) other- Please describe:\_

- a) Attached to or biting the host
- b) Crawling on host

	a) Human	<b>b)</b> Cat	c) Dog	d) Domesticated animals/Li	vestock <b>e)</b> Wildl	life.			
	f) Other- Please	describe:							
.)	If human was tl	ne answer abo	ove, please answe	er the following:					
	Age:	Sex:	Part of bod	y tick was found:					
)	What was the g	eographical e	nvironment when	e the tick encounter occurred	(circle or highlight one)				
				Urban <b>e)</b> Other:	,				
)	Did the tick enc	ounter occur	on developed pro	perty? (circle or highlight one)	a) Yes b) No				
1	What was the n	atural habitat	where the tick e	ncounter occurred? (circle or h	ghlight one)				
	a) Garden b)	Grassy c) i	₋awn <b>d)</b> W	etland <b>e)</b> Wooded <b>f)</b> Fie	ld <b>g)</b> Man-made ha	abita			
	h) Other- Please	describe:							
	What activity we	What activity were you engaged in, when you believe you encountered the tick? (circle or highlight one)							
	a) Biking b) Car	nping <b>c)</b> Farr	ming <b>d)</b> Fishing	e) Gardening f) Hiking g) Hi	unting				
	h) Landscaping	i) Mowing	g <b>j)</b> Picn <b>k)</b> Wa	ılking <b>I)</b> Walking pet <b>m)</b> Otl	ner- Please describe:				
	How often do y		low often do you perform the activity that exposed you to the tick? (circle or highlight one)						
	•	ou perform t	he activity that e	exposed you to the tick? (circle	e or nignlight one)				
	a) Multiple time		he activity that e	exposed you to the tick? (circles) 2-5 times per week					

11) (	Generally,	when do you	engage	in this activity?	(Circle all th	at apply)	
а	) Spring	b) Summer	c) Fall	d) Winter			
12) \	When the	tick encounte	r occurre	ed, were you e	ngaged in du	ities related to you	ır occupation?
•	a) Yes	<b>b)</b> No					
13) T	his week,	what daily pe	ersonal p	recautions did	you take to	prevent tick bites	? (Circle all that apply)
;	a) None	<b>b)</b> Tick cl	neck	c) Insec	ticide	d) Protective clo	thing
,	e <b>)</b> Avoidin	g tick habitat	<b>f)</b> Ot	her- Please des	cribe:		
14) H	ow did yo	u find this pro	ogram? (	Circle all that a	pply)		
ā	a) Bay Area	a Lyme Found	ation We	ebsite <b>b)</b> Interi	net Search	c) Social Media	d) Word-of-mouth
€	e) Advertis	ement <b>f)</b> Oth	ier- Pleas	e describe:			
Discl	aimer ar	nd Waiver o	f Liabili	tv — SIGNATI	IDE DECLII	DED	

## Disclaimer and Waiver of Liability – SIGNATURE REQUIRED

Prelease Bay Area Lyme Foundation and Northern Arizona University and its staff and employees of any liability with regards to the outcome of testing or any findings in perpetuity. The Laboratory of Dr. Nathan Nieto at Northern Arizona University (NAU) will test the tick you submit using highly specific and sensitive methods for detecting presence or absence of DNA associated with disease causing pathogens. These tests are not intended to provide clinical diagnosis of disease nor should they be interpreted as a substitute for clinical testing or consultation with a physician. NAU does not practice medicine nor does it provide medical advice. Tick tests provide accurate assessment of infection status which is one factor in determining risk of exposure to disease causing microbes. Results from your tick test are useful in determining the timing, location, and abundance of infected ticks. Accordingly, we share this information with the public and health agencies that may request it. The shared data is completely

anonymous. NAU protects the identity of the individ	dual bitten by or submitting the tick. Information about the
bite victim and/or submitter is used only for the pur	rpose of communicating results.
Signature:	Date:
For more information visit: http://www.bayarealym	e.org/lyme-disease-prevention/