

# EXPERTISE & RESOURCE REGISTRATION FORM

<b>Name:</b>	<b>Title:</b> Mr. / Miss / Mrs. / Dr / Other
<b>Institution:</b>	<b>Phone (Business):</b>
<b>Department:</b>	<b>Phone (After Hours):</b>
<b>Street Address:</b>	<b>Mobile:</b> <b>Fax:</b>
<b>Suburb:</b>	<b>E-mail:</b>
<b>City:</b>	
<b>State:</b>	<b>Postal code:</b>
<b>Country:</b>	

<b>Current job or role in the field of wildlife health:</b>	
<b>Wildlife Disease Association Member:</b>	<b>YES/NO</b>
<b>Australian Society of Veterinary Pathologists member:</b>	<b>YES/NO</b>
<b>Willing to Examine Referral Specimens:</b>	<b>YES/NO</b>
<b>Willing to have name, address, business phone number, and email address added to a published expertise registry for distribution to stakeholders:</b>	<b>YES/NO</b>

## Fields of Expertise

Please indicate the disciplines that best describe your field of expertise from the following list and be sure to indicate the species and disease causing agents that you work with regularly. Please indicate separately where you have an interest in a particular field.

<b>Discipline</b>	<b>Host Species</b>	<b>Types of Disease/Agent</b>
Parasitology		
Bacteriology		
Virology		
Mycology		
Toxicology		
Pathology		
Immunology		
Epidemiology/Population Biology		
Ecology		
Immobilisation		
Clinical Medicine		
Rehabilitation		
Forensics		
Immunotoxicology		
Captive Wildlife Management		
Reproduction		
Radio telemetry		
Genetics		
Exotic Disease		
Surveillance/Preparedness/ Response		
Zoonosis		
Public Health		
Environmental Emergency (Exotic Disease, Oil Spill, Fire, Stranding)		
Museum / Voucher Specimen Collection		
Surgery		
Nutrition		
Feral/pest animal control		
Computer Sciences/Web Page Management		
Communications		
Public Relations		
Other:		

## Services Offered

Please indicate the services that you have available for wildlife health investigation from the following list and be sure to indicate the species and disease causing agents that you work with regularly.

Where specific tests are unique to your laboratory, please indicate this and add further detail regarding the types of test offered and the sample type required.

Discipline	Host Species	Types of Disease
Pathology		
Immunohistochemistry		
Electron Microscopy		
Toxicology		
Virology		
Bacteriology		
Immunodiagnostics		
DNA Analysis (Nucleotide Sequencing)		
Epidemiology / Statistical		
PCR Testing		
Parasite Identification		
Computer Sciences / Web Page		
Communications		
Immunotoxicity		
Immobilisation		
Clinical Medicine		
Reproductive Tract		
Feral/pest animal control		
Radiology		
Clinical Pathology		
Rehabilitation		
Nutritional Analysis - (Vitamin ADE Analysis)		
Species Identification		
Aging by Tooth Sections		
Teratogenesis		
Forensics		
Emergency Response (Exotic Disease, Oil Spill, Fire, Stranding)		
Other:		

### Samples Stored

Please list the samples that you have stored that may be useful for future wildlife health investigations.

Species	# Samples	Dates Collected	Sample Location	Sample Type	Sample Form	Disease Agent

Sample types: Carcase, Tissue, Egg, Foetus, Faeces, Serum, Blood, Urine, Skin, Parasite

Sample forms: Fixed, Frozen, Microscopic Slide, Paraffin Block, EM Block, Photograph – gross, Photograph – microscopic, Photograph - electron micrograph, Electronic image, written report, Radiography

Please feel free to use additional sheets of paper to complete your application.

Return completed forms to:

**Australian Registry of Wildlife Health,  
Taronga Zoo, PO Box 20, Mosman, NSW, 2088, Fax 02-9932-4376  
Email: arwh@zoo.nsw.gov.au**