



Michigan Department of Health and Human Services
Bureau of Epidemiology and Population Health
Emerging & Zoonotic Infectious Diseases Section
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TICK IDENTIFICATION AND TESTING FORM

1. If the tick is removed from a person, is received alive, and is a blacklegged tick, it will be tested by the MDHHS-Laboratory for Lyme disease at no cost to the submitter. Ticks that are not blacklegged ticks, or that are received dead will not be tested for Lyme disease.
2. Place the tick in a vial or small pill bottle and add a few blades of grass or small (1-inch square) piece of paper towel moistened with one drop of water. Be sure the cover is firmly secured on the container, air holes are not needed in the container.
3. Print or type information requested below and return this form with the tick in a container to the above address. On the outside of the shipping container write "FRAGILE" or "HANDLE WITH CARE" to help prevent damage to the tick when shipped.

* All fields are **required** in order for tick specimen to be processed.

Submitter Information:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone Number: _____

Tick Information:

Date tick was collected: _____

Please indicate (check) if tick was found on:

Person Animal Other

If animal or other please describe: _____

Send RESULTS to (check ONE only):

Mail (Address above)

Email: _____

Alternative address:

If tick was found on a person or an animal, was the tick attached? Yes No

Location where tick exposure probably occurred:

Home/yard School Park/recreation area

Other: _____

Specific location: _____

City: _____

County: _____ State: _____

Do not write below this line:

MDHHS SAMPLE # _____