

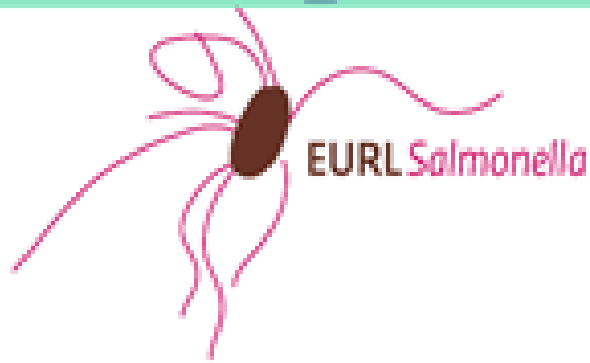


**EU Interlaboratory comparison study on detection of
Salmonella in samples from primary production
organised by EURL-*Salmonella***

Chicken faeces adhering to boot socks, October 2018

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**EU Interlaboratory comparison study on detection of
Salmonella in samples from primary production
organised by EURL-*Salmonella***

Chicken faeces adhering to boot socks, October 2018

Laboratory information

Laboratory code

Name contact person

E-mail address contact
person

Name laboratory or institute

Country

For which methods is your laboratory accredited?

ISO 6579:2002

Annex D of ISO 6579:2007

ISO 6579-1:2017

Other. Please specify:

Which method did you use in this study?

ISO 6579:2002

Annex D of ISO 6579:2007

ISO 6579-1:2017

Other namely:

Date and time of arrival of the parcel in your laboratory

Time

Was your parcel damaged at arrival?

No

Yes. Description of damage:

Start date and time of storage at 5 °C

Time of storage

Start date of testing

Positive control sample

What kind of positive control did you use?

- Capsule
- Culti loops
- Culture
- Freeze dried (ampoule)
- Lenticule disc
- Other

What was the concentration of the *Salmonella* control sample?

What was the volume of BPW used for the pre-enrichment?

Which *Salmonella* serovar did you use in the control samples?

- Enteritidis
- Typhimurium
- Goldcoast
- Nottingham
- Panama
- Poona
- Tranaroa (*Salmonella enterica* subsp. *salamae*)
- Other

Pre-enrichment - Buffered Peptone Water (BPW)

Name manufacturer BPW	<input type="text"/>			
Code number BPW	<input type="text"/>			
pH at the day of use	<input type="text"/>			
Start date and time of incubation BPW	<input type="text" value="dd/mm/yyyy"/>	<input type="text" value="dd/mm/yyyy"/>	Time	<input type="text" value="hh:mm"/>
Temperature incubator BPW (°C)	<input type="text"/>			
End date and time of incubation BPW	<input type="text" value="dd/mm/yyyy"/>	<input type="text" value="dd/mm/yyyy"/>	Time	<input type="text" value="hh:mm"/>

Selective enrichment - Modified Semi solid Rappaport medium (MSRV)

Name manufacturer MSRV	<input type="text"/>
Code number MSRV	<input type="text"/>
Concentration novobiocin per 1L medium	<input type="text" value="mg/L"/>
Temperature incubation MSRV	<input type="text"/> °C
pH at the day of use	<input type="text"/>

Isolation - Xylose Lysine Desoxycholate medium (XLD)

Name manufacturer XLD	<input type="text"/>
Code number XLD	<input type="text"/>
Temperature incubation XLD	<input type="text"/> °C

Isolation - second Isolation medium (perscribed)

Medium information
second isolation medium

Used incubation
Temperature °C

Name manufacturer

Code number

Confirmaton - Non-selective medium

Did you streak colonies
on Non-selective medium
before starting
confirmaton? No
 Yes Please specify:

Confirmation of *Salmonella* suspected colonies

What media/test did you
use for confirmation? Biochemical
 Serological
 Serotyping
 PCR
 Other Specify:

Detection by PCR (optional)

Did you use PCR in this study? Yes
 No

What kind of PCR did you use? Real time PCR
 Other PCR. Specify:

Is that PCR commercially available? Yes
 No

Name of PCR

Batch number

Name of manufacturer

Is the PCR validated? Yes
 No

For which matrices is PCR validated?

By which organisation is the PCR is validated:

Reference number of literature reference PCR

Do you use PCR routinely? Yes
 No

How many samples did you test for *Salmonella* using this PCR in 2017?

When did you start with the extraction /detection? Before pre-enrichment in BPW
 After pre-enrichment in BPW
 After selective enrichment on MSR/V
 Other. Please Specify:

Table 1: Confirmed results for *Salmonella* after selective enrichment on MSR/V
Samples B1 - B18 & C1 - C2

Indicate:

1 for positive confirmed result for *Salmonella*

0 for negative (confirmed) results for *Salmonella*

B1	<input type="checkbox"/>
B2	<input type="checkbox"/>
B3	<input type="checkbox"/>
B4	<input type="checkbox"/>
B5	<input type="checkbox"/>
B6	<input type="checkbox"/>
B7	<input type="checkbox"/>
B8	<input type="checkbox"/>
B9	<input type="checkbox"/>
B10	<input type="checkbox"/>
B11	<input type="checkbox"/>
B12	<input type="checkbox"/>
B13	<input type="checkbox"/>
B14	<input type="checkbox"/>
B15	<input type="checkbox"/>
B16	<input type="checkbox"/>
B17	<input type="checkbox"/>
B18	<input type="checkbox"/>
C1	<input type="checkbox"/>
C2	<input type="checkbox"/>

Table 2: Results of *Salmonella* detection using PCR Samples B1 - B18 & C1 - C2

Indicate:

1 for positive PCR result for *Salmonella*

0 for negative PCR results for *Salmonella*

B1	<input type="checkbox"/>
B2	<input type="checkbox"/>
B3	<input type="checkbox"/>
B4	<input type="checkbox"/>
B5	<input type="checkbox"/>
B6	<input type="checkbox"/>
B7	<input type="checkbox"/>
B8	<input type="checkbox"/>
B9	<input type="checkbox"/>
B10	<input type="checkbox"/>
B11	<input type="checkbox"/>
B12	<input type="checkbox"/>
B13	<input type="checkbox"/>
B14	<input type="checkbox"/>
B15	<input type="checkbox"/>
B16	<input type="checkbox"/>
B17	<input type="checkbox"/>
B18	<input type="checkbox"/>
C1	<input type="checkbox"/>
C2	<input type="checkbox"/>

Remarks and comments

Name of person(s)
carrying out the
comparison study

Name of the person in
charge

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