Updated 05 May 2021

State of Alaska Submit-A-Tick Form

This form should be used to submit ticks that have been found in Alaska on people, wildlife, pets, or in the environment. Ticks that are submitted through this program will be included in a long-term database of ticks found in the state. Tick identification and lab testing is most effective on fresh samples, so we ask that you send in your submissions as quickly as possible. Individuals interested in receiving notification regarding tick identification of submitted specimens should include their contact information below. This service is ONLY for surveillance purposes, NOT for diagnostic purposes.

Instructions for tick submission

1.Put the tick into a clean, small plastic or metal container (i.e., vial or small pill bottle). If ticks are collected from more than one person or animal, please use separate containers.

2. Place each container into a Ziploc bag. Place the bag in an envelope or small box for shipping.

3. Complete this form. Please, use separate forms for ticks found on different hosts, dates, or locations.

4. Submit this form with your tick via mail or in person to the Office of the State Veterinarian:

5251 Dr. Martin Luther King Jr. Avenue
Anchorage, AK 99507

OFFICE USE ONLY

Intake ID: |___|___|___|___| _ |___|___|___|___|

Number of ticks in sample: _____

Date Processed: _____

Notes:

Please provide the following information about your tick submission:

Select the category that best describes yourself or person submitting the tick:

☐Public ☐Veterinarian ☐Health professional ☐Biologist

Date the tick was collected: _____

Tick was found on: ☐ Human ☐ Dog ☐ Cat ☐ Other animal: _____

☐Environment (describe where you found tick): _____

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

What is the Alaskan zip code for where you found the tick(s)? If you think you picked up the tick while traveling out of state, please list your home zip code. _____
See the map here for reference https://arcg.is/0HvGLK

Please provide an additional description of where you or your pet likely encountered the tick or the location where you found the wildlife with ticks (landmarks, GPS coordinates, address, etc.):

_____

_____

Has anyone in your household (including pets) traveled outside Alaska in the past 2 weeks?
☐ No ☐ Yes, where?_____

Approximate dates of travel? Leave _____ Return_____

Has anyone in your household (including pets) traveled within Alaska in the past 2 weeks?
☐ No ☐ Yes, where?_____
Approximate dates of travel? Leave _____ Return_____

Method of submission:
How will you be submitting this tick sample?
☐Office of the State Veterinarian (drop off or direct mail)
☐ Veterinary clinic:_____ (clinic name)

Please, include additional information below or on the back of this form (optional):

Would you like to provide contact information to receive notification about tick identification of submitted specimen(s)? (optional)

Name _____
Phone_____
Email_____

Thank you for your submission!

We will contact the submitter for more information if needed. Tick identification results will be sent to the email address provided, or we will call with identification results if no email address is provided on this form. For questions about this form, please contact the project team at alaskaticks@alaska.edu. Additional information about ticks and tick-borne diseases in Alaska can be found at http://dec.alaska.gov/eh/vet/ticks.