DEFENSE CENTERS FOR PUBLIC HEALTH - ABERDEEN (DCPH-A)
MIITICK - MILITARY TICK IDENTIFICATION/INFECTION CONFIRMATION KIT

SUBMISSION OF TICK SPECIMENS FROM HUMAN TICK BITE PATIENTS

**SUBMITTING INSTALLATION (MAILING ADDRESS):**

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

**POC NAME:** __________________________________________________________
**POC PHONE:** COM _______ DSN _______
**POC EMAIL:** __________________________________________________________

CURRENT POC EMAIL MUST BE INCLUDED FOR RESULTS REPORTING.
IF NO EMAIL IS PROVIDED, SAMPLE CANNOT BE PROCESSED.

**SAMPLE IDENTIFICATION NO.** (DO NOT USE PATIENT NAME OR SSN) __________________________________________

<table>
<thead>
<tr>
<th><strong>PATIENT INFORMATION</strong></th>
<th><strong>TICK-BITE INFORMATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SERVICE ASSOCIATION (Circle one):</strong></td>
<td>WHERE WAS TICK-BITE ACQUIRED?</td>
</tr>
<tr>
<td>ARMY</td>
<td>ON-POST? (Give the name of the installation):</td>
</tr>
<tr>
<td>NAVY</td>
<td></td>
</tr>
<tr>
<td>AIR FORCE</td>
<td></td>
</tr>
<tr>
<td>MARINES</td>
<td></td>
</tr>
<tr>
<td><strong>STATUS (Circle):</strong></td>
<td>OFF-POST? (Enter the following information, if known):</td>
</tr>
<tr>
<td>ACTIVE DUTY</td>
<td>CITY_____________</td>
</tr>
<tr>
<td>NAT’L GUARD</td>
<td>COUNTY_____________</td>
</tr>
<tr>
<td>RETIRED</td>
<td>STATE_____________</td>
</tr>
<tr>
<td>RESERVES</td>
<td></td>
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<tr>
<td>DEPENDENT</td>
<td></td>
</tr>
<tr>
<td>CIVILIAN</td>
<td></td>
</tr>
<tr>
<td>CADET</td>
<td></td>
</tr>
<tr>
<td>OTHER_____________</td>
<td></td>
</tr>
<tr>
<td><strong>AGE_____________</strong></td>
<td><strong>SEX: M F</strong></td>
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<tr>
<td><strong>REMARKS:</strong></td>
<td><strong>DATE OF TICK REMOVAL ________________</strong></td>
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</tbody>
</table>

POC NAME: __________________________________________________________________________________________________
**POC PHONE:** COM ____ DSN ____
POC EMAIL: __________________________________________________________________________________________________

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IF NO EMAIL IS PROVIDED, SAMPLE CANNOT BE PROCESSED.

**ARMY**

**NAVY**

**AIR FORCE**

**MARINES**

**POC NAME:** __________________________________________________________________________________________________
**POC PHONE:** COM ____________ DSN ____________
**POC EMAIL:** __________________________________________________________________________________________________

CURRENT POC EMAIL MUST BE INCLUDED FOR RESULTS REPORTING.
IF NO EMAIL IS PROVIDED, SAMPLE CANNOT BE PROCESSED.

**REMARKS:**
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
<table>
<thead>
<tr>
<th>TICK IDENTIFICATION</th>
<th>Sex &amp; Stage</th>
<th>Engorgement</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Species</td>
<td>Adult M/F</td>
<td>Nymph</td>
<td>Larva</td>
</tr>
<tr>
<td><em>Amblyomma americanum</em>&lt;br&gt;lone star tick</td>
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<td></td>
<td></td>
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<tr>
<td><em>Dermacentor variabilis</em>&lt;br&gt;American dog tick</td>
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<tr>
<td><em>Ixodes scapularis</em>&lt;br&gt;blacklegged tick&lt;br&gt;(a.k.a. deer tick)</td>
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<tr>
<td><em>Amblyomma maculatum</em>: Gulf Coast tick</td>
<td></td>
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<tr>
<td>Other:</td>
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</tbody>
</table>

**THIS TICK WAS TESTED FOR:**

<table>
<thead>
<tr>
<th></th>
<th>Pos</th>
<th>Neg</th>
<th>REMARKS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Babesiosis (BAB)&lt;br&gt;<em>Babesia microti</em></td>
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<tr>
<td>Human granulocytic anaplasmosis (HGA)&lt;br&gt;<em>Anaplasma phagocytophilum</em></td>
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<tr>
<td>Lyme disease (LD)&lt;br&gt;<em>Borrelia burgdorferi</em> / <em>Borrelia mayonii</em> (Circle one)</td>
<td></td>
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<tr>
<td>Tick-borne relapsing fever (TBRF)&lt;br&gt;<em>Borrelia miyamotoi</em></td>
<td></td>
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<tr>
<td><em>Ehrlichia ewingii</em> ehrlichiosis (EE)</td>
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<tr>
<td>Human monocytic ehrlichiosis (HME)&lt;br&gt;<em>Ehrlichia chaffeensis</em></td>
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<tr>
<td>Panola Mountain ehrlichiosis (PME)</td>
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<tr>
<td>Rocky Mountain spotted fever (RMSF)&lt;br&gt;<em>Rickettsia rickettsii</em></td>
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<tr>
<td>Tidewater spotted fever (TWSF)&lt;br&gt;<em>Rickettsia parkeri</em></td>
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<tr>
<td>Other:</td>
<td></td>
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</tr>
</tbody>
</table>

ROBYN NADOLNY, PhD  
Chief, Vector-Borne Disease Branch Defense  
Centers for Public Health - Aberdeen  
8252 Blackhawk Rd ATTN: MiTICK Program  
Aberdeen Proving Ground, MD 21010-5403  
DSN 584-5425 COM (410) 436-5425
U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES
RIVERDALE, MARYLAND 20737

UNITED STATES VETERINARY PERMIT FOR IMPORTATION
AND TRANSPORTATION OF CONTROLLED MATERIALS AND
ORGANISMS AND VECTORS

PERMIT NUMBER
611-23-88-85847
PERMIT CATEGORY
Research
DATE ISSUED
29-MAR-2023
DATE EXPRESSES
29-MAR-2024

NAME AND ADDRESS OF SHIPPER(S)
Various Shippers within the United States

NAME AND ADDRESS OF PERMITTEE INCLUDING ZIP CODE AND TELEPHONE NUMBER
Cory Casal
Defense Centers for Public Health - Aberdeen
8252 Blackhawk Rd
Aberdeen Proving Ground, Maryland, 21010
4432072576

U.S. PORT(S) OF ARRIVAL
N/A - Interstate Transport

MODE OF TRANSPORTATION
Any

AS REQUESTED IN YOUR APPLICATION, YOU ARE AUTHORIZED TO IMPORT OR TRANSPORT THE FOLLOWING MATERIALS

Ticks - (Whole and inactivated, or homogenized in extraction buffer);
Blacklegged tick species, (Ixodes scapularis), Lone star tick (Amblyomma
americanum, Gulf Coast tick (Amblyomma maculatum), American Dog Tick
(Dermacentor variabilis)

REQUIREMENTS OF TRANSPORTING AND HANDLING MATERIALS AND ALL DERIVATIVES

THIS PERMIT IS ISSUED UNDER AUTHORITY CONTAINED IN 9 CFR CHAPTER 1, PARTS 94, 95 AND 122. THE AUTHORIZED MATERIALS OR THEIR
DERIVATIVES SHALL BE USED ONLY IN ACCORDANCE WITH THE RESTRICTIONS AND PRECAUTIONS SPECIFIED BELOW (ALTERATIONS OF RESTRICTIONS
CAN BE MADE ONLY WHEN AUTHORIZED BY USDA, APHIS, VS).

- Adequate safety precautions shall be maintained during shipment and
  handling to prevent dissemination of disease.
- With the use of this permit I, Cory Casal, Permittee, acknowledge that the
  regulated material(s) will be imported/transported within the United
  States in accordance with the terms and conditions as are specified in the
  permit. The Permittee is the legal importer/recipient [as applicable] of
  regulated article(s) and is responsible for complying with the permit
  conditions. The Permittee must be at least 18 years of age and have and
  maintain an address in the United States that is specified on the permit;

SIGNATURE
E-SIGNED by Troy Bigelow
on 2023-03-29 16:04:26 GMT

TITLE
VETERINARY MEDICAL OFFICER

NO. LABELS

VS FORM 16 6A (MAR 95) replaces VS Form 16-3A and 16-2B which are obsolete
Continued on subsequent page(s)....
or if another legal entity, maintain an address or business office in the United States with a designated individual for service of process; and serve as the contact for the purpose of communications associated with the import, transit, or transport of the regulated article(s). **Note: Import/Permit requirements are subject to change at any time during the duration of this permit.

- ***Materials shall be consigned directly to the permittee address specified above.
- It is incumbent upon the permittee to uphold proper biosafety procedures and protocols to protect human and animal health as per institutional policy and recommendations published in Biosafety in Microbiological and Biomedical Laboratories, current edition.
- All studies must be conducted in ACL2 (or higher) facilities.
- This permit DOES NOT authorize direct or indirect exposure of or inoculation into laboratory and domestic livestock, (including but not limited to: birds/poultry, cattle, sheep, goats, swine, and/or horses).
- Materials, derivatives, packaging, containers, and all equipment in contact with the imported products shall be sterilized or considered a biohazard and disposed of accordingly.
- Work with the permitted material shall be performed in accordance with the condition requirements described in this permit. Subsequent distribution to another state is prohibited without prior authorization of APHIS (in the form of an interstate transport permit, written correspondence, or reference to an applicable guideline for no import permit required). Any change in use, treatment, disposal, and distribution within the state may require approval from the state and/or local government.
- This permit does not exempt the permittee from responsibility for compliance with any other applicable federal, state, or local laws and regulations.
- This permit shall not be used to transport or import of any select agents (HHS AND USDA SELECT AGENTS AND TOXINS, 7 CFR Part 331, 9 CFR Part 121, and 42 CFR Part 73).
- A copy of this permit should be included with the shipping documents.

TO EXPEDITE CLEARANCES AT THE PORT OF ENTRY, BILL OF LADING, AIRBILL OR OTHER DOCUMENTS ACCOMPANYING THE SHIPMENT SHALL BEAR THE PERMIT NUMBER

<table>
<thead>
<tr>
<th>SIGNATURE</th>
<th>TITLE</th>
<th>NO. LABELS</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-SIGNED by Troy Bigelow on 2023-03-29 16:04:28 GMT</td>
<td>VETERINARY MEDICAL OFFICER</td>
<td></td>
</tr>
</tbody>
</table>

V5 FORM 16-6A (MAR 95) Replaces V5 Form 16-3A and 16-28 which are obsolete
What is MilTICK?
MilTICK (Military Tick Identification/Infection Confirmation Kit) is a free tick testing and identification service available to Department of Defense (DoD) beneficiaries and their dependents. Formerly known as the DoD Human Tick Test Kit Program, this service is provided by the Vector-Borne Disease Branch at the Defense Centers for Public Health – Aberdeen, located at Aberdeen Proving Ground, MD.

What does MilTICK do?
Ticks can be submitted to MilTICK by eligible individuals using the decision tree below. Only human-biting ticks are eligible for testing. Once MilTICK receives a tick, MilTICK staff will:
- Identify the species of tick
- Assess how long the tick was attached to a human
- Test the tick for human pathogens (e.g., those that cause Lyme disease, Rocky Mountain spotted fever, etc.)

Results of MilTICK testing will be reported back by email to the point of contact provided on the MilTICK submission form within two weeks. Results will be used to track risks associated with tick bites, and can also be used as a “first alert” for patients who wish to seek medical guidance and/or treatment for possible exposure to tick-borne disease.

Who can submit a tick?
Individuals across all DoD Services in the following categories are eligible to submit ticks to MilTICK:
- Active Duty Service Members
- National Guard
- Reservists
- Retired Service Members
- Civilians, including Army Corps of Engineers
- Contractors
- Dependents, including spouses, parents, or children of all above categories

To determine the fastest way to submit your tick to MilTICK, follow the decision tree below.

I am eligible, and found a tick on myself or my dependent! How do I submit a tick for testing?

I am at (or can easily get to) a DoD Clinic.
Submit your tick to your clinic staff; they will submit the tick to MilTICK for you. Clinic staff will contact you with the results of the tick testing.

I have a tick kit at home.
Follow the instructions in your tick kit; fill out Page 1 of the tick-submission form completely. Put your tick in the plastic vial, and seal it in the plastic bag. Do not seal tick in tape.

Include the USDA permit and mail your kit in the pre-addressed envelope. Ensure sufficient postage has been applied.

I do not have a tick kit.
Print out the tick-submission form and USDA permit found on our website; fill out Page 1 of the tick-submission form completely.

Seal your tick in two resealable plastic bags. Do not seal tick in tape.

Mail your tick, the completed submission form, and the USDA permit in a padded envelope to: Defense Centers for Public Health – Aberdeen 8252 Blackhawk Rd ATTN: MilTICK Program Aberdeen Proving Ground, MD 21010
Ensure sufficient postage has been applied.

Contact the MilTICK team with questions or to order Tick Kits:
Phone: (410) 436-5425 or (410) 436-5421
Email: dha.apg.Pub-Health-A.mbx.tickcom@health.mil
Visit the CAC-enabled data dashboard at https://carepoint.health.mil/sites/ENTO/miltick
Visit the MilTICK website at https://phc.amedd.army.mil/topics/envirohealth/epm/Pages/HumanTickTestKitProgram.aspx

Approved for public release; distribution unlimited.

TA-695-0422