

§ 147.2

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(h) The results shall be recorded as:

N, or - (negative) when the serum-antigen mixture remains uniformly turbid.

P, or + (positive) when there is a distinct clumping of the antigen, and the liquid between the agglutinated particles is clear.

S, or ? (suspicious) when the agglutination is only partial or incomplete.

M, or missing, when samples listed on the original record sheet are missing.

H, or hemolyzed, when blood samples are hemolyzed and cannot be tested.

B, or broken, when sample tubes are broken and no serum can be obtained.

(Some allowance must always be made for the difference in sensitiveness of different antigens and different set-ups, and therefore, a certain amount of independent, intelligent judgment must be exercised at all times. Also, the histories of the flocks require consideration. In flocks where individuals show a suspicious agglutination, it is desirable to examine representative birds bacteriologically to determine the presence or absence of *S. pullorum*.)

(Approved by the Office of Management and Budget under control number 0579-0007)

[36 FR 23121, Dec. 3, 1971. Redesignated at 44 FR 61586, Oct. 26, 1979, as amended at 59 FR 12799, Mar. 18, 1994]

§ 147.2 The rapid serum test.²

(a) The procedure for the collection and delivery of blood samples in the rapid serum test is the same as that described in § 147.1(a).

(b) The selection and maintenance of suitable strains of *S. pullorum* and the composition of a satisfactory medium are described in § 147.1 (b) and (c).

(c) Large 1-inch test tubes, Kolle flasks, or Blake bottles are streaked liberally from 48-hour slant-agar cultures prepared from stock cultures of the selected strains.

(d) The antigen-growing tubes or bottles should be incubated 48 hours at 37 °C., and the surface growth washed off with a very slight amount of 12 percent solution of sodium chloride containing 0.25 to 0.5 percent phenol, filtered through lightly packed sterile absorbent cotton placed in the apex of a sterile funnel.

(e) The washings should be adjusted (using 12 percent sodium chloride con-

taining 0.25 to 0.5 percent phenol) so that the turbidity is 50 times greater than tube 0.75 of McFarland's nephelometer, or to a reading of 7 mm. by the Gates nephelometer.

(f) The individual strain antigens should be tested with negative sera for their insensitivity and with positive sera for high agglutinability in comparison with known satisfactory antigen. The antigens of the separate strains should be combined in equal volume-density and stored in the refrigerator (5 ° to 10 °C.) in tightly stoppered bottles.

(g) The tests should be conducted on a suitable, smooth plate. The serum-antigen dilution should be made so that the dilution will not exceed 1:50 when compared to the standard tube agglutination test. When testing turkey blood samples, it is desirable to use a serum-antigen dilution equivalent to the 1:25 in the tube method. The serum should be added to the antigen and mixed thoroughly by use of the tip of the serum pipette. Most strong positive reactions will be plainly evident within 15 to 20 seconds. The final reading should be made at the end of 2 or 3 minutes. Heating the plate at approximately 37 °C. will hasten agglutination. Before reading, the plate should be rotated several times.

(h) The results shall be recorded as described in § 147.1(h).

(Approved by the Office of Management and Budget under control number 0579-0007)

[36 FR 23121, Dec. 3, 1971. Redesignated at 44 FR 61586, Oct. 26, 1979, as amended at 59 FR 12799, Mar. 18, 1994]

§ 147.3 The stained-antigen, rapid, whole-blood test.³

(a) The description of the preparation of antigen is not herein included because the antigen is a proprietary product produced only under license from the Secretary of Agriculture.

(b) A loop for measuring the correct quantity of blood can usually be obtained from the manufacturer of the antigen. A satisfactory loop may be made from a piece of No. 20 gage

²The procedure described is a modification of the method reported by Runnels, Coon, Farley, and Thorpe, Amer. Vet. Med. Assoc. Jour. 70 (N. S. 23): 660-662 (1927).

³The procedure described is a modification of the method reported by Schaffer, MacDonald, Hall, and Bunyea, Jour. Amer. Vet. Med. Assoc. 79 (N. S. 32): 236-240 (1931).