

Iowa Veterinary Accreditation Handbook



Notice

Every effort is made to provide you accurate and up to date information, including contact information. However, phone numbers, policies and procedures can change. When important changes do take place, the current information can be acquired on the Iowa Department of Agriculture & Land Stewardship website:

<http://www.iowaagriculture.gov/>

Important changes can also be acquired on the USDA-APHIS Veterinary Services website:

<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth>

Please check frequently for updates!

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USEFUL INFORMATION

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IOWA DEPARTMENT OF
**AGRICULTURE &
LAND STEWARDSHIP**

USDA APHIS Veterinary Services Homepage

<https://www.aphis.usda.gov/aphis/home/>

IDALS Animal Industry Bureau Homepage

<http://www.iowaagriculture.gov/animalIndustry.asp>

Laboratory Contact Information

For specific information on samples required, samples accepted and special handling and mailing instructions, please contact the laboratory directly.

For more information on National Animal Health Laboratories:

www.aphis.usda.gov/nahln

For a list of all NAHLN labs:

http://www.aphis.usda.gov/animal_health/nahln/downloads/all_nahln_lab_list.pdf

National Veterinary Services Laboratory (NVSL)

USDA-APHIS-VS-NVSL

1920 Dayton Ave.

Ames, IA 50010

Phone: (515) 337-7212 and (515) 663-7551

Fax: (515) 337-7569

Email: NVSL_Concerns@aphis.usda.gov



For more information on NVSL:

www.aphis.usda.gov/nvsl

Frequently asked questions NVSL:

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/lab-info-services/sa_nvsl_faqs/ct_faq

Lab Related Forms:

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/lab-info-services/sa_forms_publications/ct_forms_publications

VS Submission Form 10-4:

https://www.aphis.usda.gov/library/forms/pdf/VS_Form10_4.pdf

IOWA STATE UNIVERSITY
College of Veterinary Medicine
Veterinary Diagnostic Laboratory

<https://vetmed.iastate.edu/vdl>

1850 Christensen Dr.
Ames, IA 50011-1134

Phone: (515) 294-1950 (Monday-Friday 8am-5pm)

Phone: (515) 290-1969 (**after hours**)

Fax: (515) 294-3564 (Main office)

Fax: (515) 294-6961 (Submission desk)

Email: isuvdl@iastate.edu

ISU VDL Client Web Portal

<https://vetmed.iastate.edu/vdl/resources/client-services/isu-vdl-client-web-portal>

ISU Forms

<https://vetmed.iastate.edu/vdl/submissions/forms>

Diagnostic Tests

<https://vetmed.iastate.edu/vdl/diagnostic-tests/>

Submission Information

<https://vetmed.iastate.edu/vdl/submissions/guidelines>

Rabies Testing Information

<https://vetmed.iastate.edu/vdl/submissions/rabies>

ISU VDL EZ-Ship Program

<https://vetmed.iastate.edu/vdl/submissions/packing-and-shipping/ez-ship-program>



National Veterinary Accreditation Program



The National Veterinary Accreditation Program (NVAP) has many varied facets. Therefore, we deemed it more appropriate to provide links to common parts of the program. As always, you may contact the APHIS, VS Iowa Area Office at (515)284-4140 for questions or problems.

NVAP Homepage

<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/nvap>

APHIS Approved Supplemental Training Modules

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/nvap/ct_aast

NVAP Accreditation Renewal

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/nvap/ct_renewal

Accreditation Application Form1-36A

https://www.aphis.usda.gov/animal_health/vet_accreditation/downloads/vs1-36a.pdf

NVAP Reference Guide (provides detailed Summary of Accreditation standards and guidance)

http://www.aphis.usda.gov/animal_health/vet_accreditation/downloads/nvap_ref_guide.pdf

NVAP CFR

http://www.aphis.usda.gov/animal_health/vet_accreditation/downloads/CFR_Parts_160-161-162.pdf

VSPS (VETERINARY SERVICES PROCESS STREAMLINING)

As an accredited veterinarian you can use the United States Department of Agriculture (USDA), Veterinary Services Process Streamlining (VSPS) to submit an online application for your renewal in the NVAP and to utilize their free system to create electronic certificates of veterinary inspection (eCVI) or online Coggins forms which will allow you to attach color photos to your VS 10-11.

Access to the NVAP module only requires a level one eAuthentication while access to creating eCVI or the online Coggins requires a level two eAuthentication access.

To learn more about creating an account to apply for renewal on-line follow this URL:

http://www.aphis.usda.gov/animal_health/vet_accreditation/downloads/renewal_online_process.pdf

Potential Accreditation Violations

Failure to comply fully with the standards may cause removal from the list of accredited veterinarians.

Following are examples some of the acts which jeopardize accreditation:

1. Failure to report private tuberculosis tests.
2. Accepting blood samples for regulatory diseases which were not drawn by an accredited veterinarian.
3. Failure to palpate the site of injection for the reading of the tuberculosis skin test.
4. Brucellosis vaccination of calves of improper age.
5. Brucellosis vaccination of calves without (a) proper tattoo and (b) official ear tag or registration tattoo number.
6. Issuing health certificates containing incomplete information or data not based on facts.
7. Issuing health certificates for livestock or poultry which have not been examined on the day indicated by the certificate.
8. Failure to submit proper copies of interstate health certificates to the State office within 7 days.
9. Advising persons to commit acts contrary to applicable State / Federal laws and regulations.
10. Failure to immediately report to State or Federal officials all diagnosed or suspected cases of foreign animal diseases such as classical swine fever, foot and mouth disease, vesicular stomatitis, rinderpest, African swine fever, Avian Influenza and Newcastle disease of poultry or any other foreign animal disease.
11. Failure to cooperate with County / State / Federal regulatory employees; in furnishing information and records in relation to all work coming within the scope of accreditation.
12. Participation in false monetary claims, against the State or Federal agency or making false statements on official forms.

ACCREDITATION COMPLIANCE REGULATIONS

What happens when a veterinarian breaks the Accreditation Agreement?

Most of the time when an error has been made, a VMO or State District Veterinarian is asked to talk to the veterinarian. At the time of that visit, the two will determine what happened and how best to avoid the error in the future. The VMO or State District Veterinarian is required to write a report to the AD concerning the meeting and what was decided in order to avoid the situation in the future. Once the AD receives the report, it is reviewed and a file is made. Alternatively, the AD may send a letter of instruction or warning, depending on the nature of the error, these letters are also placed in the veterinarian's file. If the same mistake is made again, repeatedly, or if several other problems arise concerning this veterinarian's accreditation, or if the AD has reason to believe that fraud or other serious violation has occurred, the AD can request that an Investigator for APHIS visit the veterinarian to determine if there is sufficient evidence available to call the veterinarian in for an informal or formal conference.

What will occur at the conference?

At the time of the conference, the following individuals will be present:

1. APHIS Compliance Officer (IES-Investigative and Enforcement Services)
2. Assistant Director (AD)
3. State Veterinarian or a representative from that office

The veterinarian in question will be given an opportunity to explain exactly what had occurred and the group will determine if there is cause for further action, i.e. a formal hearing or further legal action.

Further action may include:

1. Loss of accreditation.
2. Loss of license to practice veterinary medicine.
3. Fines, up to \$1000 per count.
4. In extreme cases, a jail term.

STATE RESPONSIBILITIES

1. Investigation of Swine TB
2. Chronic Wasting Disease
3. Inspections and licensing of:
 - a. Kennels and pet shops
 - b. Hatcheries
 - c. Rendering plants
4. Licensing of feeder pig and livestock dealers
5. Animal Welfare investigations
6. Investigations of other State reportable diseases (Trichomoniasis, Johne's, Canine brucellosis, etc.)
7. Investigations of public complaints that allege violation of State Animal Health Laws
8. Supplies such as ear tags and interstate health certificates
9. Horse and Dog Breeders Program



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FEDERAL RESPONSIBILITIES

1. Export -- Approval of isolation facilities and endorsement of certificates
2. Approval of slaughtering establishments to handle imported animals
3. Approval and inspection of establishments that receive certain animal and poultry products that are imported to the United States
4. Animal Welfare -- This is handled by the Animal Care Staff at Ft. Collins, CO
5. Issuing tag numbers for plastic tags for breeding swine
6. Issuing flock ID's and scrapie tags for sheep flocks

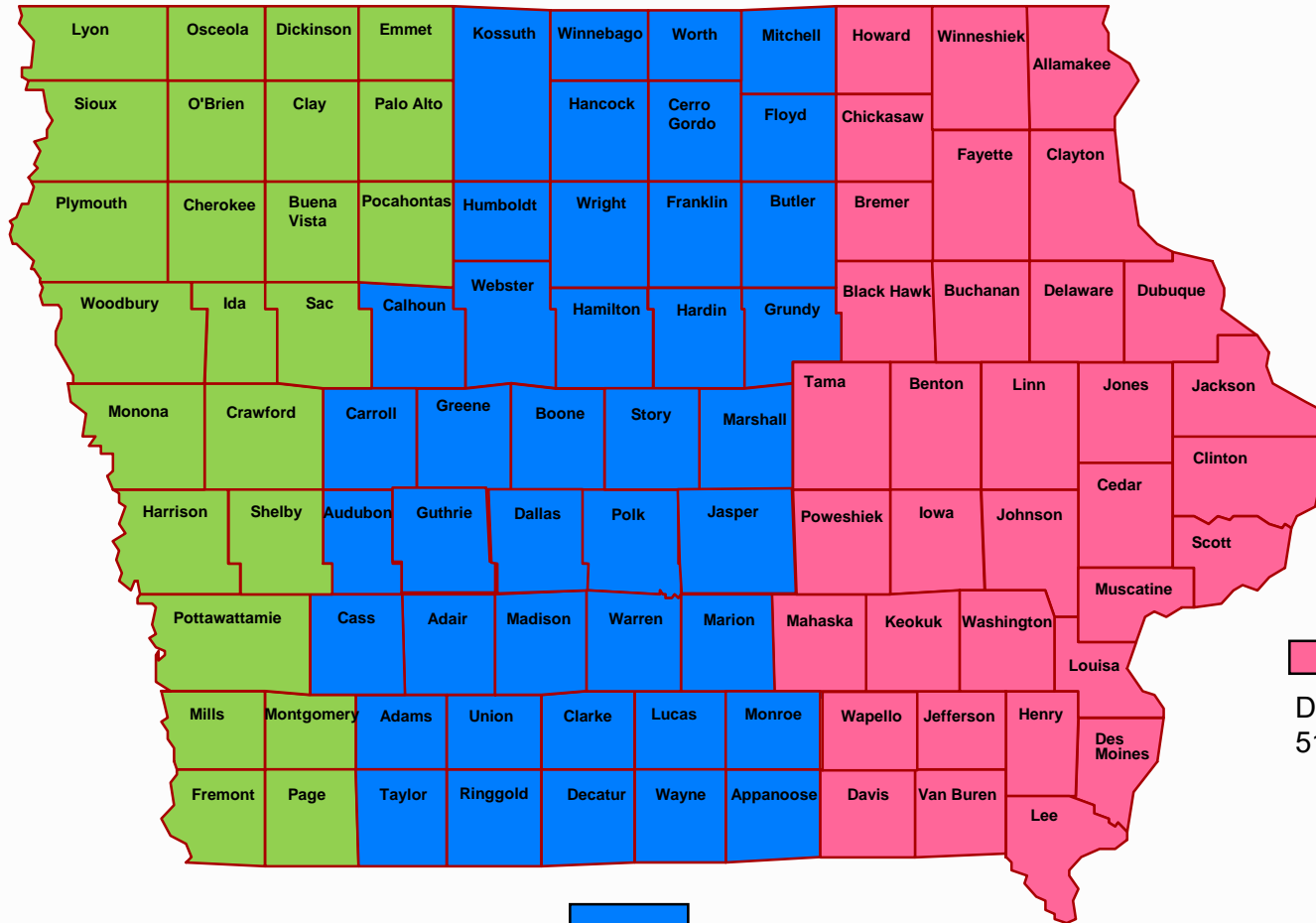


COOPERATIVE BETWEEN STATE AND FEDERAL

1. Pseudorabies investigations and herd clean-up plans
2. Brucellosis investigation and testing
3. Bovine and Cervidae Tuberculosis, including comparative-cervical testing
4. Auction Market inspections and regulatory work involving movement of livestock
5. National Animal Health Monitoring and Surveillance
6. Foreign animal disease investigations
7. Scrapie
8. Animal Disease Traceability (ADT)



Iowa Federal VMO Sections



Dr. Neil Rippke
515-669-5975 cell

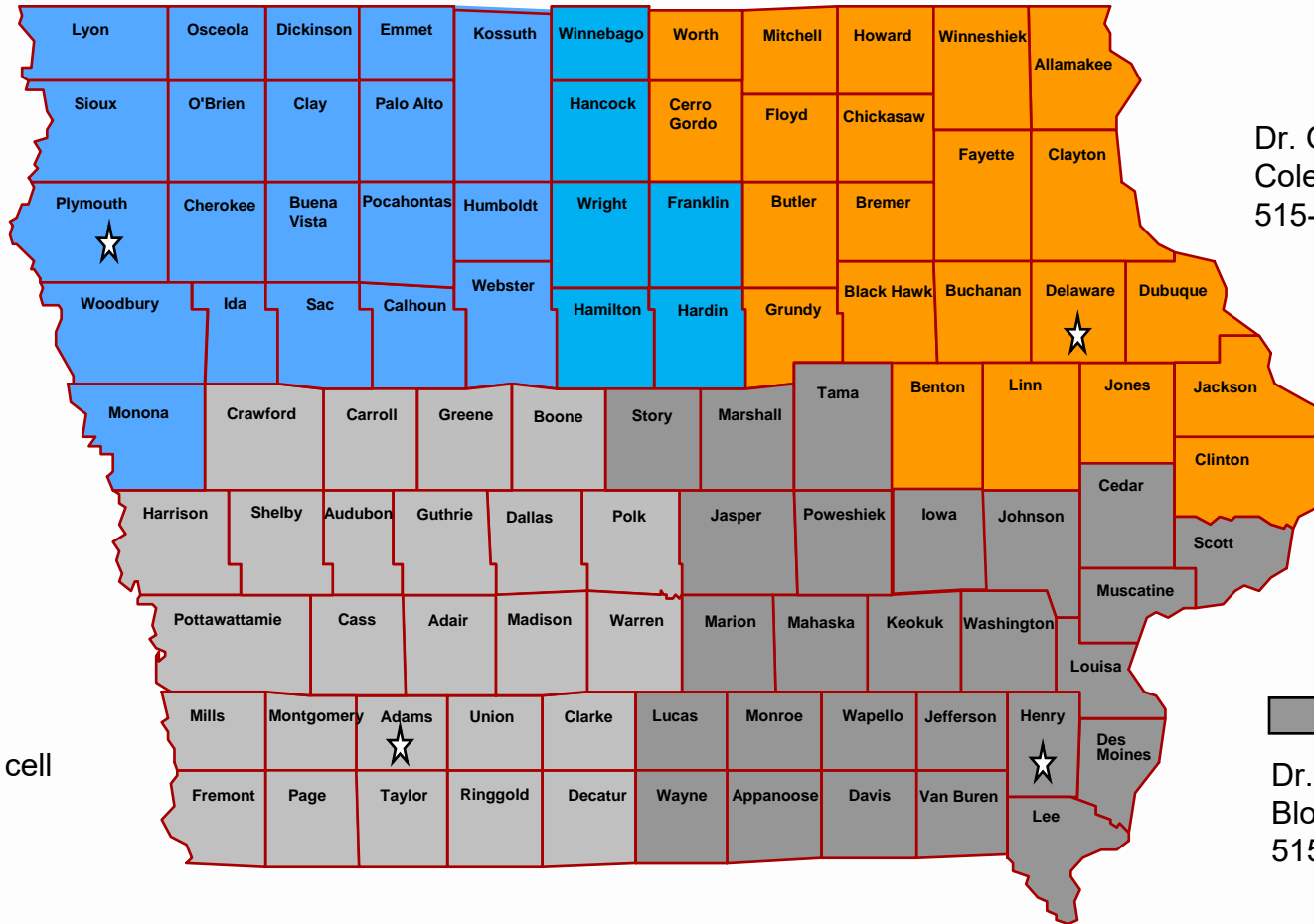


Dr. Jessica Young
515-201-6150 cell



Dr. Bailey Goos
515-350-6922

STATE VETERINARIAN DISTRICTS



Dr. Greg Schmitt
 Le Mars IA
 515-669-5633 cell

Dr. Gary E. Eiben
 Colesburg, IA
 515-669-6095 cell

Dr. Wayne Rychnovsky
 Corning, IA
 515-971-7391 cell

Dr. Kevin Taylor
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Iowa: State/Federal Co-op VMO Sections



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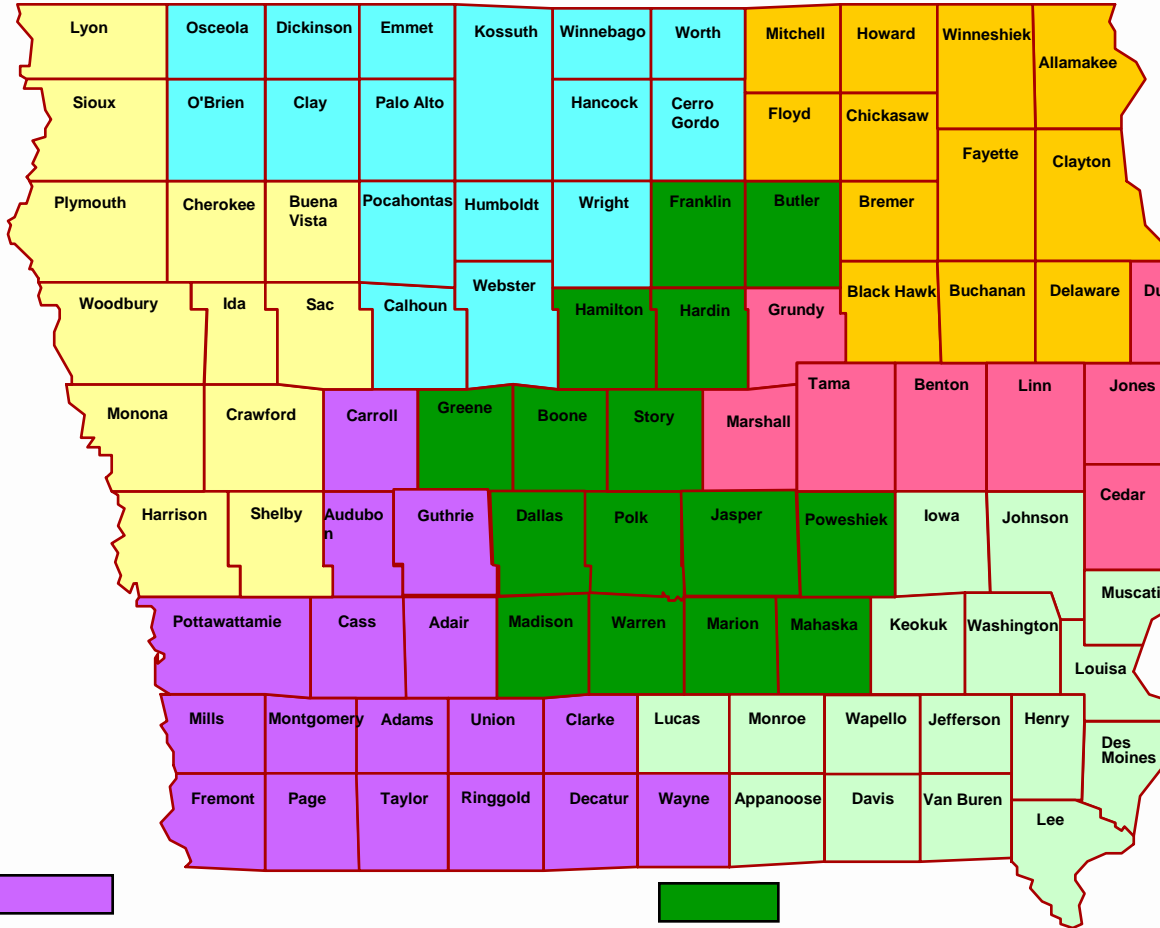
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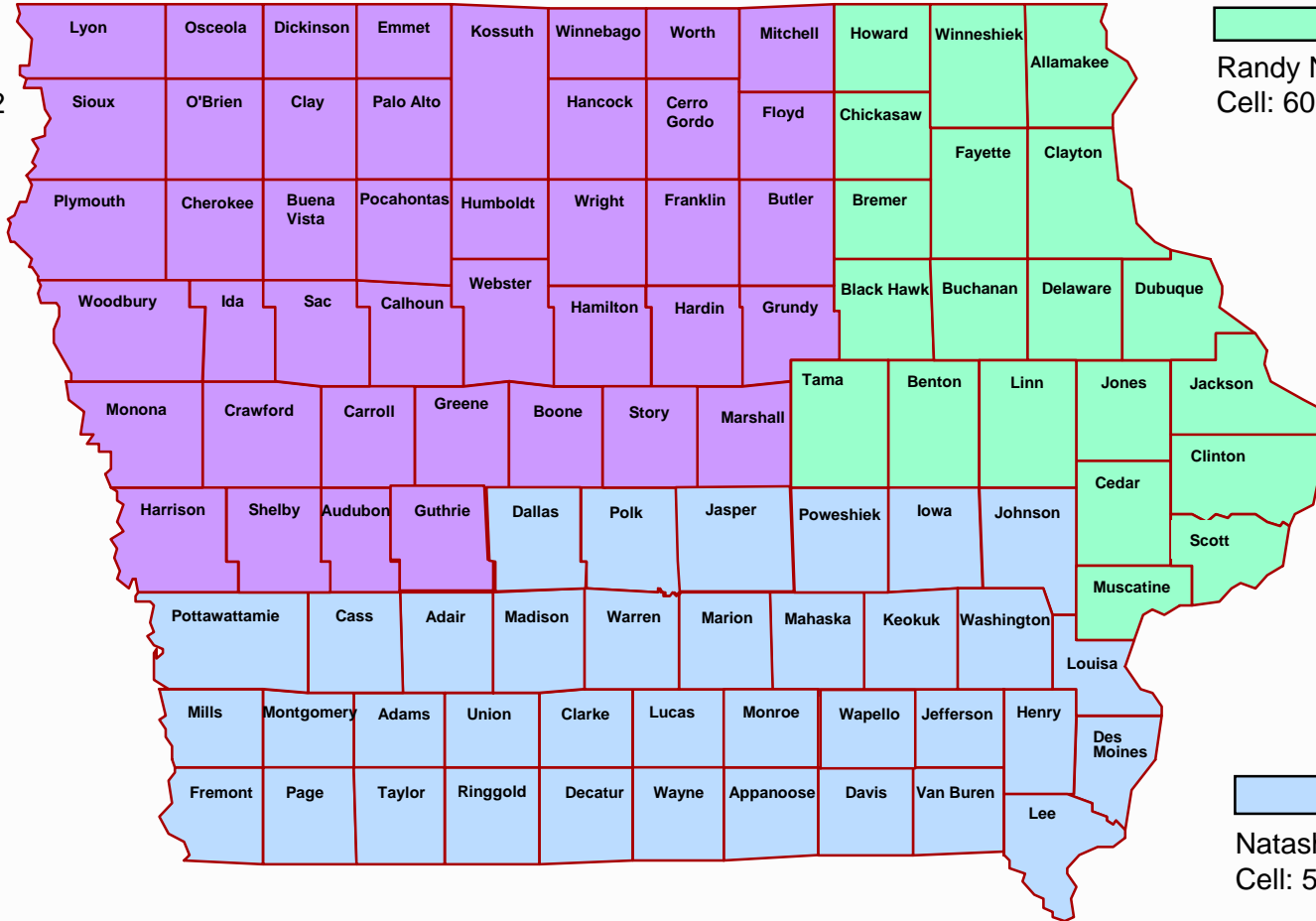
Iowa Federal AHT Sections



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Randy Nies
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Natasha Joiner
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STATE LIVESTOCK INSPECTOR DISTRICTS

1

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C: 515-333-1578

2

Marc Rue
West Union, IA
C: 515-250-3125

3

Alissa Puffett
West Des Moines, IA
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4

Emily Rogers
Moscow, IA
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5

Sam Burnight
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6

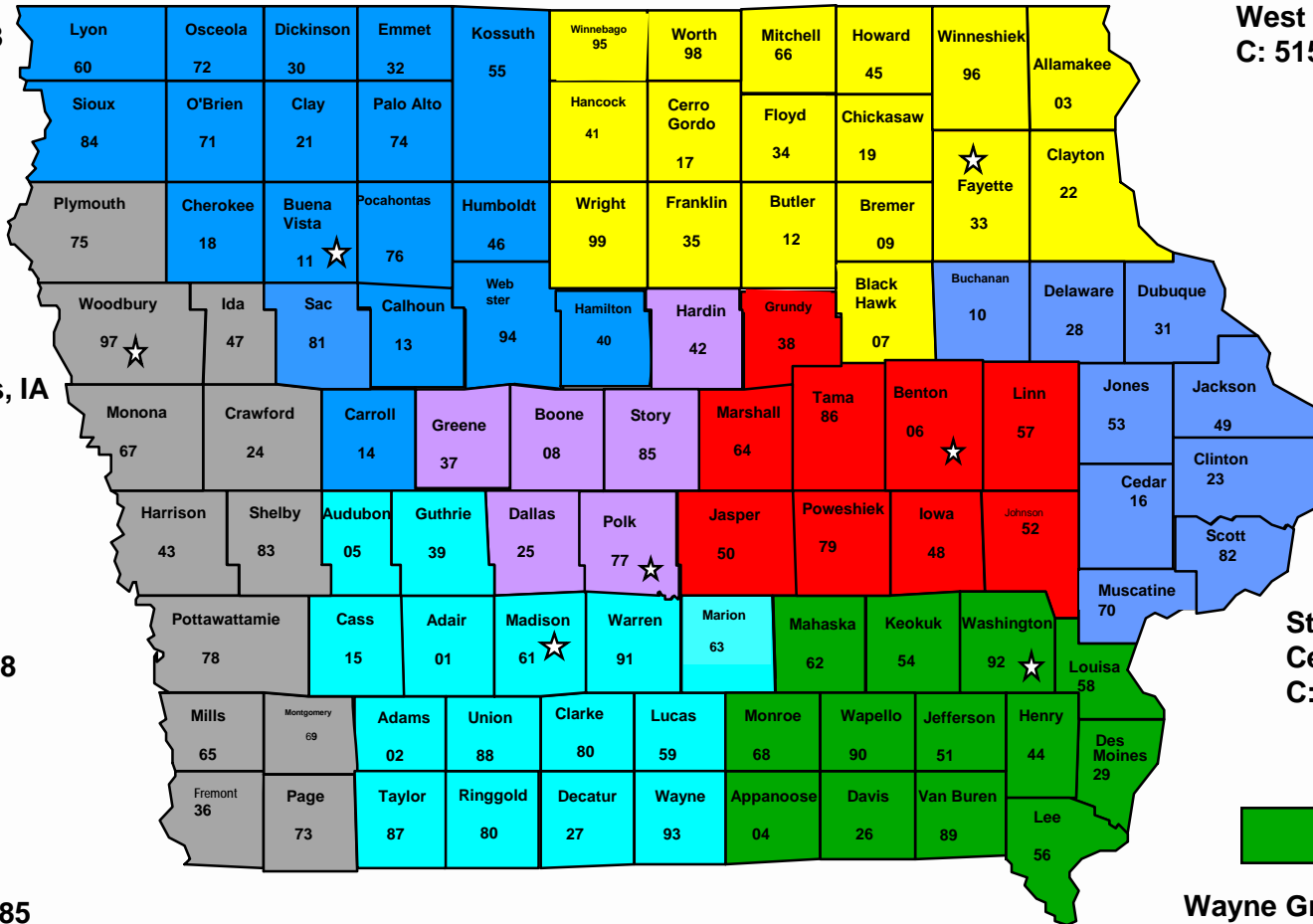
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Dixie Erdman
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Wayne Grier
Kalona, IA
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CHAPTER 64
INFECTIOUS AND CONTAGIOUS DISEASES

[Appeared as Ch 1, 1973 IDR]

[Ch 16, IAC 7/1/75 renumbered as 11.3, 12.1 to 12.33, and 16.24 and 16.25 renumbered 16.6 and 16.7
as per written instructions from Ag. Dept. 10/11/77]

[Prior to 7/27/88, see Agriculture Department 30—Ch 16]

21—64.1(163) Reporting disease. Whenever any person or persons who shall have knowledge of the existence of any infectious or contagious disease, such disease affecting the animals within the state or resulting in exposure thereto, which may prove detrimental to the health of the animals within the state, it shall be the duty of such person or persons to report the same in writing to the State Veterinarian, Bureau of Animal Industry, Wallace State Office Building, Des Moines, Iowa 50319, who shall then take such action as deemed necessary for the suppression and prevention of such disease. The diseases as classified by the Office International Des Epizooties are included. The following named diseases are infectious or contagious and the diagnosis or suspected diagnosis of any of these diseases in animals must be reported promptly to the Iowa department of agriculture and land stewardship by the veterinarian making the diagnosis or suspected diagnosis:

64.1(1) Multiple species diseases.

- Anthrax
- Aujeszky's disease
- Bluetongue
- Brucellosis (*Brucella abortus*)
- Brucellosis (*Brucella melitensis*)
- Brucellosis (*Brucella suis*)
- Crimean Congo haemorrhagic fever
- Echinococcosis/hydatidosis
- Epizootic haemorrhagic disease
- Equine encephalomyelitis (Eastern)
- Foot and mouth disease
- Heartwater
- Japanese encephalitis
- Johne's disease
- Leptospirosis
- New world screwworm (*Cochliomyia hominivorax*)
- Old world screwworm (*Chrysomya bezziana*)
- Q fever
- Rabies
- Rift Valley fever
- Rinderpest
- Surra (*Trypanosoma evansi*)
- Trichinellosis
- Tularemia
- Vesicular stomatitis
- West Nile fever

64.1(2) Cattle diseases.

- Bovine anaplasmosis
- Bovine babesiosis
- Bovine genital campylobacteriosis
- Bovine spongiform encephalopathy
- Bovine tuberculosis
- Bovine viral diarrhoea
- Contagious bovine pleuropneumonia
- Enzootic bovine leukosis

- Haemorrhagic septicaemia
- Infectious bovine rhinotracheitis/infectious pustular vulvovaginitis
- Lumpy skin disease
- Theileriosis
- Trichomonosis
- Trypanosomosis (tsetse-transmitted)
- 64.1(3) *Swine diseases.***
- African swine fever
- Classical swine fever
- Nipah virus encephalitis
- Porcine cysticercosis
- Porcine reproductive and respiratory syndrome
- Swine vesicular disease
- Transmissible gastroenteritis
- 64.1(4) *Sheep and goat diseases.***
- Caprine arthritis/encephalitis
- Contagious agalactia
- Contagious caprine pleuropneumonia
- Enzootic abortion of ewes (ovine chlamydiosis)
- Maedi-visna
- Nairobi sheep disease
- Ovine epididymitis (*Brucella ovis*)
- Peste des petits ruminants
- Salmonellosis (*S. abortusovis*)
- Scrapie
- Sheep pox and goat pox
- 64.1(5) *Equine diseases.***
- African horse sickness
- Contagious equine metritis
- Dourine
- Equine encephalomyelitis (Western)
- Equine infectious anaemia
- Equine influenza
- Equine piroplasmosis
- Equine rhinopneumonitis
- Equine viral arteritis
- Glanders
- Venezuelan equine encephalomyelitis
- 64.1(6) *Avian diseases.***
- Avian chlamydiosis
- Avian infectious bronchitis
- Avian infectious laryngotracheitis
- Avian mycoplasmosis (*M. gallisepticum*)
- Avian mycoplasmosis (*M. synoviae*)
- Duck virus hepatitis
- Fowl cholera
- Fowl typhoid
- Highly pathogenic avian influenza and low pathogenic avian influenza in poultry
- Infectious bursal disease (Gumboro disease)
- Marek's disease
- Newcastle disease
- Pullorum disease

- Turkey rhinotracheitis
- 64.1(7) *Lagomorph diseases.***
 - Myxomatosis
 - Rabbit haemorrhagic disease
- 64.1(8) *Fish diseases.***
 - Epizootic haematopoietic necrosis
 - Epizootic ulcerative syndrome
 - Gyrodactylosis (*Gyrodactylus salaris*)
 - Infectious haematopoietic necrosis
 - Infectious salmon anaemia
 - Koi herpesvirus disease
 - Red sea bream iridoviral disease
 - Spring viraemia of carp
 - Viral haemorrhagic septicaemia
- 64.1(9) *Mollusc diseases.***
 - Infection with abalone herpes-like virus
 - Infection with *Bonamia exitiosa*
 - Infection with *Bonamia ostreae*
 - Infection with *Marteilia refringens*
 - Infection with *Perkinsus marinus*
 - Infection with *Perkinsus olseni*
 - Infection with *Xenohalictis californiensis*
- 64.1(10) *Crustacean diseases.***
 - Crayfish plague (*Aphanomyces astaci*)
 - Infectious hypodermal and haematopoietic necrosis
 - Infectious myonecrosis
 - Taura syndrome
 - White spot disease
 - White tail disease
 - Yellowhead disease
- 64.1(11) *Amphibian diseases.***
 - Infection with *Batrachochytrium dendrobatidis*
 - Infection with ranavirus
- 64.1(12) *Other diseases.***
 - Camel pox
 - Chronic wasting disease
 - Leishmaniosis

Reporting is required for any case or suspicious case of an animal having any disease that may be caused by bioterrorism, epidemic or pandemic disease, or novel or highly fatal infectious agents or biological toxins and that might pose a substantial risk of a significant number of animal fatalities, incidents of acute short-term illness in animals, or incidents of permanent or long-term disability in animals.

This rule is intended to implement Iowa Code sections 163.1, 163.2, 189A.12, 189A.13 and 197.5. [ARC 9102B, IAB 9/22/10, effective 9/1/10; ARC 0230C, IAB 7/25/12, effective 8/29/12]

[Filed March 12, 1962]

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[Filed 1/13/84, Notice 12/7/83—published 2/1/84, effective 3/7/84]

[Filed emergency 3/9/84—published 3/28/84, effective 3/9/84]

[Filed 5/4/83, Notice 3/28/84—published 5/23/84, effective 6/27/84]

[Filed emergency 7/8/88 after Notice 6/1/88—published 7/27/88, effective 7/8/88]

[Filed 11/27/96, Notice 10/23/96—published 12/18/96, effective 1/22/97]

[Filed 3/28/02, Notice 2/6/02—published 4/17/02, effective 5/22/02]

USDA APHIS Reportable Diseases

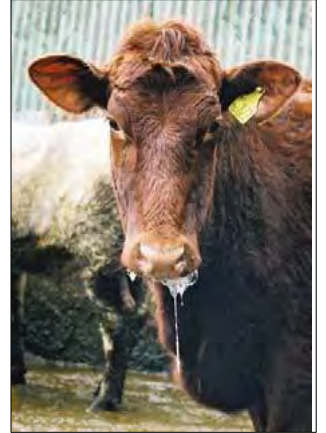
https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/monitoring-and-surveillance/sa_nahss/status-reportable-disease-us

National Animal Health Monitoring System (NAHMS)

<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/monitoring-and-surveillance/nahms>

Animal Health Surveillance USDA APHIS VS

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/monitoring-and-surveillance/SA_NAHSS



USDA Avian Influenza Defend the Flock

<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-disease-information/avian-influenza-disease>

USDA APHIS Biosecurity for Birds

<https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-disease-information/avian-influenza-disease/birdbiosecurity>

Animal Disease Traceability (ADT)

The U.S. Department of Agriculture (USDA) provides various programs that support the economic viability of animal agriculture. The Veterinary Services (VS) unit of the Animal and Plant Health Inspection Service (APHIS) works to improve health, productivity, and quality of life for animals and people and maintain and promote the safety and availability of animals, animal products, and veterinary biologics.

In early 2010, USDA Secretary Thomas J. Vilsack announced a new approach for responding to and controlling animal diseases, referred to as the Animal Disease Traceability (ADT) framework. Key principles of the framework include:

- Application to animals moved in interstate commerce.
- Administration by the States and Tribal Nations to increase flexibility.
- Encouraging the use of lower cost technology.
- Transparent implementation through the full Federal rulemaking process.

USDA published a proposed rule, “Traceability for Livestock Moving Interstate,” on August 11, 2011. The final rule was published on January 9, 2013. The regulations improve the ability of animal health officials to trace livestock when disease is found. The program must have a high level of compliance to achieve a solid infrastructure for tracing livestock.

The “Traceability for Livestock Moving Interstate” regulation establishes requirements for the official identification of livestock and documentation for certain interstate movements at title 9 of the *Code of Federal Regulations* (9 CFR), part 86. Covered livestock include cattle and bison; horses and other equine species; poultry, sheep, and goats; swine; and captive cervids. Animals of these species, unless otherwise exempt, are required to be officially identified and accompanied by an Interstate Certificate of Veterinary Inspection (ICVI) or other movement documentation. These identification and documentation requirements provide basic information essential for traceability and are the main elements for monitoring compliance. Certain disease program requirements pertaining to traceability will be considered in monitoring compliance. In addition to APHIS regulations, the criteria and policies defined in the ADT General Standards document and guidance documents will also be considered part of the monitoring activities.

ADT Summary of Federal Interstate Movement Requirements by Species

<http://www.iowaagriculture.gov/animalIndustry/IVAH/ADT.pdf>

AnimalDiseaseTraceability

USDA Animal Disease Traceability Home Page:

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/SA_Traceability



Final Rule: Traceability for Livestock Moving Interstate:

https://www.aphis.usda.gov/newsroom/2012/12/pdf/traceability_final_rule.pdf

ADT: General Standards:

https://www.aphis.usda.gov/traceability/downloads/ADT_standards.pdf

Summary of General Requirements by Species:

https://www.aphis.usda.gov/traceability/downloads/ADT_summary_species.pdf

Questions & Answers ADT Final Rule:

https://www.aphis.usda.gov/traceability/downloads/rule_movement_general.pdf

Official Ear Tags-Criteria & Options:

https://www.aphis.usda.gov/traceability/downloads/ADT_eartags_criteria.pdf

Approved Animal Identification Number (AIN) Devices:

https://www.aphis.usda.gov/traceability/downloads/ADT_device_ain.pdf

Approved National Uniform Eartagging System (NEUS):

https://www.aphis.usda.gov/traceability/downloads/ADT_device_nues.pdf

Approved Premises Identification Number Devices (PIN) for Swine:

https://www.aphis.usda.gov/traceability/downloads/ADT_device_swine.pdf



Official Tags: Record, Do Not Remove or Replace

Recording all ID also means that all management/farm ID should be recorded as well. When recording management identification, always try to associate a color with whatever you record. In other words, an animal with a Yellow 45 tag might be recorded as Y45. Colors beginning with similar letters should use a 2- or 3-letter code for clarification (BLK = Black, BLU = Blue, BRN = Brown, etc.). Sometimes a farm may have more than one animal with "45" on their tag, so denoting the color of the tag on the test chart helps distinguish between animals from a distance. Tattoos should always be recorded even if you cannot read the whole tattoo. Please note the location of the tattoo plus what you can read, with question marks representing whatever parts of the tattoo are unclear.

This is extremely important if we are to track animals accurately. We must continuously strive to make sure our test charts are as complete and accurate as possible. Imagine how hard it must be to track animals and test charts when the person who performed the CFT and the person performing the CCT recorded different IDs on the same animal. We can make it a lot easier on everybody from the epidemiologist to the folks working at the laboratory to the office staff entering test information if we record all forms of identification on our test charts.

Yes, it's sometimes hard to record all of those identification numbers, but it is necessary. If you feel that you cannot get all of the identification numbers using the testing set-up you have in place on a given farm, then you should strive to set it up in a manner allowing you to get all identification. If you're using an electronic reader or have too many ID's to fit on the test chart, then you should have additional paper with you on the farm to record additional ID's or notes if necessary. A copy of these notes should be attached to the test chart when you turn it in.

When a herd is identified with an unusual form of ID, please make a note to tell us what kind of ID it is (ex: registration number, microchip. etc.). Sometimes the form of ID is obvious to office staff, other times it is not.

Breed codes can be critical as well. When doing a trace test or trying to find an exposed animal, the veterinarian tracing it must try to identify the animal in a herd. If it's a cross-breed but is clearly predominantly one breed, then use the apparent breed code. In other words, if it walks like a Polled Hereford, talks like a Polled Hereford, and acts like a Polled Hereford, then it *is* a Polled Hereford for all practical purposes.

Finally, be sure to complete the "STATUS" column of the CFT chart. This column is CRITICAL to accredited herds. We use this field to denote Natural Additions, Purchased Additions, and Re-tagged animals.

Sometimes it is necessary to get creative on test charts. If you use any unusual notations on your test chart, make a note on the chart explaining what your notations mean, otherwise it may delay processing and could hold up somebody's quarantine release or herd accreditation. If an animal is a retag, try to include the old tag number if there's any way to confirm it.

CATTLE BREED CODES

AB	Abondance	DE	Devon	NM	Normande
AF	Africander	DF	Dutch Friesian	NR	Norwegian Red
AG	Angus	DJ	Danish Jersey	NS	Not Specified
AK	Ankina	DR	Dexter	OR	Romagnola
AL	Aldemeey	DS	South Devon	OT	Other
AM	Amerisax	DW	Danish Red & White	PA	Parthenais
AN	Aberdeen Angus	DX	Dairy Crossbred	PI	Piedmont
AR	Red Angus	ER	Eringer	PR	Pie Rouge
AW	Ankole Watusi	FA	Flamand	PS	Polled Shorthorn
AY	Ayrshire	FB	Belgium Friesian	PZ	Pinzgauer
BA	Barzona	FL	Fleckvieh	RA	Ranger
BB	Belgium Blue	FR	Fribourg	RB	Red Brangus
BC	Brockle Face	GD	Galloway (Dairy)	RD	Red Dane
BD	Blonde D'Auitaine	GR	Groninger	RE	Red
BE	Beefalo	GS	Gascone	RH	Red Holstein
BF	Beef Friesian	GU	Guernsey	RN	Roan (Blue or Red)
BG	Belted Galloway	GV	Gelbvieh	RO	Rotbunte
BH	Brahmental	HC	Hays Converter	RP	Red Poll
BK	Black	HE	Hereford	RWF	Red, White Face
BL	Brindle	HH	Horned Hereford	SA	Salers
BM	Beef Master	HO	Holstein	SB	Simbrah
BN	Brangus	HP	Hereford-Polled	SD	Shorthorn Dairy
BO	Braford	HS	Scotch Highland	SG	Santa Gertrudis
BR	Brahman	HY	Hybrid (Alberta)	SH	Shorthorn Beef
BS	Brown Swiss	JE	Jersey	SM	Simmental
BT	Brahmanstein	KB	Kobe (Wagyu)	SX	Susses
BU	Braunvieh	KE	Kerry	TA	Tarentaise
BWF	Black, White Faced	LM	Limousin	TG	Tasmanian Grey
BX	Beef Not Specified	LR	Lincoln Red	TL	Texas Longhorn
CA	Chianina	LU	Luing	WB	Welsh Black
CB	Charbray	MA	Maine Anjou	WH	White
CH	Charolais	ME	Maremmana	WP	White Park
CN	Canadienne	MG	Murray Gray	WR	West Flemish Red
CO	Corriente	MK	Marky	XX	Crossbreds/Mixed
CS	Char-Swiss	MO	Montbeliard	ZE	Zebu
DB	Danish Black/White	MR	Marchigiana		



STATE CODE NUMBERS (USDA)

11 Maine	56 South Carolina
12 New Hampshire	57 Georgia
13 Vermont	58 Florida
14 Massachusetts	59 Dominican Republic
15 Rhode Island	61 Kentucky
16 Connecticut	63 Tennessee
21 New York	64 Alabama
22 New Jersey	65 Mississippi
23 Pennsylvania	71 Arkansas
31 Ohio	72 Louisiana
32 Indiana	73 Oklahoma
33 Illinois	74 Texas
34 Michigan	81 Montana
35 Wisconsin	82 Idaho
41 Minnesota	83 Wyoming
42 Iowa	84 Colorado
43 Missouri	85 New Mexico
45 North Dakota	86 Arizona
46 South Dakota	87 Utah
47 Nebraska	88 Nevada
48 Kansas	91 Washington
50 Delaware	92 Oregon
51 Maryland	93 California
52 Virginia	94 Puerto Rico
54 West Virginia	95 Hawaii
55 North Carolina	96 Alaska

Iowa Premises Identification Program

- The Animal Disease Traceability Program is a national animal health program that is being developed by the USDA and state animal health agencies, in cooperation with industry. This program includes premises identification.
- Premises Identification involves assigning a unique number to premises involved in animal agriculture. Allied agricultural operations and non-producer participants can also be assigned Premises Identification Numbers.
- The Premises Identification will involve recording information such as addresses, name of contacts, the type of premises, and a contact phone number. This information will be maintained by IDALS and key pieces will be shared with the USDA to be available for animal disease tracing purposes.
- At present time, obtaining a premises identification number is completely voluntary. Premises Identification is done at no cost to the producer.

What constitutes a Premise?

- A premises is any location involved in livestock commerce or the movement of animals or poultry
- Any geographically unique location in which agricultural animals are raised, held, or boarded
- Two premises within a quarter mile of each other will be covered by a single ID number

How to register premises: Complete Premises Application Form

What is needed for Premises Registration?

- 911 street address
- Contact name
- Phone number
- Species
- Registering your premise is done at no cost to the producer

Once the form is returned, we will enter the information into the database

Premises registration is a voluntary program in Iowa; we do not have our own state premises identification number database. We use the USDA Standard Premises Identification System (SPIS).

The option for obtaining a premise ID in Iowa, which is voluntary, is to complete an application for a federal premises ID number and submit your request to our Department. If you do not want to participate in the federal premises registration program, a premises ID cannot be provided.

Purpose of having a premises ID: Is to create a database that will allow a rapid traceback in the event of a disease concern.

There are times when premise ids are required from various entities that are not part of the State Government.

A few examples would be:

- If you participate in Pork Quality Assurance (PQA) one of the requirements are to have a premises id.
- Some Exhibition
- Some Meat and Meat Product Merchant Wholesalers
- Interstate or Intrastate Movements

Please contact Dr. Jeff Kaisand, Iowa State Veterinarian or Dee Clausen, Program Coordinator if you have questions at (515) 281-8236.

Iowa Department of Agriculture and Land Stewardship

Wallace State Office Building
502 E 9th St.
Des Moines, Iowa 50319

For IDALS Use Only	
Date received and by:	Date: _____ By: _____
Premises ID No:	_____

Premises Identification Number Application (Print Legibly)

Business/Farm Account Information

Business/Farm Name: _____

Primary Contact: _____
(Landlord) Last First M.I.

Secondary Contact: _____
(Lessee, if applicable) Last First M.I.

Business/Farm Mailing Address: _____
911 Street Address

City State Zip Code County

For contact numbers check box for preferred method of contact

Business Phone: _____ P Fax Number: _____ P

Cell Phone: _____ P E-mail Address: _____ P

Home Phone: _____ P Other (describe): _____ P

Signature eSignature Required **Date:** _____

Business Type (Check one)

Individual Partnership Incorporated Non-Profit Organization LLC LLP

Operation Type (Check all that apply)

Producer Unit/Farm Exhibition, Zoo Market/Collection Point Port of Entry

Tagging site Veterinary Clinic Non-producer Participant Quarantine Facility

Slaughter Plant Rendering Laboratory/Research Semen Collection/Embryo Transfer

Premises Information

Primary location where livestock resides, if more than one location and animals are managed separately, apply for multiple premises ID's on additional forms

Premises Address: Check if same address as above, **OR** list different address below

911 Street Address

City State Zip County

Premises Name/Description: _____ (ex. "home place" or "feed yard")

Premises Type (Check all that apply)

Producer Unit/Farm Exhibition, Zoo Market/Collection Point Port of Entry

Tagging site Veterinary Clinic Non-producer Participant Quarantine Facility

Slaughter Plant Rendering Laboratory/Research Semen Collection/Embryo Transfer

Species at Premises (Check all that apply)

<input type="checkbox"/> Bison and/or Cattle:	Cow/Calf	Dairy	Feedlot	Seedstock			
<input type="checkbox"/> Swine:	Boar Stud	Farrow	Farrow/Finish	Finish	Nursery	Seedstock	
<input type="checkbox"/> Poultry:	Chickens	Ducks	Geese	Guineas	Pheasants	Quail	Turkeys
<input type="checkbox"/> Goats:	Dairy	Meat	Other (list): _____				
<input type="checkbox"/> Cervids:	Elk	Whitetail Deer	Other (list): _____				
<input type="checkbox"/> Camelids:	Alpacas	Llamas					
<input type="checkbox"/> Ratites	Emu	Ostrich					
<input type="checkbox"/> Sheep							
<input type="checkbox"/> Horses							

Additional Land Descriptions

Legal Land Description* _____
(Required if no address) Township Range Section

GPS Coordinates* _____
(Optional) Latitude (Decimal degrees) Longitude (Decimal degrees)

IOWA DEPARTMENT OF AGRICULTURE AND LAND STEWARDSHIP

Tips on Filling out Health Papers

- In Iowa you need to be an accredited veterinarian before you can issue health certificates. Use the accredited number issued to you by USDA APHIS when filling out papers.
- Find out the types of health papers the State has and how to use them.
- Iowa has:
 - **Form M** – Used for animals moving intrastate (within the State of Iowa), do not use for out of state movement.
 - **Form O** – Used for animals moving intrastate or out of state, when in doubt use this form.
 - **Form DC** – Used for dogs and cats.
- When you fill out a health paper for movement to a new premises find out where the animals are going, and then call the State of destination for the rules for that particular species.
 - A. Ask if you need a permit number.
 - B. Ask if any statements, other than the Certification by Inspecting Veterinarian, need to be on the health paper.
 - C. Ask what tests, if any, are to be done prior to shipment.
- You have to inspect the animals, don't bypass this step!!
- Make sure you write down the correct animal ID information on the health paper. Include all forms of ID (tattoos, brands, metal tags, ear tags, etc.)
- Make sure you write down the results, dates, and laboratories used for any tests.
- Fill out the rest of the paper as necessary. Sometimes your staff will fill in the paper, remember you are responsible for the paper so you need to be the last to review it.
- **Don't forget to date it (inspection date and date you signed), and sign it!**



Special Notes for Shows, Exhibitions, and Fairs

- Call and get the official health rules for each show, exhibition, or fair as some rules will vary.
- If there is a chance that the animal will be sold to a new owner then put each animal on an individual health paper. Make a photocopy of the paper for your records and send the whole paper (all copies) with the owner.

IDALS Request for Veterinary Supplies Order Form:

<http://www.iowaagriculture.gov/animalIndustry/pdf/forms/RequestforSuppliesForm101614.pdf>

2019 State Animal Health Officials Contact Information

<https://iowaagriculture.gov/sites/default/files/animal-industry/pdf/SAHO2019.pdf>

<http://www.interstatelivestock.com/>

<https://www.globalvetlink.com/>

Form O – Used for animals moving intrastate or out of state, when in doubt use this form

OWNER AND/OR CONSIGNOR		CONSIGNEE AND DESTINATION		RECONSIGNEE AT PUBLIC SALE	
NAME JW Farms	NAME Bill Smith	NAME	NAME	NAME	DATE
STREET 123 Happy Trail	STREET 1800 Ivy Ave.	STREET	STREET	STREET	
CITY Anytown, IA	CITY Boonville, MO	CITY	CITY	CITY	
COUNTY Adams	COUNTY Wadaway	COUNTY	COUNTY	COUNTY	
PREMISE ID NO. 00JWBZY	PREMISE ID NO. 00WRYT	PREMISE ID NO.	PREMISE ID NO.	PREMISE ID NO.	

SPECIES	Number in Shipment	AREA STATUS		HERD STATUS			INSPECTION DATE	PERMIT NUMBER
		Brucellosis	Tuberculosis	Brucellosis	TSE	Azarsky's (PRV)		
<input checked="" type="checkbox"/> Cattle	2	<input checked="" type="checkbox"/> Free	<input checked="" type="checkbox"/> Free	Classified or Vaccinated Number	Accredited Herd Number	Qualified Firm Number	10-1-16	M01480
<input type="checkbox"/> Swine		<input type="checkbox"/> Class A	<input type="checkbox"/> Reproductively					
<input type="checkbox"/> Horses		<input type="checkbox"/> Class B	<input type="checkbox"/> Modified					
<input type="checkbox"/> Sheep		<input type="checkbox"/> Class C	<input type="checkbox"/> Accredited					
<input type="checkbox"/> Other								

IDENTIFICATION TAG or REGISTRY NUMBER	DESCRIPTION OF ANIMALS	AGE	SEX	D	Tuberculin (Treadwell)		Brucellosis Test			Other Tests
					NU Date	Date	Brucellosis Vaccination	Date or Tattoo	Lab Results	
42AAA1234	1300# Hereford cow	5	F	HE						RVI
42AAB0014	1500# Black Angus cow	4	F	AG						RV2

OWNER/AGENT STATEMENT (WHERE APPLICABLE): I certify the animals in this shipment are those identified herein listed on this certificate. Owner/Agent Signature: <i>Jay Walton</i> Printed Name: Jay Walton Address: 123 Happy Trail City, State, Zip: Anytown, IA 23456	CERTIFICATION OF ISSUING VETERINARIAN: I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable diseases, (except where noted). The vaccinations and results of tests are as indicated on the certificate. To the best of my knowledge the animals listed on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied.	Vets Accreditation Code: 14265 Accredited Veterinarian Signature: <i>J. Doolittle</i> Printed Name: James Doolittle, DVM Address: 4444 Bovine Dr. City, State, Zip: Cowchip, IA 52400 Telephone No.: 555-867-5301
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Iowa Health Requirements Governing the Admission Of Animals:
<http://www.iowaagriculture.gov/animalIndustry/animalAdmissionRegs.asp>

Form DC-Certificate of Veterinary Inspection for Cats/Dogs

STATE OF IOWA

DEPARTMENT OF AGRICULTURE AND LAND STEWARDSHIP Bureau of Animal Industry

Certificate of Veterinary Inspection for Cats /Dogs

DC 507857

Interstate Shipment

Exhibition

Sale

SHIP VIA:

Air

Auto

Rail

Ship

Owner or Consignor John Doe

Consignee Jane Roe

Address 123 Canine Ave.

Address 111 Feline Lane

City Anytown, IA 98765

City Anywhere, NE 00001

Telephone Number 555-678-0000

Telephone Number 555-234-0000

DESCRIPTION	BREED / COLOR	SEX	AGE / DOB	TATTOO MICROCHIP NUMBER	RABIES TAG NUMBER	RABIES VACCINE TYPE		MANUFACTURER	SERIAL NUMBER
						<u>1 year</u> Killed	<u>3 year</u>		
Rover	<u>Black Lab</u> Black	M	4-1-12	N/A	087654	<u>ImRab3</u>	<u>9-1-15</u>	Merial	<u>12345</u> 987654

REMARKS:

I hereby certify that the animals listed above have been examined by me and found to be free from contagious and infectious diseases to the best of my knowledge. To my knowledge, the animals listed have not been exposed to rabies and have not originated from a rabies quarantine area.

Signature of Licensed Veterinarian Jim Herriot, DVM

Iowa Vet License # 0002

Typed or Printed Name Jim Herriot

Date Issued 6/30/2014

Name of Veterinary Hospital/Clinic All Creatures Clinic

Telephone Number 515-777-3333

Address 1910 Adams St. City Cowtown

State IA Zip Code 54321

Original (Pink) copy to accompany shipment. Mail two copies (Canary & Green) to the State Veterinarian. Retain last copy (Green) unless required for air shipment. 009-0127 (Rev. 02/10)

Form M-Intrastate Certificate of Veterinary Inspection

CERTIFICATE OF INSPECTION
INTRASTATE SHIPMENT ONLY
 IOWA DEPARTMENT OF AGRICULTURE AND LAND STEWARDSHIP
 BUREAU OF ANIMAL INDUSTRY
 Des Moines, Iowa 50319
 Bill Northey
 Secretary of Agriculture



Jim Suffolk Seller 1313 Mockingbird Lane Address
Des Moines, IA City Polk County

Official Ear Tag Tattoo or Reg. Ear Notch <i>scrapie ID</i>		<input type="checkbox"/> Cattle <input type="checkbox"/> Swine <input checked="" type="checkbox"/> Other Description or Breed	A G E	S E X	Testing Information			Other
					Lab	Date		
					PRV	BAPA Card	Vacc Date or Tattoo	Date Results
<u>IA 1415</u>	<u>0105</u>	<u>Suffolk</u>	<u>6m</u>	<u>F</u>				
<u>MO 1216</u>	<u>1430</u>	<u>Suffolk x</u>	<u>8m</u>	<u>F</u>				
<u>MN 1010</u>	<u>0115</u>	<u>Hamp</u>	<u>1yr</u>	<u>M</u>				

Cattle sold on private test to be held apart from other breeding cattle until laboratory confirmation is received. Swine to be held separate and apart under quarantine for 30 days after movement.

Herd of origin status: _____ Date of last herd status test: _____
Bob Dorset Purchaser 123 Hampshire Ave. Address
Prescott, IA City Adams County

I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing any signs of infections, contagious, and/or communicable diseases (except where noted). Inspection valid within 30 days from date of signature below.

Date 11-5-16 James Merino, DVM
 Signature of Veterinarian

009-0549/Form-M (Rev 7/07) WHITE - ACCOMPANY SHIPMENT YELLOW - VETERINARIAN PINK - IDALS



OWNER-SHIPPER STATEMENT (OSS)

OSS may be used for the following interstate movement.

All movements are subject to approval by the shipping and receiving states.

- Farm of origin directly to an approved market or livestock tagging site
- Farm of origin directly to slaughter
- Dealer’s premises directly to slaughter
- Other movements as approved

Address animals moved from:				
Street/Road Address	City	State		
Destination (Livestock Market, Tagging Site or Buying Station Name):				
Owner name:				
Owner mailing address:				
Address:	City:	State	Zip	
Shipper name:				
Shipper address:				
Address:	City:	State	Zip	
Species and number of each:				
Cattle <input type="checkbox"/> _____	Goats <input type="checkbox"/> _____	Sheep <input type="checkbox"/> _____	Swine <input type="checkbox"/> _____	
Horses <input type="checkbox"/> _____		Other <input type="checkbox"/> _____		
Signature:				
_____		OR	_____	
Owner		Shipper		

- Animals are being shipped directly to an approved tagging site for ID.
or
- Official ID for each animal in the shipment as required in 9 CFR is recorded below.

Please indicate species by C –cattle, G – goats, SH – sheep, SW –swine, H – horse, O - other

*A separate listing of official animal identification numbers may be attached to this form.

Certificates of Veterinary Inspection (CVIs)



Some of the enhanced features include:

- An animal upload capability that allows an Excel spreadsheet or CSV file of animal information to be uploaded with multiple animal identifiers,
- The capability for a user to create a number of CVI templates and certificate statements and save them to an account for future use,
- Storage and access to commonly shipped individual animal or group descriptions for one click data-entry on future documents,
- Rapid addition of lab tests and vaccination information to each individual animal or a group of animals,
- Accredited veterinarians and labs can enter and process Coggins forms for multiple horses at one time,
- A quick-copy auto-fill feature that allows copying of age, breed, sex, test results, and more from one animal to all the following animals with just one click. If sequential identification numbers are being used, it can “add 1” to each subsequent line, and
- Storage of an electronic copy of an issued CVI for future reference.

WHY CREATE CERTIFICATES ELECTRONICALLY IN VSPS?

VSPS is FREE to all users (accredited veterinarians, health technicians, NVSL-approved labs and State animal health officials). There are many benefits when you create an electronic certificate of veterinary inspection:

- It saves time!
- They’re much easier to read than paper forms.
- They assist State health officials in tracking livestock movements in and out of their States.
- They’re easily searchable to find animal identification and to locate animal certificates.
- You can electronically store all of your documents in one place.
- It’s easier to share information with State and other animal health officials.
- It’s easier to share documents between practice members.

More information about the Interstate Module in VSPS can be found at:
<https://www.aphis.usda.gov/vs/vsps/accredited-veterinarians.pdf>

Import and Export Requirements for Animals

Export - Federal Government (USDA, APHIS, Veterinary Services) has the sole responsibility for establishing minimum U.S. requirements for the export of livestock and poultry. As such, USDA, APHIS, Veterinary Service must endorse all international health certificates for these animals.



Requirements of Foreign Countries - Call the USDA, APHIS, Veterinary Services Area Office in Des Moines for information on specific requirements, for advice, and for help. It is very important that you fully understand a country's requirements, as knowledge of isolation and testing protocols are critical to successful export of animals, semen, and embryos.

USDA Veterinary Services does not regulate the export of pet dogs and cats, but they ...

1. Are willing to help, but do charge a user fee for endorsement of small animal CVI's.
2. Will endorse international health certificates for pet dogs and cats if required by a foreign country.
3. Owners or accredited veterinarians need to contact the embassy or consulate of the importing country as they are often a good source of current information on regulations concerning small animal imports.

Common Problems with International Health Certificates: They are similar to those encountered with Interstate Health Certificates:

1. Failure to be timely.
2. Timing of tests, treatments, and isolation periods must be considered to meet all regulations and to allow adequate time for paperwork to be endorsed at the Area Office for USDA, APHIS, Veterinary Services.
3. Improper Identification.
4. You MUST record all OFFICIAL identification, but it is helpful to note any additional identification.
5. Improper Tests Performed (e.g., EIA, and Bluetongue tests for animals to Canada).
6. Failure to understand and properly record certification statements (Certifications and statements must be recorded EXACTLY as written by the importing country).

Why does USDA, APHIS, Veterinary Services regulate exports?

1. To protect our export markets.
2. Political, economic, and health reasons.
3. To avoid political embarrassment or conflict.
4. To prevent the spread of disease internationally.

Imports- USDA Vet Services regulates imports so as to prevent the intro of Foreign Animal Diseases.

General Considerations:

1. The United States import requirements vary by the country of origin and species
2. Import permits and health certificates are required to enter the United States
3. All animals are inspected on arrival
4. Quarantine facilities are required and are paid at the owner's expense



Importation of some species is regulated by other Federal agencies:

- **Fish and Wildlife Services** - regulate the importation of species protected by the Convention on International Trade of Endangered Species (CITES).
- **Public Health Service / Center for Disease Control and Prevention** - Regulate the importation on nonhuman primates, dogs, and cats.



User Fees - are in effect for most imports. People interested in importing animals or animal products should contact USDA, APHIS, Veterinary Services for specific requirements and fees.

<https://www.aphis.usda.gov/aphis/pet-travel/pet-travel-info-and-guidance-document/pet-travel-endorsement>

Import Issues Awareness - Accredited Veterinarians need to be aware of the fact that animals entering the country can be potential carriers of foreign animal diseases. Examples of instances that have occurred: a dog with screwworm larva; ostriches and snakes with exotic ticks; psittacine birds with Exotic Newcastle Disease.

National Import Export Services/Service Center (SC) State-by-State Listing

https://www.aphis.usda.gov/animal_health/downloads/nies_contacts/sc.pdf

APHIS Pet Travel Website

<https://www.aphis.usda.gov/aphis/pet-travel>



APHIS Form 7001: International Certificate of Health Examination for Small Animals

<https://www.aphis.usda.gov/library/forms/pdf/APHIS7001.pdf>

Veterinary Export Health Certification System (VEHCS)

<http://www.iowaagriculture.gov/animalIndustry/IVAH/VEHCS.pdf>

APHIS IRegs-Livestock Export

https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/export/iregs-for-animal-exports/ct_iregs_animal_exports_home



How do I get a health certificate endorsed by the USDA, APHIS, Veterinary Services?

Exporters seeking to ship animals or animal products outside the United States from Illinois, Indiana, Iowa, Kentucky, Michigan, Minnesota, Ohio, or Wisconsin can use any of the six Service Center 3 offices.

There are two options for having a health certificate endorsed:

- Mail the documents to the office nearest you (*See instructions towards the end of this email*).
- Call and Schedule an appointment at the office nearest you.
 - *Appointments are available Monday-Friday 9:00 am – 2:00 pm*

Service Center 3 Office Locations

<p><u>Illinois</u></p> <p>USDA, APHIS, VS Attention: Export 3410 Hedley Road Springfield, IL 62711</p> <p>Telephone (217) 547-6032 Fax (217) 547-6031 Email: vspsil@aphis.usda.gov</p>	<p><u>Iowa, Minnesota, and Wisconsin</u></p> <p>USDA, APHIS, VS Attention: Export 1111 Deming Way, Ste. 100 Madison, WI 53717</p> <p>Telephone (608) 662-0630 Fax (608) 662-0601 IA Email: iowaexport@aphis.usda.gov MN Email: vsppmn@aphis.usda.gov WI Email: vspswi@aphis.usda.gov</p>	 <p>Service Center 3 serves Exporters in Illinois, Indiana, Iowa, Kentucky, Michigan, Minnesota, Ohio and Wisconsin</p> 
<p><u>Michigan</u></p> <p>USDA, APHIS, VS Attention: Export 3001 Coolidge Road, Ste. 325 East Lansing, MI 48823</p> <p>Telephone (517) 337-4700 Fax (517) 337-4722 Email: vspsmi@aphis.usda.gov</p>	<p><u>Kentucky</u></p> <p>USDA, APHIS, VS Attn: Export Department 105 Corporate Drive, Suite H Frankfort, KY 40601</p> <p>Telephone: (502) 848-2043 Fax (502) 848-2048 Email: vspsky@aphis.usda.gov</p>	
<p><u>Ohio</u></p> <p>USDA, APHIS, VS Attention: Export 12927 Stonecreek Drive Pickerington, OH 43147</p> <p>Telephone (614) 856-4735 Fax (614) 866-1086 Email vspsoh@aphis.usda.gov</p>	<p><u>Indiana</u></p> <p><i><u>(LIMITED SERVICE - BY APPOINTMENT ONLY)</u></i></p> <p>USDA, APHIS, VS Attention: Export 5685 Lafayette Road, Suite 400 Indianapolis, IN 46254</p> <p>Telephone (317) 347-3100 Fax (317) 347-3311 Email: vspsin@aphis.usda.gov</p>	



Before making plans to travel internationally with your pet, visit our new Pet Travel website at <https://www.aphis.usda.gov/aphis/pettravel> for current information on what's required.

For information on bringing your pet(s) back into the United States please visit <http://www.cdc.gov/animalimportation/BringingAnimalToUs.html>



Additional Information for Animal Certificates

Include the following items in your mailing or bring to one of our offices:

For some countries if you are traveling with more than one pet each must have its own documentation, as well as additional payment.

- The health certificate
- Rabies vaccination certificate
- Payment:
 - Check or money order made payable to the USDA
 - We accept all major credit/debit cards
 - We only accept credit/debit cards, checks, and money orders- NO CASH
 - If no testing is required, the cost is \$38.00 per certificate
 - If testing is required, the cost is \$121 for the first certificate and \$7 for each additional certificate in the same shipment.
 - *We do not charge a user fee for service animals. Emotional support animals require documentation from an authority declaring the animal as being a service animal.*

Mailing Instructions

NOTES:

- Mailed packages take 1-3 business days to endorse.
- Overnight the package to an Area Office using a service provider that uses a tracking number feature such as UPS, FedEx or USPS Priority Express. This will allow you to track the progress of your package and will decrease the chances of it being lost in the mail system.
- Include a return label so that we can return your package. Please use a service provider that uses a tracking number feature such as UPS, FedEx or USPS Priority Express. *(Record the tracking number.)*
 - **We cannot accept a FedEx or UPS label with your credit card number listed as the payment method.**
 - If a return label is not included we will return your package using USPS First Class

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0333. The time required to complete this information collection is estimated to average .25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 U.S.C. 21.43.9; CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

UNITED STATES INTERSTATE AND INTERNATIONAL
CERTIFICATE OF HEALTH EXAMINATION
FOR SMALL ANIMALS

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such document knowing it to be false, fictitious, or fraudulent may be subject to a fine of not more than \$10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 1001).

1. TYPE OF ANIMAL SHIPPED (select one only)
 Dog Cat Other _____
 Nonhuman Primate Ferret Rodent

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY

3. TOTAL NUMBER OF ANIMALS

4. PAGE

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)



USDA License/or Registration Number (if applicable)

7. ANIMAL IDENTIFICATION

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED - COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP	RABIES VACCINATION			OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
					<input type="checkbox"/> 1 YEAR	<input type="checkbox"/> 2 YEARS	<input type="checkbox"/> 3 YEARS	Date	Product Type and/or Results
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

9. REMARKS OR ADDITIONAL CERTIFICATION STATEMENTS (WHEN REQUIRED)

VETERINARY CERTIFICATION: I certify that the animals described in box 7 have been examined by me this date, that the information provided in box 8 is true and accurate to the best of my knowledge, and that the following findings have been made ("X" applicable statements).

- I have verified the presence of the microchip, if a microchip is listed in box 7.
- I certify that the animal(s) described above and on continuation sheet(s), if applicable, have been inspected by me on this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure thereto, which would endanger the animal or other animals or would endanger public health.
- To my knowledge, the animal(s) described above and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and has/have not been exposed to rabies.

ENDORSEMENT FOR INTERNATIONAL EXPORT (IF NEEDED)

PRINTED NAME OF USDA VETERINARIAN

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN

LICENSE NUMBER AND STATE

Accredited Yes No
If yes, please complete below

NATIONAL ACCREDITATION NUMBER

SIGNATURE OF USDA VETERINARIAN Apply USDA Seal or Stamp here

DATE

NOTE: International shipments may require certification by an accredited veterinarian.

SIGNATURE OF ISSUING VETERINARIAN

DATE

APHIS Form 7001
(NOV 2010)

This certificate is valid for 30 days after issuance

** Not accepted by North Dakota for interstate movement of small animals

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for these information collections are 0579-0020, 0101, 0155, 0278, and XXXX. The times required to complete these information collections is estimated to average .5 to 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0020, 0101, 0155, 0278, and XXXX

This certificate is authorized by law (21 U.S.C. 112); while you are not required to respond, no health certificate can be validated unless the data requested is provided.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

UNITED STATES ORIGIN HEALTH CERTIFICATE
(This document does not replace the Certificate of Inspection of Export Animals, VS Form 17-27)

1. CONSIGNOR'S NAME (Last name, First name, Middle initial, or Business name) THOMAS, SUE J.		2. CERTIFICATE NUMBER F11111	3. PAGE NUMBER 1 OF 1
--	--	--	---------------------------------

4. DATE ISSUED 3/18/2016	5. UNITED STATES PORT OF EMBARKATION (City and State) SUMAS, WASHINGTON	6. STATE CODE WA	7. CONSIGNOR'S STREET ADDRESS (Mailing Address) 123 COUNTRY RD.	8. CONSIGNOR'S CITY (or Town) TOWNVILLE
------------------------------------	---	----------------------------	---	---

9. SEMEN ("X" if yes) <input type="checkbox"/>	10. NO. DOSES OF SEMEN	11. TRANSPORTATION CLASS <input type="checkbox"/> 1 - Rail <input type="checkbox"/> 3 - Air <input checked="" type="checkbox"/> 2 - Truck <input type="checkbox"/> 4 - Ocean	12. CONSIGNOR'S STATE UTAH	13. STATE CODE UT	14. ZIP CODE 84000
---	------------------------	--	--------------------------------------	-----------------------------	------------------------------

15. SPECIES ("X" one - use VS Form 17-6 for Poultry) <input checked="" type="checkbox"/> 01 BOVINE <input type="checkbox"/> 02 PORCINE <input type="checkbox"/> 03 OVINE <input type="checkbox"/> 04 CAPRINE <input type="checkbox"/> 05 EQUINE <input type="checkbox"/> 06 OTHER WILDLIFE - MAMMAL <input type="checkbox"/> 08 OTHER (Specify)	16. CONSIGNEE'S NAME AND STREET ADDRESS (Mailing Address) LLOYD FLEETMAN 555 SHORTLAND DR., LARKIN, BC	DESTINATION COUNTRY CANADA	ENTER CODE CA
--	--	--------------------------------------	-------------------------

NEGATIVE TUBERCULIN READING <input type="checkbox"/> 48 HRS <input checked="" type="checkbox"/> 72 HRS	BRUCELLOSIS BLOOD SAMPLE COLLECTED	NEGATIVE RESULTS OF OTHER TESTS		
		DISEASE	DISEASE	DISEASE

17. FARM ORIGIN Owner's Name (Last Name, Two Initials, or Business Name) Owner's Street Address, Owner's City/Town, State Code (FIPS Code on reverse) and ZIP Code		MODIFIED ACCREDITED AREA (TB)										18. INDIVIDUAL IDENTIFICATION (Instructions for columns A, B, C, and D on reverse)		
ID NUMBER OR DESCRIPTION	AGE	SEX	BREED	✓	DATE	✓	DATE	VAC	1/05	1/50	1/100	DATE	DATE	DATE
					F	G	H	I	J	K	L	M	N	O
THOMAS, S.J.	01Y	M	AN	<input checked="" type="checkbox"/>	3/18/16	<input checked="" type="checkbox"/>	3/18/16	<input type="checkbox"/>	N					
123 COUNTRY RD.	01Y	M	AN	<input checked="" type="checkbox"/>	3/18/16	<input checked="" type="checkbox"/>	3/18/16	<input type="checkbox"/>	N					
TOWNVILLE, UT 84000	07M	M	AN	<input checked="" type="checkbox"/>	3/18/16	<input checked="" type="checkbox"/>	3/18/16	<input type="checkbox"/>	N					

VALID ONLY IF USDA VETERINARY SEAL APPEARS HERE	CERTIFICATION BY ISSUING VETERINARIAN This is to certify that the animals identified above were inspected by me on this date and found to be free from evidence of communicable diseases and insofar as can be determined exposure thereto; the premises of origin are not under Federal or State quarantine because of animal disease; the animals were all negative to the tests shown on the dates indicated. Arrangements have been made for the animals to be handled in a transporting vehicle that has been cleaned and disinfected since last used for livestock and for movement to the port of embarkation without exposure to other animals en route, except those meeting these health requirements. The shipment must be accompanied to the port of export with this certificate.		21. STATUS <input type="checkbox"/> 1 State <input checked="" type="checkbox"/> 2 Federal <input checked="" type="checkbox"/> 3 Accredited	22. TOTAL NUMBERS OF ANIMALS (Certified for export or donated semen) (Include numbers from all attached VS Forms 17-140A) 3
19. DATE ENDORSED	20. NAME OF ISSUING VETERINARIAN (Last Name, First Name, Middle Initial, please print) RIDER, JARED V.	23. Signature of Endorsing Federal Veterinarian	24. NAME OF ENDORSING FEDERAL VETERINARIAN (Type, Print, or Stamp)	25. SIGNATURE OF ISSUING VETERINARIAN

VS Form 17-140
NOV 2014

VS Form 17-140 United States Origin Health Certificate (March 1998 Version)

Livestock traveling internationally must be accompanied by an *APHIS representative* or an accredited veterinarian at the point of origin. VS Form 17-140 is used for international export of livestock; however, this form is being phased out of use and is being replaced with more user-friendly documents by both APHIS and importing countries. Most foreign countries now require *the VS Form 17-140.* This form may also be used for the export of embryos and semen to foreign countries, unless the country of destination requires *A pre-movement authorization, known as a Permit for Entry or Import Permit,* may also be required by the destination country before animals can enter the country. Regulations on international movement of livestock can be found on the APHIS IREGS for Animal Exports website at <http://www.aphis.usda.gov/regulations/vs/iregs/animals/>. However, *requirements by contacting your NIES Service Center.*

This document is intended to give general guidance on how to complete VS Form 17-140. Recognize that these are not APHIS and VS forms for international movement, contact your NIES Service Center. A properly completed form is critical to ensure proper compliance.

- 1. CONSIGNOR'S NAME:** _____, which may or may not be the owner. If the consignor is a business rather than an individual, list the full business name instead.
- 2. CERTIFICATE NO.:** _____ VS Forms 17-140A (continuation sheets), if used.
- 3. PAGE NO.:** Show total number of pages in the shipment on each sheet (for example, a shipment that uses one VS Form 17-140 and two VS Forms 17-140A would be numbered "Page 1 of 3", "Page 2 of 3", and "Page 3 of 3", respectively).
- 4. DATE ISSUED:** Indicate the date the veterinary inspection was performed and the animals were determined to be healthy. The form may not be signed and given to the consignor unless all testing results are negative and all other requirements have been completed.
- 5. U.S. PORT OF EMBARKATION (City and State):** Record the location where the animals are loaded on the aircraft or ocean vessel for departure. If the animals are traveling to Canada or Mexico by land vehicle, list the U.S. Port of Entry across from the Canadian or Mexican Port of Entry.
- 6. STATE CODE:** Provide the State of the port of embarkation using the two-letter United States Postal Service (USPS) State code.
- 7. CONSIGNOR'S STREET ADDRESS (Mailing Address):** Enter the mailing address of the consignor.
- 8. CONSIGNOR'S CITY:** Specify the city of the consignor's mailing address.
- 9. SEMEN:** Check if semen is being exported. Be certain to list the species in Box 15.
- 10. NO. DOSES OF SEMEN:** Record the number of semen doses being exported. If Box 9 was not checked "YES", leave this blank.
- 11. TRANSPORTATION CLASS:** Enter the number in the box for the type of transportation to be used from the point of embarkation loading for export. For example, if a horse is being transported in a truck to an airport so the animal can be exported on an airplane, the Transportation Class is "AIR".
- 12. CONSIGNOR'S STATE:** Provide the State of the consignor's mailing address.

VS Form 17-140 United States Origin Health Certificate (March 1998 Version) (cont'd)

- 13. STATE CODE:** Enter the two-letter United States Postal Service (USPS) State code from the State of the consignor's mailing address.
- 14. ZIP CODE:** Enter the ZIP code of the consignor's mailing address.
- 15. SPECIES:**
- 16. CONSIGNEE'S NAME AND STREET ADDRESS:** Provide the name and mailing address of the consignee.
DESTINATION COUNTRY: Record the destination country name.
ENTER CODE: Enter the two-letter destination country code if known, otherwise leave blank.
- 17. FARM ORIGIN:** Provide the name, street address, city, two-letter USPS State code, and ZIP code of the premises where the animals were processed for the export, also called the origin premises. This origin premises may or may not be the owner or consignor.
- 18. INDIVIDUAL IDENTIFICATION:** *(If more lines are needed—use VS Form 17-140A)*
- A. ID NO. OR DESCRIPTION:** ID requirements vary by species. Record all forms of ID, including permanent brands, Also
list the reader device since not all readers read all microchips.
- B. AGE:** Indicate the age and unit of measure of each animal in years (Y), months (M), weeks (W), or days (D). For young animals, the age in months, weeks, and days are commonly used as the unit of measure. For older animals, the age in years would commonly be recorded. For example, a 10-year-old horse would be listed as 10Y, or a 4-week-old horse could be listed as 1M or 4W.
- C. SEX:** Indicate the sex of the animal (M—Male, F—Female, NM—Neutered Male, NF—Neutered Female).
- D. BREED:** Use the breed codes located on the back of the form.
- E. MODIFIED ACCREDITED AREA (TB):** Check the box if the animals originate from a Accredited Area.
(Check the status through the SAHO'
- F. DATE:** Provide the date the TB test was completed (observation/palpation date). Make sure to also mark in the area above it the appropriate box indicating whether the test was read at 48 HRS or 72 HRS.
- G. CERTIFIED BRUCELLOSIS FREE AREA:** Check the box if the an sis Free
Area. *(Check the status through the SAHO'*
- H. DATE:** Record the date the blood sample was drawn from the animal.
- I. VAC:**

For the next titers (1/25, 1/50, 1/100), show the animal was negative by including an "N" in the box that corresponds to the highest negative titer required.

- J. 1/25:**
K. 1/50:
L. 1/100:

NEGATIVE RESULTS OF OTHER TESTS:

DISEASE: Provide the name of the disease being screened; use the disease name that is mentioned in the destination requirements.

TYPE TEST: Indicate the name and type of test used to screen for the disease; use the test type that is mentioned in the destination requirements. If the destination did not specify the test type, use the test type the laboratory performed (AGID, PCR, ELISA, etc.)

M. DATE: Enter the date the sample was collected from the animal for the above test type.

N. DATE: Enter the date the sample was collected from the animal for the above test type.

O. DATE: Enter the date the sample was collected from the animal for the above test type.

VS Form 17-140 United States Origin Health Certificate (March 1998 Version) (cont'd)

- 19. DATE ENDORSED:** You should leave this box blank
as it will be completed by the Federal veterinarian.
- 20. NAME OF ISSUING VETERINARIAN:**
who is issuing (signing) this form.
- 21. STATUS:** Check only one box. As an accredited veterinarian, check the “Accredited” box.
- 22. TOTAL NUMBERS OF ANIMALS:**
Include numbers from all attached VS Forms 17-140A.
- 23. SIGNATURE OF ENDORSING FEDERAL VETERINARIAN:** Leave blank. The Federal Veterinarian will sign here.
In some instances, a USDA V
- 24. NAME OF ENDORSING FEDERAL VET:** Leave blank. This will be completed by the Federal veterinarian.
- 25. SIGNATURE OF ISSUING VETERINARIAN:** Provide the signature of the veterinarian who is issuing this form.
It must be the veterinarian whose name was printed in Box 20.

VS Form 17-140, a continuation sheet (VS Form 17-140A) can be used.

VS Form 17-140A United States Origin Health Certificate— Continuation Sheet

Complete all boxes on the continuation sheet as they were completed in the main form.

NOTE: VS Form 17-140 (Box 2) needs to be inserted in Box 2 of all continuation sheets (VS Form 17-140A). Each continuation sheet should be numbered (“Page No.” in upper right corner Box 3), as well as the total number of pages. For example, if using three pages for the export, the two continuation sheets should be numbered “Page 2 of 3” and “Page 3 of 3”.



Order Taken By: _____
 Order Filled By: _____
 Order Filled Date: _____

United States
 Department of
 Agriculture

Animal and
 Plant Health
 Inspection
 Service

Veterinary Services

210 Walnut
 Room 891
 Des Moines, IA
 50309

515-284-4140
 515-284-4156 Fax

General Office Forms

FORM #	DESCRIPTION	QUANTITY
VS 6-22	TUBERCULOSIS TEST RECORD – 50/PKG.....	_____
VS 6-22B	TUBERCULOSIS TEST RECORD CONTINUATION – 50/PKG.....	_____
VS 1-27	INTERSTATE MOVEMENT OF REACTOR ANIMALS – 25/FORMS & ENVELOPES...	_____
VS 4-26	BRUCELLOSIS CALF HOOD VACCINATION RECORD (LONG) – 100/PKG.....	_____
VS 4-33	BRUCELLOSIS TEST RECORD – 50/PKG.....	_____
VS 4-33A	BRUCELLOSIS TEST RECORD CONTINUATION – 50/PKG.....	_____
VS 4-54	BRUCELLOSIS MARKET CATTLE TESTING PROGRAM – 100/PKG.....	_____
VS 10-11	EQUINE INFECTIOUS ANEMIA LABORATORY TEST REPORT - 50/PKG.....	_____

Import/Export Forms

- *VS 17-140 U.S. ORIGIN HEALTH CERTIFICATE (LARGE ANIMAL) – 50/PKG.....
 - *VS 17-140AU.S. ORIGIN HEALTH CERTIFICATE CONTINUATION (LARGE ANIMAL) – 50/PKG.....
 - VS 7001A U.S. ORIGIN HEALTH CERTIFICATE CONTINUATION (SMALL ANIMAL) – 50/PKG.....
 - *VS 17-145 U.S. ORIGIN HEALTH CERTIFICATE (HORSES U.S. TO CANADA) – 50/PKG.....
 - *VS 17-6 U.S. ORIGIN HEALTH CERTIFICATE (POULTRY OR HATCHING EGGS) – 50/PKG.....
- *Denotes online form

Seals/Shields

- CUP SEALS.....
- Wires.....
- BALL SEALS.....
- "V" SHIELDS (VET. CLINIC MUST RETURN OLD SHIELD).....

Reagents

TB is now ordered directly from NVSL
 Randy Capsel/Teresa Sigafoose
 P: 515) 337-7181
Randy.T.Capsel@aphis.usda.gov
Teresa.M.Sigafoose@aphis.usda.gov

NAME OF SALE BARN: _____

ACCREDITED VETERINARIAN _____

CLINIC NAME _____

UPS ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

**Completed order forms can be faxed to 515-323-2286 or
 Emailed to vs.iowa.admin@aphis.usda.gov**

Equine Infectious Anemia

Equine Infectious Anemia Information Sheet

https://www.aphis.usda.gov/vs/nahss/equine/eia/eia_info_sheet.pdf

Equine Infectious Anemia Uniform Methods & Rules:

https://www.aphis.usda.gov/vs/nahss/equine/eia/eia_umr_jan_10_2007.pdf

9 CFR Equine Regulations:

<http://www.iowaagriculture.gov/animalindustry/9CFR-EIA.pdf>



U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
EQUINE INFECTIOUS ANEMIA LABORATORY TEST
(VS Memorandum 555.8)

SERIAL NO.

1. ACCESSION NUMBER

2. DATE BLOOD DRAWN

B

Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, Counties, and Telephone Numbers Will Not Be Processed.

3. REASON FOR TESTING		LJ Show	LJ First Test	7. NAME AND ADDRESS OR STABLE/MARKET (Please print or type)
D Market	D Change of Ownership	DRetest	D Export	

4. GEOGRAPHIC INFORMATION SYSTEMS CGIS (ddmmww)	5. VETERINARY LICENSE OR ACCREDITATION NO.	6. TEST TYPE DAGID D ELISA	Zip Code
8. NAME AND ADDRESS OF OWNER (Please print or type)		Tel No.	County

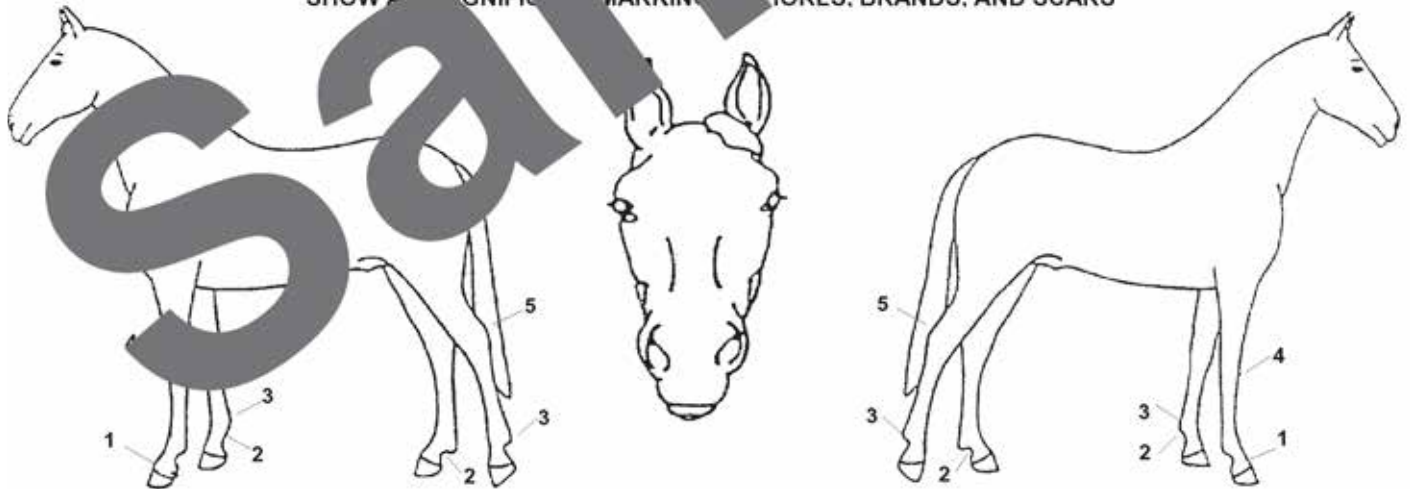
9. NAME AND ADDRESS OF VETERINARIAN (Please print or type)		Tel No.
10. SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN		12. SIGNATURE DATE

CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN
I certify the specimen submitted with this Form was drawn by me from the horse described on the label indicated.

CERTIFICATION OF OWNER OR OWNER'S AGENT
I certify that I have examined this form and to the best of my knowledge and belief this form is correct and complete.

16. Tube No.	17. Official Tag No.	18. Tattoo/Brand	19. Name of Horse	20. Color	21. Breed	22. Electronic I.D. No.	23. Age or DOB	24. Sex M - Male F - Female G - Gelding N - Neuter
--------------	----------------------	------------------	-------------------	-----------	-----------	-------------------------	----------------	--

SHOW ALL SIGNIFICANT MARKINGS, HORLS, BRANDS, AND SCARS



1- Coronet, 2- Pastern, 3- Fetlock, 4- Knee, 5- Hock

NARRATIVE DESCRIPTION AND REMARKS	
25. HEAD	26. OTHER MARKS AND BRANDS
27. LEFT FORELIMB	28. RIGHT FORELIMB
29. LEFT HINDLIMB	30. RIGHT HINDLIMB

FOR LABORATORY USE ONLY

31. LABORATORY NAME/CITY/STATE	32. DATE RECEIVED	33. DATE REPORTED OUT	34. TEST RESULTS DNegative DPositive DAGID D ELISA
36. SIGNATURE OF TECHNICIAN		35. REMARKS	

Falsification of this form or knowingly using a falsified form is a criminal offense and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (U.S.C. Section 1001).

VS Form 10-11 Instructions

EQUINE
INFECTIOUS
ANEMIA

Block 1: **Accession Number**

Instructions: The accession number is assigned by the laboratory.
Leave blank.

LABORATORY
TEST

Block 2: **Date Blood Drawn**

Instructions: Self-explanatory. If there are anytime restraints on the test (as with exports), they are from the date that the sample is drawn rather than from the date the sample is submitted or the date the test result is reported.

Block 3: **Reason for Testing**

Instructions: Mark the appropriate box.

Block 4: **Geographic Information System (GIS)**

Instructions: Enter longitude and latitude if applicable.

Block 5: **Veterinary License or Accreditation Number**

Instructions: Self-explanatory

Block 6: **Test Type**

Instructions: Mark the appropriate box.

Block 7: **Name and Address of Stable/Market**

Instructions: Enter the name, address, and telephone number of where the horse is stabled or the auction market.

Block 8: **Name and Address of Owner**

Instructions: Enter the name, complete mailing address, and telephone number of the owner.

Block 9: **Name and Address of Veterinarian**

Instructions: Enter your name, complete mailing address, and telephone number.

Block 10: **Signature of Federally Accredited Veterinarian**

Instructions: Self-explanatory

Block 11: **Type or Print Signature Name**

Instructions: Self-explanatory

Block 12: **Signature Date**

Instructions: Self-explanatory

Certification of Owner or Owner's Agent: Block 13 through 15

Instructions: This section provides the veterinarian legal protection when misrepresentation of a horse is suspected.

Block 13: Signature of Owner or Owner's Agent

Instructions: Self-explanatory

Block 14: Type or Print Signature Name

Instructions: Self-explanatory

Block 15: Signature Date

Instructions: Self-explanatory

Identification Data: Block 16 through 24

Instructions: Fill out as completely as possible. This area can cause the greatest number of problems, especially during interstate or international movement. The description **MUST** match the horse exactly; therefore, be precise when indicating the markings.

Block 16: Tube Number

Instructions: Enter tube number if applicable.

Block 17: Official Tag Number

Instructions: Enter tag number if applicable.

Block 18: Tattoo/Brand

Instructions: Enter Tattoo/Brand if applicable.

Block 19: Name of Horse

Instructions: Enter complete name of the horse.

Block 20: Color

Instructions: Enter color of the horse.

Block 21: Breed

Instructions: Enter breed of the horse.

Block 22: Electronic ID Number

Instructions: Enter electronic ID Number if applicable.

Block 23: Age or Date of Birth (DOB)

Instructions: Self-explanatory

Block 24: Sex

Instructions: To indicate the sex, use the codes listed on the form.

Narrative Description and Remarks: Block 25 through 30

Instructions: Fill out as completely and precisely as possible.

Block 25: Head

Block 26: Other Marks and Brands

Block 27: Left Forelimb **Block 28: Right Forelimb**

Block 29: Left Hindlimb **Block 30: Right Hindlimb**

For Laboratory Use Only: Block 31 through 35



Simply Reliable Equine Health Solutions

EquusLINK digital equine health certification system enables animal health practitioners to quickly and accurately create professional health documents, including Equine Infectious Anemia (EIA) or Coggins test certificates, with real-time test transmission to labs (</resource-center/online-diagnostics-lab/>) as well as CVIs (</products/healthlink>) and GoPass® Equine Passports (</products/digital-equine-6-month-passport/>) (6-month health certificates).

Save time and money with EquusLINK Digital EIA Test Certificates (Coggins)

- Faster, more intuitive user interface
- Real-Time Lab Submission and Results
- Transfer of Ownership
- Batch sign and send certificates
- Accurate ID with Streamlined Digital Photo Upload
- MyVetLINK (</products/myvetlink/>) Animal Owner Portal
- Integrated with Practice Management Software
- Mobile Capability
- Digital EIA (Coggins) Certification and Lab Submission (</products/lablink/>)



Tuberculosis Program A Review for Accredited Veterinarians



As Category II accredited veterinarians, you play a critical role in detecting and preventing bovine tuberculosis. Please follow these testing guidelines.

1. Handling Tuberculin (PPD)

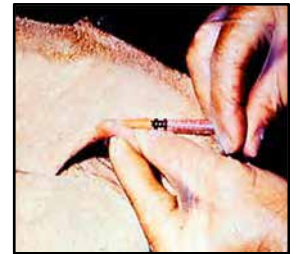
- Do not use tuberculin after the expiration date
- Store in the dark at 35-45F; do not allow to freeze, and avoid exposure to sunlight (proteins will denature)
- Do not store dose amounts out of original amber-colored container for longer than 12 hours; if syringes are pre-filled, they should be used within a few hours
- Discard vials within 3 months of opening

2. Animal Identification (ID)

- Record the **official** identification of every animal tested (an official ear tag or registration tattoo), *as well as* any additional form of ID (e.g. bangle tags)
- Apply official ID to animal if none is present
- Breed, sex, approximate age in years of each animal tested must be recorded on the test record

3. Caudal Fold Test (CFT) Injection

- **Palpate** area before injecting; if lesion/thickening, pick another spot
- Use a 1 ml syringe with a 26 gauge, 3/8" long needle
- Inject 0.1 ml intra-dermally into the caudal fold; *if you don't see a bleb the injection is not intradermal*, re-inject the other caudal fold and note this in the test record
- It is recommended to use a new needle for each animal to minimize transmission, or appearance of transmission, of blood-borne infectious agents
- If *you* inject, *you* read (remember which side you injected the tuberculin)
- Do not vaccinate or treat cows on injection day, it may interfere with their response
- There is no meat or milk withdrawal time for tuberculin



4. Reading the Test

- Read the test at 72 hours post-injection \pm 6 hours
- All animals injected must be read, and the results recorded on official forms with all ID
- Visualize *and* palpate the injection site
- **ANY change in size/swelling is a positive response** (check "suspect" box on form)
- **Report any responders immediately to the Federal or State Animal Health Officials**, and provide a copy of the test records
- Explain the CFT response to your client and expect approximately a 1-3% false positive rate due of exposure to *M. avium* sub. *paratuberculosis*, *M. avium*, and other soil-borne Mycobacterium; response rates are monitored
- State/Federal regulatory staff must apply a Comparative Cervical test (CCT) on responders within 10 days of CFT injection (or wait 60 days); all cohort cattle will remain under quarantine pending results.



Mail white and green copies of all test records to the USDA APHIS VS office within **48 hours** of reading the test.

USDA APHIS VS, Iowa Area Office
210 Walnut St., Rm 891
Des Moines, IA 50319

TUBERCULOSIS TESTING INFORMATION

Species	Dose & Type	Site	Read Test
Cattle	0.1ml PPD Bovis	Caudal Fold (CF)	72 hours
Horse		Not reliable	
Camelids	0.1ml PPD Bovis	Axillary Region	72 hours
Sheep, Goats	0.1ml PPD Bovis	Caudal Fold (CF)	72 hours
Swine	0.1ml PPD Bovis	Caudal Fold (CF), Vulvar Lips	48 hours
	0.1ml PPD Avian		48 hours
Poultry	0.1ml PPD Avian	Wattle	48 hours
Cats		Not reliable	
Other Ungulates	0.1ml PPD Bovis	Side of neck, eyelid, CF	72 hours
Cervidae**	0.1ml PPD Bovis	Side of Neck	72 hours

** Must receive training from USDA-APHIS-VS in order to conduct testing in these species**

TUBERCULIN and ITS APPLICATION

The tuberculin provided for the bovine TB eradication program are scientifically produced by the USDA according to very stringent criteria. To maintain the potency and high quality of these diagnostic agents, also ensuring they will provide accurate testing, they must be properly stored and handled.

1. Tuberculin loses potency when exposed to light and/or air. Do not draw tuberculin into plastic syringes or store in dose amounts for longer than 12 hours, as proteins may interact with the container material. Once opened, tuberculin remaining in vials may lose potency due to oxidation with the air in the container, so discard partially used vials of tuberculin within 3 months. Different sized bottles of tuberculin are available to match testing needs and minimize waste. Do not use expired tuberculin or tuberculin that has frozen. Tuberculin can be ordered from NVSL in Ames at 515-337-6200.
2. Several drugs and hormones (particularly live vaccine and corticosteroid drugs) depress the tuberculin response. The same is true of viral infections. Avoid testing animals that are diseased, and plan to give any vaccines or treatments the day the tuberculin test is read rather than on the day of injection. There is no meat or milk withdrawal time after using tuberculin.
3. The Caudal Fold Test (CFT) is based on a Type IV Delayed Hypersensitivity response to tuberculin. ***Tuberculin must be injected intradermally, not subcutaneously. Correct administration is verified by observance of a "bleb".***
4. The timing of reading the delayed hypersensitivity response is important. Tests should be read at 72 ± 6 hours from the time of injection. If the test cannot be read within that time frame, you must wait 60 days to retest cattle, and 90 days to retest cervids.
5. The animals' genetic make-up affects the magnitude of the tuberculin response. Certain breeds or strains of cattle may respond differently, and tuberculin sensitivity is usually higher in females than in males.
6. The method of reading is also important. ***Each injection site must be palpated by the injecting veterinarian; visual inspection alone is inadequate, and responders will be missed.*** Differentiate other swellings, thickness, and dermal lesions from a tuberculin response; comparison with the opposite caudal fold can be helpful for small responses.
7. The magnitude of the response is ***not*** proportional to the level of infection; cattle infected with bovine tuberculosis may react very minimally, or have a very large response to the CFT.
8. ***Exposure to avian, soil-borne, and other mycobacteria can cause a "false positive" CFT response rate of 1% to 3% of all animals tested.*** You should expect to see some responders.
9. Report *any* CFT response immediately to the Federal or State office for secondary testing. A Comparative Cervical Test (CCT) must be applied to responders within 10 days of the CFT injection, or we must wait 60 days to retest cattle and 90 days to retest cervids. Alternatively, blood for a gamma test is optimally drawn within 3-7 days of the CFT injection.
10. Educate your clients to provide you with advance notice (3 weeks) of their plans to ship cattle to allow complete diagnostic testing, which may include CCT tests. This will reduce the pressure on you to ignore a response to avoid delaying a cattle shipment.
11. You must be certified to perform the Single Cervical Tuberculin (CT) test in cervidae (deer, elk, moose). This involves training in proper test procedures by a regulatory veterinarian. Upon certification, your name will be placed on a list of those approved to conduct these tests. Call your local State District Veterinarian or Federal Veterinary Medical Officer (VMO) if you have questions regarding TB training and certification.

TUBERCULOSIS TEST RECORD (VS FORM 6-22)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0084. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, search existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

STATE <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">1</div>	ALL INCOMPLETE RECORDS WILL BE RETURNED FOR COMPLETION COOPERATIVE STATE - FEDERAL TUBERCULOSIS ERADICATION PROGRAM TUBERCULOSIS TEST RECORD	FORM APPROVED OMB NO. 0579-0084 F
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COUNTY	TWP	SEC	HERD OWNER'S NAME - LAST <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">3</div>	FIRST	MI	PREVIOUS TEST DATE	VET CODE	TOTAL	REA	SUS
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HERD NUMBER	HERD OWNER'S COMPLETE ADDRESS <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">3</div>	CERTIFICATION FOR PAYMENT <input type="checkbox"/> State/Federal Expense <input type="checkbox"/> Owner's Expense	DATE LISTED
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COUNTY <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">2</div>	TOWNSHIP OR DISTRICT	SEC.	FARM NO.
--	----------------------	------	----------

REASON FOR TEST 4				COMPLETE HERD TEST OF ALL ELIGIBLE ANIMALS 5				SUMMARY 8				PRACTITIONER'S SIGNATURE 9				TELEPHONE NO.			
AREA	1	RETEST	6	<input type="checkbox"/> YES	<input type="checkbox"/> NO	NO ELIGIBLE ANIMALS IN HERD				NEG-ATIVE	PRACTITIONER'S NAME (Please print) 9 INJECTION 11 DATE HOUR OBSERVATION 12 DATE HOUR REACTORS TAGGED AND BRANDED DATE SIGNATURE AGREE CODE				AGREE CODE	10			
HERD (RE) ACCREDIT	2	TRACING REG. KILL	7	KIND OF HERD 6				SUS-PECT	11						HOUR				
MILK ORDINANCE	3	TRACING REACTORS	8	METHOD OF TEST 7				REACTOR	12				HOUR						
SALE-SHOW	4	TRACING EXPOSED	9	<input type="checkbox"/> CAUDAL FOLD (CFT) <input type="checkbox"/> SNG CERVICAL (CST) (Cervid) <input type="checkbox"/> CERVICAL (CT) (Bovine) <input type="checkbox"/> OTHER				TOTAL	12				AGREE CODE						
IMPORTED	5	OTHER	10																

1	IDENTIFICATION NUMBER	AGE	BREED	SEX	RESULTS		REACTOR TAG NO.	1	IDENTIFICATION NUMBER	AGE	BREED	SEX	RESULTS		REACTOR TAG NO.
					SIZE	NRS							SIZE	NRS	
1	<div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">13</div>	<div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">14</div>	<div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">15</div>	<div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">16</div>	<div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">17</div>			16							
2								17							
3								18							
4								19							
5								20							
6								21							
7								22							
8								23							
9								24							
10								25							
11								26							
12								27							
13								28							
14								29							
15								30							

RT - Retag NA - Natural Addition PA - Purchased Addition	N - Negative S - Suspect R - Reactor	I hereby acknowledge receiving a copy of this record which I have examined and find correct DATE OWNER'S SIGNATURE <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; margin: 0 auto;">18</div>	THIS AUTHORIZATION TO TEST EXPIRES:
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COMPLETING TUBERCULOSIS TEST RECORDS

All test charts must be completed **legibly in their entirety** and will reflect the true status as determined by the testing veterinarian. If an item is not applicable, mark an "NA" or a dash indicating that it has been reviewed.

1. **STATE:** Iowa, must be abbreviated "IA".
2. **COUNTY:** Name of county where animals are located.
3. **HERD OWNER'S NAME:** Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code. If a livestock market, put name and address of the market in box and put the owner's name above.
4. **REASON FOR TEST:** Place an "X" in the appropriate box. For Sale or Show, please circle which one it is. If Movement or any other reason not specified, check "OTHER" and write the reason in the box.
5. **COMPLETE HERD TEST:** If the whole herd was tested, check YES and give the number of test eligible animals in the herd.
6. **KIND OF HERD:** Indicate the kind of herd.
7. **METHOD OF TEST:** Place an "X" in the appropriate box. Alternate sites should be indicated.
8. **SUMMARY:** Indicate the number of negatives, suspects and the total number tested.
9. **PRACTITIONER' NAME and SIGNATURE:** Always sign the test record and print your name below your signature.
10. **AGREE CODE:** *Fill in your IA Federal Accreditation Number or your State License Number. The IA Veterinary License Number is preferred.*
11. **INJECTION/DATE/HOUR:** Initials of veterinarian who injects the animals, date and hour of the test.
12. **OBSERVATION/DATE/HOUR:** Initials of the veterinarian who observes the test results, date and time. The observation should be completed 72 hours (+/- 6) following injection. It **MUST** be the same veterinarian who injects and observes.
13. **IDENTIFICATION:** This must be an OFFICIAL identification, usually a 9-digit alphanumeric USDA ear tag which is unique to each animal. An official vaccination tag is acceptable in place of a silver USDA tag. An animal carrying an official tag (even if from other states) **should not be retagged** nor shall the ear tag be removed. In instances where more than one official tag is present, all tags must be recorded. Currently RFID identification must be accompanied by a USDA silver or official vaccinate ID. If using registration tattoos, give the entire tattoo (must match registration papers, which may be requested), along with the brand on the animal, and their location. Bangle tags are not considered official identification but should be noted along with the official ID. Please indicate if the animal has been re-tagged by putting RT in the space before the identification number. Should you have any questions regarding identification, please contact the VS-IA Area Office.
14. **AGE:** Note the age of the animal in years (Y) or months (M).
15. **BREED:** Enter the 2 letter breed abbreviation. A list of standardized breed codes is provided. For

example, the code for Angus is AG, not AN. If animal is a crossbreed/mixed, the code is XX. Black angus is not a standard breed (and as such, the code BA is for Barzona). “Beef” is also not a breed.

16. SEX: Self-explanatory. If castrated, neutered, etc. please note the codes to be used (e.g. castrated male is ST for steer).

17. RESULTS: N = negative or S = suspect.

18. OWNER SIGNATURE: The owner or his agent should sign and date the record as of the date of observation.

Cervid TB Testing

To perform tuberculosis testing in cervids, accredited veterinarians (AV) must complete additional training to become a Designated Accredited Veterinarian (DAV). Cervid TB testing can be accomplished in one of two ways: an accredited veterinarian can perform a Single Cervical Test (SCT), or draw blood for the Dual Path Platform (DPP) test. Training for the SCT must be “hands on” with a regulatory veterinarian, either a State District Veterinarian or a USDA Veterinary Medical Officer. This training can be done when a producer requests testing so they do not have to present animals for training purposes only. When the accredited veterinarian has completed the SCT training, they will be certified for the SCT and eligible to perform that test.



Additional training is also required to perform the DPP test. No “hands on training” is required, but there are educational documents concerning the DPP test that need to be read. Once the required documents have been read, the AV needs to sign the training affidavit and send it in to the Federal office in Des Moines, Iowa. Once the affidavit is on file, the DAV will be able to submit blood samples to NVSL for TB testing in cervids.

Designated Accredited Veterinarians are only allowed to perform the testing that they have completed the training for and have been certified in. It is not required, however, that veterinarians are trained in both procedures if they will only be performing one of the testing methods routinely.

At this time, NVSL is requesting that if you are submitting more than 30 blood samples for DPP testing, you prepare an Excel spreadsheet with the animal information and official ID. Complete the top part of the VS 10-4 submission form as usual; in the sample ID section type in “see attached list”. E-mail the [VS Form 10-4](#) and the spreadsheet to the following email addresses:

Michelle.L.Redlinger@usda.gov

Breanne.N.Marpe@usda.gov

April.S.Keicher@usda.gov

If this method of submission is used, it is not necessary to complete the standard TB submission form (VS Form 6-22). **Note:** At this time the DPP test kits are inconsistently available from the manufacturer and there is a backlog of testing at the National Veterinary Services Laboratory. DPP samples may still be submitted to the NVSL to fulfill testing requirements for TB herd accreditation, but there may be a considerable amount of time before the kits become available and the testing can be completed. Cervid movement is not allowed to occur past the 36-month anniversary date for accredited herds until the negative test results are available. If a producer needs to move or sell animals, performing the SCT may be necessary. It may be prudent, therefore, for a DAV to be trained in both methods of testing. **Please contact USDA APHIS VS office at (515) 284-4140 or the regulatory veterinarian in your area for more information.**

DPP Training Documents

DPP Frequently Asked Questions

<http://www.iowaagriculture.gov/animalIndustry/IVAH/DPPFrequentlyAskedQuestions.pdf>

TB Diagnostics

<http://www.iowaagriculture.gov/animalIndustry/IVAH/TBDiagnostics.pdf>

VS Guidance Document 6701.3 DPP Testing

https://www.aphis.usda.gov/animal_health/animal_diseases/tuberculosis/downloads/vsg6701.3-primary-secondary-serological-test-for-diagnosing-bovine.pdf

Cervid TB Serologic Testing/DPP Training Affidavit

<https://iowaagriculture.gov/sites/default/files/animal-industry/pdf/SerologicTestingAffidavit.pdf>

TUBERCULOSIS ACCREDITATION UNIFORM METHODS & RULES

Because the regulations are currently evolving and changing at a rapid pace, including excerpts would be outdated shortly after they were included. Therefore, it has been decided to NOT include excerpts from the UMR at this time. However, the links below provide access to the Tuberculosis UMRs for various species and should be referred to if you need specifics on Tuberculosis rules and methodology. The location of the actual regulations would be the 9CFR. The CFR also contains the details for many other regulations that Accredited Veterinarians must adhere to. Therefore, a link to that is also included below.

2005 Bovine TB UMR (Cervids not included)

<http://www.iowaagriculture.gov/animalindustry/BovineTuberculosis2005UM&R.pdf>



1999 Bovine TB UMR (Cervid section valid)

<http://www.iowaagriculture.gov/animalindustry/BovineTuberculosis1999UM&R.pdf>

9CFR

<http://www.iowaagriculture.gov/animalindustry/9CFR-Tuberculosis.pdf>



Brucellosis Program

Overview

- There are cattle and swine brucellosis programs.
- Most states have Brucellosis Free status, but statuses change. Check USDA website for current statuses.
- Methods of brucellosis surveillance:
 - Slaughter
 - Diagnostic
 - BRT (Brucellosis Ring Test)
 - First Point of Contact



Role of Private Practitioner in the Brucellosis Program

1. Aging cattle for vaccination or test eligibility.
2. Vaccination (**Vaccination between ages 4 and 12 months-Iowa law**)
3. Official Identification at the time of vaccination.
 - A. Tattooing (Vaccination Tattoo) Right ear, e.g. RV4
 - B. Tagging with official Identification Right ear, e.g. 42VVD1942
 - Brucellosis tags are orange
 - They are to be used **ONLY** for brucellosis vaccinations, **NOT** for other ID
 - Silver tags are for general IDENTIFICATION
 - 42 is the State code number for Iowa
 - **V** means the animal is a brucellosis vaccinate
4. Adult vaccinations are only to be administered with **PRIOR** approval by State Veterinarian.
5. Completing and distributing official forms - remember it is the accredited veterinarian's responsibility to make sure that the correct forms are distributed.

R  2

Common Mistakes by Veterinarians

1. Overage Vaccination
 - Animals that vaccinated about the required age have a propensity to test positive
 - Difficulty distinguishing them from true positives
2. Improper Identification of Animals
 - Improperly tagged and / or failure to record official identification on test or vaccination forms.
 - Official tests require animals to be officially identified, also remember to record **ALL** forms of identification present in the animal.
3. Allowing technicians to vaccinate and/or bleed animals without direct supervision of the accredited veterinarian.
4. Late or Improper distribution of forms. Brucellosis vaccination forms (VS Form 4-24 and VS Form 4-26) are required to be sent to the State office within 30 days after vaccination.
5. Mishandling vaccines
 - Veterinarians need to handle the vaccine properly to maintain efficacy, and the zoonotic risk associated with self-injection (RB 51 vaccine)
6. Controlling possession of Tattoo Shield and Vaccination Tags

Brucellosis Uniform Methods & Rules:

https://www.aphis.usda.gov/animal_health/animal_diseases/brucellosis/downloads/umr_bovine_bruc.pdf

RB51 Vaccine:

https://www.aphis.usda.gov/animal_health/animal_dis_spec/cattle/downloads/rb51_vaccine.pdf

BRUCELLOSIS TESTING INFORMATION

1. Preferably, blood samples should be collected in a serum separator vacutainer tube or a plastic 5cc microbleeder tube.
2. Write your Agreement Code and a sequential number corresponding to each sample tube on the VS Form 4-33 (Brucellosis Test Record). Label tubes on the collar (wipe first!) with a Sharpie marker to avoid accidental erasure.
3. The blood samples should be allowed to clot at room temperature; AVOID heat and cold extremes and direct sunlight. After clotting, place samples on the top shelf of a refrigerator. **DO NOT FREEZE!**
4. All blood samples should be submitted to a commercial diagnostic laboratory (see examples on the laboratory list 5-2).
5. OVERNIGHT samples to ensure arrival at the laboratory the next working day. If you collect blood samples on a Friday or Saturday, refrigerate them over the weekend and overnight on Monday. If samples are allowed to sit 2-3 days in the heat or extreme cold they may arrive hemolyzed and will be useless.
6. A VS Form 4-33 (Brucellosis Test Record) must be used for all field testing.
7. No unofficial card or CITE tests are to be done in the field.

BRUCELLOSIS TEST RECORD (VS FORM 4-33)

ALL INCOMPLETE RECORDS WILL BE RETURNED FOR COMPLETION

STATE 1		COUNTY 2		CODE		COOPERATIVE STATE-FEDERAL BRUCELLOSIS ERADICATION PROGRAM														
BRUCELLOSIS TEST RECORD						L		HERD NUMBER		HERD OWNER LAST 3		FIRST		INITIAL		PREVIOUS TEST DATE	VET CODE	TOTAL	REA	SUS
OWNER NUMBER		ROUTE-STREET-ROAD																		
TEST		PROG.	WBBS	POST OFFICE										STATE		ZIP CODE				
REASON FOR TEST		<input type="checkbox"/> INITIAL 4	<input type="checkbox"/> RETEST	RGE	TWP	SEC	DISTRICT		FARM UNIT											
Slaughter Res	1	Hd Cert./ Validation	6	5 COMPLETE HERD TEST OF ALL ELIGIBLE ANIMALS <input type="checkbox"/> YES <input type="checkbox"/> NO NO IN HERD													SUMMARY 7 NEG. ACTIVE			
Lvt. Mkl. Res	2	Post Move Quar. & Test	7																	
Susp. Ring Test	3	Area Test	8	6 KIND OF HERD <input type="checkbox"/> DAIRY <input type="checkbox"/> BEEF <input type="checkbox"/> MIXED <input type="checkbox"/> SWINE <input type="checkbox"/> OTHER (Specify below)													SUSPECT REACTOR			
Diagnostic	4	Epidemiology	9																	
Pvt. Sale	5	Other (Specify below)	10	LABORATORY	PLACE	DATE	TOTAL	REACTORS TAGGED AND BRANDED DATE										SIGNATURE	AGREE CODE	
REMARKS	That I have drawn blood samples from each animal identified below and have correctly listed each tube number with complete corresponding identification number, all numbers and letters of all ear tags have been listed, cattle with existing official ear tags have not been re-tagged, and when payment is claimed at program expense in accordance with agreement number below, no payment has been or will be received from any other source.																			
DATE LISTED		BY																		
TUBE NO.	2	RECORD ALL IDENTIFICATION NUMBER(S)	VACC TATTOO	AGE	BREED	SEX	FLD T	BAPA RST	CARD	STT SPT	RIV	CF	TEST Interp	REMARKS AND ADDITIONAL INFORMATION	REACTOR TAG NUMBER					
12	13	14	15	16	17	18							19	20	21					

RT - Retag AB - Aborter NA - Natural Addition PA - Purchased Addition	Record ALL Eartag(s) and Tattoo(s)	Record ALL Legible Characters	FIELD TEST CODE N - Negative P - Positive	TEST INTERPRETATION N - Negative Classified by: S - Suspect R - Reactor Date Classified:	TEST AUTHORIZATION EXPIRES
---	------------------------------------	-------------------------------	---	---	----------------------------

COMPLETING BRUCELLOSIS TEST RECORDS

All test charts must be completed **legibly in their entirety** and will reflect the true status as determined by the testing veterinarian. If an item is not applicable, mark an “NA” or a dash indicating that it has been reviewed.

- 1. STATE:** Iowa, may be abbreviated IA.
- 2. COUNTY:** Name of county where animals are located.
- 3. HERD OWNER’S NAME:** Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code. If a livestock market, put name and address of the market in box and put the owner’s name above.
- 4. REASON FOR TEST:** Place an “X” in the appropriate box. For Sale or Show, please circle which one it is. If movement or any other reason not specified, check “Other” and write the reason in the box.
- 5. COMPLETE HERD TEST:** If the whole herd was tested, check YES and give the number of test eligible animals in the herd.
- 6. KIND OF HERD:** Indicate the kind of herd.
- 7. SUMMARY:** Indicate the number of negatives, suspects and the total number tested.
- 8. CERTIFICATION FOR PAYMENT:** Always check private, unless contracted by the State.
- 9. PRACTITIONER’S SIGNATURE and ADDRESS:** Sign your name legibly. Because there is no room for your printed name on this form, ***your signature must be legible***. Indicate your mailing address.
- 10. AGREE CODE:** Federal Accreditation Code.
- 11. DATE BLED:** Enter the date the animals were bled.
- 12. TUBE NUMBER:** Use consecutive numbers. Do not duplicate numbers of samples mailed to the laboratory on the same day. Write the number and your vet accreditation code on the top of each blood tube.

13. COLUMN "2": Indicate in this column if the animal has been re-tagged (RT), is a natural addition (NA), purchased addition (PA), or aborter (AB). The codes are located at the bottom of the column.

14. IDENTIFICATION NUMBER: This must be an OFFICIAL identification, usually a 9-digit alphanumeric USDA ear tag which is unique to each animal. An official vaccination tag is acceptable in place of a silver USDA tag. An animal carrying an official tag (even if from other states) **shall not** be retagged nor shall the ear tag be removed. In instances where more than one official tag is present, all tags shall be recorded.

Currently RFID identification tags listed on a separate attachment must have a copy attached to each carbon copy of the Brucellosis forms.

15. VACCINATION TATTOO: Enter as shown in the animal's ear. Record all legible characters.

16. AGE: Note the age of the animal in years (Y) or months (M).

17. BREED: Enter the breed abbreviation. A list of standardized breed codes is provided. For example, the code for Angus is AG, not AN. If animal is a crossbreed/mixed, the code is XX. Black angus is not a standard breed (and as such, the code BA is for Barzona).

18. SEX: Female (F) or male (M). Steers are **not** tested.

19. TEST INTERPRETATION: N = negative, S = suspect, or R = reactor

20. REMARKS AND ADDITIONAL INFORMATION: Additional info and/or other pertinent data. This includes plastic ear tags and neck chains. Always correlate these with a USDA silver ear tag. With commercial tags, show the type and color.

21. REACTOR TAG NUMBER: Reserved for reactor tag placed in the left ear of a brucellosis infected animal.

BRUCELLOSIS VACCINATION RECORD (VS FORM 4-24)

ALL VACCINATIONS MUST BE PROMPTLY REPORTED
COOPERATIVE STATE-FEDERAL BRUCELLOSIS ERADICATION PROGRAM **G**
BRUCELLOSIS VACCINATION RECORD

U.S. DEPARTMENT OF AGRICULTURE
 ANIMAL AND PLANT HEALTH INSPECTION SERVICE
 VETERINARY SERVICES

STATE <input type="text" value="1"/>		COUNTY <input type="text" value="2"/>		CODE		
HERD NUMBER		HERD OWNER LAST <input type="text" value="3"/>		FIRST INITIAL		
OWNER NUMBER		ROUTE-STREET-ROAD		VACCINE USED <input type="text" value="4"/>		
KIND OF HERD <input type="text" value="5"/>		POST OFFICE		STATE ZIP CODE		
REMARKS		WBBBS		SERIAL NUMBER <input type="text" value="6"/>		
		CV AV <input type="text" value="10"/>		DOSAGE <input type="text" value="7"/>		
		RGE TWP SEC DISTRICT FARM UNIT		VACC. TATTOO <input type="text" value="8"/>		
				CERTIFICATION FOR PAYMENT <input type="text" value="11"/> <input type="checkbox"/> FEDERAL EMPLOYEE <input type="checkbox"/> FEE BASIS (Federal) <input type="checkbox"/> STATE COUNTY <input type="checkbox"/> PRIVATE (Owner's Expense)		
				I CERTIFY THAT: (1) I have vaccinated with Strain 19, tattooed and eartagged or otherwise properly identified all animals listed hereon as prescribed by the Brucellosis UM & R, and recorded all information as prescribed by State regulations; (2) when payment is claimed at program expense in accordance with agreement number below no payment has been or will be received from any other source.		
NO	IDENTIFICATION NUMBER	AGE (MO./YR.)	BREED	SEX	P/B-GRADE	* TATTOO
1	<input type="text" value="16"/>	<input type="text" value="17"/>	<input type="text" value="18"/>	<input type="text" value="19"/>	<input type="text" value="20"/>	<input type="text" value="21"/>
2						
3						
4						
5						
6						
7						
8						

CERTIFICATION OF OWNER OR WITNESS
 I CERTIFY THAT the animals listed hereon were vaccinated and identified for the above named owner.

Signature Date of Vaccination Agree, Code

CERTIFICATION FOR RE-ESTABLISHING VACCINATION STATUS
 * indicate tattoo of animals previously vaccinated in appropriate column.
 I CERTIFY THAT I have personally examined the animal(s) noted hereon, and have read the official tattoo(s) and have retagged them as shown.

Signature _____ Date _____

VS FORM 4-24 (AUG 83)

Previous edition may be used.

PART 1 - OFFICE

COMPLETING BRUCELLOSIS VACCINATION RECORDS

All test charts must be completed **legibly in their entirety** and will reflect the true status as determined by the testing veterinarian. If an item is not applicable, mark an “NA” or a dash indicating that it has been reviewed.

- 1. STATE:** Iowa can be abbreviated as IA.
- 2. COUNTY:** Name of county in which tested animals are located.
- 3. HERD OWNER:** Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code.
- 4. VACCINE USED:** This will be RB-51, unless permission to use Strain 19 has been obtained.
- 5. EXPIRATION DATE:** This is the expiration date of the vial of vaccine being used.
- 6. SERIAL NUMBER:** This is the serial number from the vial of vaccine being used.
- 7. DOSAGE:** Mark the appropriate dosage being used, full or reduced.
- 8. VACCINATION TATTOO:** Place the tattoo being applied to the animals in this block, it should read: type of vaccine {R}, shield {V} and last number of the calendar year in which the vaccine is administered [0-9], e.g. RV1 for 2011.
- 9. KIND OF HERD:** Indicate the kind of herd; Dairy, Beef, or Mixed.
- 10. CV or AV:** CV is for calfhood vaccinate, AV is for adult vaccinate. Adult vaccination is only to be administered with prior approval of the State Veterinarian and the AD.
- 11. CERTIFICATION FOR PAYMENT:** Always check private, unless contracted by the State.
- 12. SIGNATURE:** Sign your name legibly. Because there is no room for your printed name on this form, ***your signature must be legible.***
- 13. DATE OF VACCINATION:** Enter the date the animals were vaccinated.
- 14. AGREE CODE:** Federal Accreditation Number.
- 15. CERTIFICATION OF OWNER OR WITNESS:** The owner or designated agent must sign and date the vaccination record.

16. IDENTIFICATION NUMBER: Place the official ear tag number (the vaccination tag number) in this block. If using registration tattoos, give the entire tattoo (must match registration papers, which may be requested), along with the brand on the animal, and their location.

17. AGE: Note the age of the animal in years (Y) or months (M).

18. BREED: Enter the breed abbreviation. A list of standardized breed codes is provided. For example, the code for Angus is AG, not AN. If animal is a crossbreed/mixed, the code is XX. Black Angus is not a standard breed (and as such, the code BA is for Barzona).

19. SEX: Enter F. The only official calfhood vaccinates are female.

20. P/B-GRADE: Mark this block if the animals are purebred (registered) or grade calves.

21. *TATTOO: If you are retagging animals previously vaccinated and tattooed, show the existing tattoo. Sign and date the “Certification for Re-Establishing Vaccination Status” block.

BRUCELLOSIS USDA UNIFORM METHODS & RULES

Because the regulations are currently evolving and changing at a rapid pace, including excerpts would be outdated shortly after they were included. Therefore, it has been decided to NOT include excerpts from the UMR at this time. However, the links below provide access to the Brucellosis UMRs for various species and should be referred to if you need specifics on Brucellosis rules and methodology. The location of the actual regulations would be the 9CFR. The CFR also contains the details for many other regulations that Accredited Veterinarians must adhere to. Therefore, a link to that is also included below.



2003 Bovine Brucellosis UMR

http://www.aphis.usda.gov/animal_health/animal_diseases/brucellosis/downloads/umr_bovine_bruc.pdf

2003 Cervid Brucellosis UMR

http://www.aphis.usda.gov/animal_health/animal_diseases/brucellosis/downloads/bcervumr.pdf

1998 Swine Brucellosis UMR

http://www.aphis.usda.gov/animal_health/animal_dis_spec/swine/downloads/sbruumr.pdf



THE IOWA SCRAPIE PROGRAM

History

Scrapie is a Transmissible Spongiform Encephalopathy of sheep and goats that is transmitted at the time of lambing or kidding via exposure to placenta and birth products. It is a non-zoonotic, fatal prion disease of sheep and goats. The National Scrapie Eradication Program was launched in November 2001. Iowa and the USA is making progress toward this goal. Two key factors essential to success have been individual identification of sheep and goats to allow tracing, and the national Regulatory Scrapie Slaughter Surveillance (RSSS) program. RSSS began in 2003, and by the end of FY2016, the percentage of sheep found positive to Scrapie at slaughter has dropped by 99% from 2003. This suggests that the approximately 570 Scrapie- infected flocks that have been identified and cleaned up since the beginning of the program have made a real dent in the prevalence of scrapie nationwide.



Identification

A primary component of the Scrapie Program is having all sexually intact sheep and goats identified, and therefore traceable to their flock of birth, and subsequent flocks where lambing/kidding could have occurred. This is accomplished by requiring that all sexually intact sheep and goats are identified before, or upon departure from their flock of birth. The program also relies in part on producer and market/dealer records, and hence record-keeping requirements are also specified. Sheep and goat producers, markets, and dealers can be issued free “scrapie tags” – official USDA ear tags approved for use in the scrapie program, by calling 1-866-USDA-TAG. Requirements for goats vary slightly, with some goats currently being exempt from ID requirements, and official tattoos also being acceptable. For more information visit the IDALS website at: www.iowaagriculture.gov/animalIndustry.asp



Regulatory Scrapie Slaughter Surveillance

Currently there is a slaughter surveillance program targeting adult sheep and goats at slaughter. This is our primary method for identifying scrapie-infected flocks/herds.

On Farm Testing

As we get further along in the eradication program, we will depend more and more on producers and veterinarians to report sheep and/or goats that have clinical signs resembling Scrapie to find the last remaining cases of Scrapie.

Flock Clean-Up Plans

State and federal district veterinarians are responsible for working with owners of infected flocks to complete scrapie flock clean-up plans. This usually involves genetic testing to identify scrapie-susceptible sheep, if funds are available for these animals, and cleaning and disinfecting of lambing areas. All goats are susceptible to scrapie and so all goats in a scrapie infected flock/herd are indemnified if there are funds and removed.

Scrapie Genetic Resistance Testing

Practitioners may be called upon by their clients to do genetic testing for scrapie. When you collect blood for genetic samples, be sure to review the guidelines so that the test meets the requirements for an official test under USDA policy (see attached sheet). For more information on scrapie-resistance genetics see the attached hand-out; “Genetics of Scrapie Resistance for Rams”.

For More info on the Iowa Scrapie Program visit the Scrapie Pages at the IDALS website!

2019 National Scrapie Eradication Program Standards

<https://iowaagriculture.gov/sites/default/files/animal-industry/pdf/2019ScrapieProgramStandards.pdf>

Genetics of Scrapie Resistance for Rams
(A genetics review for sheep producers)

The primary gene that determines whether an animal is **susceptible** to scrapie (can easily get scrapie), or whether it is **resistant** (almost never becomes infected with scrapie) is a gene located at **codon 171** that consists of a pair of factors usually designated as “R” and “Q”. “R” is the gene most resistant to Scrapie in the United States, and “Q” is most susceptible. So an animal that is “RR” is very resistant, and there have been no known cases of scrapie in “RR” sheep in the United States. An animal that is “QQ” is the most susceptible to scrapie, and almost all known cases of scrapie have been in “QQ” sheep. Sheep that are “QR” are usually resistant to scrapie; there have only been three known cases of scrapie in “QR” sheep in the U.S. (with these few scrapie-infected “QR” animals, another genetic factor seems to come into play, located at codon 136. See more on this below).

When it comes to rams used for breeding, we need to think beyond genetics that will protect the ram itself from getting scrapie. We need to think of what “genotype” will pass on the most protection to the flock. A common misconception is that if a ram has one “R” then he’s good for breeding with respect to scrapie. In actuality, while the ram may be protected from getting scrapie, many of his offspring will not be! Using only “RR” rams for breeding will produce offspring that are resistant to Scrapie.

If you’ve ever studied basic genetics in school, then you probably remember these quadrants:

	Ram Q	R		Ram Q	R		Ram R	R
Ewe	Q	QR	QR	Q	QR	QR	Q	QR
	R	QR	RR	Q	QR	QR	Q	QR

In the first example, the ewe and the ram are both “QR”. The square shows all the possible outcomes of the offspring: 50% will be “QR”, 25% will be “RR”, and 25% will be “QQ”. This means that even with parents that are usually resistant to scrapie, one quarter of the offspring born to this pairing would be susceptible to scrapie.

In the second case, using the same “QR” ram on a ewe that is “QQ”, it’s even worse, with half of the offspring being “QQ”.

But in the third case, using an “RR” ram, it is impossible to get any “QQ” offspring, even out of a “QQ” ewe. This is how you can “scrapie-proof” your flock if you are saving back your own replacement ewes; by using only RR rams. Over time as the old “QQ’s” are culled and home-raised replacements are “QR” or “RR”, your chances of having a positive scrapie diagnosis in your flock shrinks down to zero. If you buy replacements, look for a flock that uses only “RR” rams or only purchase QR or RR replacement females.

Remember that scrapie can only be spread by infected female animals at or soon after lambing or aborting, via the afterbirth and fluids. Scrapie infected ewes bred to an RR ram and carrying QR lamb(s) will not have the Scrapie Prion in the afterbirth or birth fluids. So it is possible to limit the spread of Scrapie even in infected ewes by exclusively breeding with RR rams.

Are you getting “Official” Scrapie Resistance Genotype tests? Many labs are now offering scrapie resistance genotype testing (if you are not familiar with scrapie resistance genotype testing please see the Iowa Department of Agriculture and Land Stewardship website’s scrapie pages at:

<https://www.iowaagriculture.gov/animalIndustry/scrapieProgram.asp>

Many producers are taking advantage of the availability of this testing so as to be able to choose sheep that are resistant to scrapie.

Requirements for an Official Test: An official test is one that is recognized by USDA (sheep only):

- 1.) The sample must have been collected by an accredited veterinarian;
- 2.) The sample must be submitted to the lab with an official form called a “5-29” (the veterinarian can get these from the Iowa USDA APHIS VS Federal Office, phone (515) 284-4140). These special forms are numbered, and the test results will be linked to that number in the USDA database.
- 3.) The animal being tested must have an official scrapie tag in place when the sample is taken, preferable from the flock where she/he was born, and the veterinarian must record this complete ID number on the 5-29. It is recommended that any other identification on the animal is also recorded. If the flock of origin ID is no longer in the animal’s ear and you replace it with your own official ID, be sure to keep a record to show what ID was in the animal and what ID you replaced it with.
- 4.) The blood must be sent to a USDA Approved Lab. These are labs regularly monitored by USDA for accuracy.



A list of approved labs can be found on the USDA scrapie web site:

https://www.aphis.usda.gov/animal_health/lab_info_services/downloads/ApprovedLabs_genotyping.pdf

The listings change periodically, so always check the website before submitting a sample.

Why are official tests important? Most labs provide reliable results, and in most instances, when you want to know your sheep’s genotype for your own selection purposes, sending a sample in on your own can make sense (and many of the Approved Labs accept private samples from producers). Official tests are particularly important with respect to the state/federal scrapie eradication program. When an ewe which originated in a flock that is later found infected with Scrapie is traced to your flock (you purchased the ewe), and this animal is no longer available for testing either due to death or sale, an official test on record for this animal can save you from the need to do further testing within your flock to rule out the likelihood of scrapie exposure. In these instances there is a concern that this ewe could have spread scrapie in your flock. If the ewe were still there, then this possibility can be ruled out by testing the ewe. But since the animal is missing, other sheep in your flock must be tested, and some may even be indemnified and sampled at slaughter in order to look for scrapie infection. In some cases, when these animals are too young to test, they may have their movement restricted until a later date. This process can be lengthy and frustrating. (This “missing ewe” situation is also particularly difficult with flocks where there are also goats on site, since goats cannot be genotyped, and all goats would be considered “QQ” and some may have to be indemnified and sampled). When a ewe was purchased and is no longer available to test, a previous “official” genotype scrapie resistance test can resolve this issue if the ewe tested “QR” or “RR” (if she tested “QQ”, or in very rare cases QRAV then further diagnostic testing within the flock would still be required).

Bottom Line: Official scrapie resistance genotype testing is recommended for all purchased sheep that you intend to use for breeding. When sheep are purchased and the genotype results are provided, it may be difficult to verify whether the test was an official test. Retesting of these animals is recommended.

If you have questions or need clarification, please feel free to contact Dr. Greg Schmitt with the Iowa Dept. of Agriculture at 515-669-5633. Your state or federal district veterinarian can also provide information on this subject.

STATE 1	ALL INCOMPLETE RECORDS WILL BE RETURNED FOR COMPLETION					FORM APPROVED OMB NO. 0579-0101		
COOPERATIVE STATE - FEDERAL SCRAPIE CONTROL PROGRAM							A	
SCRAPIE TEST RECORD								
COUNTY OF OWNER 2	FLOCK OWNER'S NAME - LAST 3	FIRST 3	MI	PREVIOUS TEST DATE	PERSON ID (VETERINARIAN/SNGD)	TOTAL # OF SAMPLES 12		
FLOCK ID 4	FLOCK OWNER'S COMPLETE ADDRESS 3			CERTIFICATION FOR PAYMENT				
				<input type="checkbox"/> Cooperative Agreement <input type="checkbox"/> State/Federal Expense <input type="checkbox"/> Owner's Expense 13				
				I certify: That this test was made by me on the animals identified below on the dates as entered in appropriate spaces. That when payment is claimed at program expense in accordance with agreement number below, no payment has been or will be received from any other source.				
COUNTY OF FLOCK 5	FLOCK OWNER'S TELEPHONE NUMBER 3	SEC.	FARM NO.		VETERINARIAN'S SIGNATURE 11			TELEPHONE NO 11
7 REASON FOR TEST		COMPLETE FLOCK TEST OF ALL ELIGIBLE ANIMALS: <input type="checkbox"/> YES <input type="checkbox"/> NO			VETERINARIAN'S NAME (Please print) 11		COLLECTION DATE 14	
1 SURVEILLANCE	6 RETEST	6 NO. OF ANIMALS IN FLOCK _____			VETERINARIAN'S ADDRESS 11			
		KIND OF FLOCK						
		<input type="checkbox"/> SHEEP 8 <input type="checkbox"/> OTHER _____ <input type="checkbox"/> GOAT <input type="checkbox"/> OTHER _____ <input type="checkbox"/> MIXED						
2 FLOCK (RE) CERTIFICATION		7 INFECTED OR SOURCE RSSS POS.		LAB TURN AROUND TIME				
				<input type="checkbox"/> 5 DAY TURNAROUND 9 <input type="checkbox"/> 10 DAY TURNAROUND				
3 HIGH RISK TRACE TO FLOCK		8 INFECTED OR SOURCE (NOT RSSS)		TEST TYPE				
				<input type="checkbox"/> 171 CODON ONLY 10 <input type="checkbox"/> 171/136 CODON <input type="checkbox"/> 136 CODON ONLY <input type="checkbox"/> 171/136/154 CODON <input type="checkbox"/> THIRD EYELID (TE) <input type="checkbox"/> OTHER _____				
4 OWNER'S REQUEST		9 MISSING EXPOSED EWE (ME)		11 FAX NO. OR E-MAIL ADDRESS		AGREEMENT NO. 15		
5 IMPORTED		10 OTHER		FLOCK STATUS				
				<input type="checkbox"/> SFCP 16 <input type="checkbox"/> EXPOSED <input type="checkbox"/> INFECTED <input type="checkbox"/> NONE <input type="checkbox"/> SOURCE <input type="checkbox"/> INVEST <input type="checkbox"/> OTHER _____				

Specimen #	Official ID Number	Other ID Numbers	Designation (pos, sus, exp, me, n/a)	Age	Sex (m,f,cm)	Breed (if unkn, face color)	3rd Eyelid Info		
							L	R	Seen/Unseen
	17	18	19	20	21	22	L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen
							L	R	Seen/Unseen

NOTE: Sample numbers on specimens must be the same as listed on this form.		Circle if the 3rd eyelid tissue came from the Left or Right eye Circle if the lymphoid tissue was Seen or Unseen	
DSE Name: Dr. Sharon Fairchild & Dr. Greg Schmitt		Remarks:	
Address: 23			
Phone Number: Fax Number: E-Mail: greg.schmitt@iowaagriculture.gov			
		DATE	OWNER'S SIGNATURE: 24
I hereby acknowledge receiving a copy of this record which I have examined and find correct.			

COMPLETING SCRAPIE TEST RECORDS

All test charts must be completed **legibly in their entirety** and will reflect the true status as determined by the testing veterinarian. If an item is not applicable, mark an “NA” or a dash indicating that it has been reviewed.

Requirements for submitting samples for official genotype testing:

- Sheep are [officially identified](#).
- The blood is drawn by a Federal or State animal health official or an accredited veterinarian.
- The lab is approved by APHIS (see below).
- The sample also meets any additional requirements set by the [approved scrapie susceptibility genotyping lab](#).
- The sample is submitted with a VS Form 5-29 or State equivalent. **VS Form 5-29 can be obtained by calling the APHIS VS Iowa Area Office at (515) 284-4140.**

1. STATE: Iowa, may be abbreviated IA.
2. COUNTY: Name of the county where the owner lives.
3. HERD OWNER’S NAME & ADDRESS: Legal name of the owner should be entered in this block, last name first. Complete mailing address of the herd owner including zip code and phone number.
4. FLOCK ID: Scrapie flock ID. For example: IA3421.
5. COUNTY OF FLOCK: County of physical location of animals.
6. COMPLETE FLOCK TEST OF ALL ELIGIBLE ANIMALS: If whole flock test, check YES and give the number of the test eligible animals in the herd.
7. REASON FOR TEST: Place an “X” in the appropriate box.
8. KIND OF FLOCK: Place an “X” in the appropriate box.
9. LAB TURN AROUND TIME: Mark 10 day turnaround.
10. CODON: Use 171 only.
11. SUBMITTING VETERINARIAN INFORMATION: Always sign the test record and print your name below, and complete your address and telephone information.
12. TOTAL # OF SAMPLES: Complete the total number of samples collected and submitted.
13. CERTIFICATION FOR PAYMENT: Check at “owner’s expense”.
14. COLLECTION DATE: Complete the date that the samples were collected.

15. AGREEMENT NUMBER: Fill in your Federal Accreditation Number.
16. FLOCK STATUS: Place an “X” in the appropriate box.
17. IDENTIFICATION: This must be OFFICIAL identification. The animal must have this in the ear. It will be in the form of: State Abbreviation, flock number, animal number, i.e. IA1467 0056. This must be on the form or the test will not be considered to be “official”.
18. OTHER ID NUMBERS: Record all identification numbers present in the animal.
19. DESIGNATION: Check the box N/A (unless told differently by a regulatory authority).
20. AGE: Note the age of the animal in years (Y) and months (M).
21. SEX: Fill in as appropriate.
22. BREED: Fill in the breed of animals if known. This is important when doing an “official” test. **If the breed is unknown, make sure to put in the face color of the animal sampled (i.e. BF, WF, mottled) **
23. DESIGNATED SCRAPIE EPIDEMIOLOGIST (DSE): Complete contact information for the Designated Scrapie Epidemiologist in your area. For Iowa, use Sharon.K.Fairchild@aphis.usda.gov so the results will be entered into the government data base and be “official”. You do not need to put the address of the DSE.
24. OWNER’S SIGNATURE: The owner or his agent should sign and date the record.

Be sure to send this to an “approved” USDA genotype testing lab so the results will be official. You can call your DSE: Dr. Greg Schmitt at (515) 669-5633 to find an approved lab. You can also find a USDA approved lab at:

https://www.aphis.usda.gov/animal_health/lab_info_services/downloads/ApprovedLabs_genotyping.pdf

Pseudorabies Program

History

Pseudorabies (PRV) is a disease of swine that causes death in cattle, horses, dogs, cats, sheep, and goats. The disease is caused by pseudorabies virus, an extremely contagious herpesvirus that causes reproductive problems, including abortion, stillbirths, and even occasional death in baby, breeding, and finishing hogs. In 1989 USDA initiated a PRV Eradication program, and the US was declared free of pseudorabies in commercial swine in 2004. All states in the US are currently classified as Stage V.



Surveillance

Pseudorabies is a reportable disease. Always keep PRV in mind as a differential diagnosis. If it is listed as a surveillance rule-out on an ISU lab submission there will be no charge for this test (check with the IDALS office or the Dx Lab to assure availability). It is still present in the US in wild-type swine in many states. On-going surveillance continues in the form of slaughter sow and boar testing. Any time that a positive or suspect result is attained via this testing then a PRV test chart is issued, and the producer is asked to have testing completed on his or her herd. This testing is to be completed by the producer's regular herd veterinarian. The veterinarian is compensated for his or her services, and the lab fees are paid for, by USDA. The veterinarian must be accredited in order to perform this task and must have a fee basis agreement in place with APHIS.

Conducting PRV Testing

There are two types of PRV test charts: a "Form 1" is for testing that is requested by the State of Iowa. This testing can only be completed by an accredited veterinarian. Breeding swine must be individually officially identified on the test chart. The test chart must be completed accurately, and with all requested information, including the location of the swine, age, and sex (if they are feeder swine, then "mixed" is acceptable). The "Form 2" is for producer-requested testing, such as for export or exhibition. This testing is completed at producer expense, and the lab fees are not covered by USDA. If you have additional questions about conducting PRV testing please contact your state or federal field veterinarian.

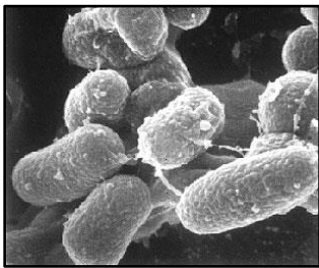
Exhibition Testing Requirements

Currently there are no PRV testing requirements for swine returning home from any exhibitions such as county fairs, district shows, jackpot shows, or the state fair. All swine exhibitions must be registered with the State Veterinarian's office.



Johne's Disease

Johne's disease (also called paratuberculosis) is an infectious bacterial disease primarily affecting the intestinal tract. Infected animals may show no signs of the disease until years after the initial infection. It has been estimated that 22 % of the nation's dairy herds have greater than 10 % of the herd infected with Johne's disease. It has also been estimated that 41 % of the nation's dairy herds have at least one ELISA-positive cow. It has been estimated that nearly 8 % of the nation's beef herds are infected with Johne's disease. Although an 8 % infection rate might seem low compared to the percent of the dairy herds infected, the protocol for testing was used to find beef herds with at least 10 % of the herd infected. The estimated prevalence of 8 % infection rate for Johne's disease should be considered a conservative estimate.



Johne's disease is caused by the bacterium *Mycobacterium avian subspecies paratuberculosis* or MAP for short. The bacteria grow and multiply inside the immune cells of an animal. Johne's disease typically enters a herd as an infected, but healthy-looking animal in Stage I. As the disease progresses in that animal, the frequency and number of bacteria being excreted increase. The infection spreads to herd mates without the owner's knowledge. Calves are the most susceptible group to Johne's Disease. Resistance to the disease increases with the age of the cow.

However, adult cattle can be infected with Johne's disease if they are exposed to large doses of *Mycobacterium paratuberculosis* and/or immunologically compromised.

The incubation period for the disease varies from 1 to 10 years, with most clinical signs of the disease showing up after delivering their 2nd or 3rd calf. Animals exposed between 18 and 24 months of age, and exposed to a very small amount of the organism, likely will not develop the disease until they are older. This may be 8 – 10 years of age. The most important factors determining when animals with Johne's disease start developing clinical disease are the animal's age when first detected and the dose of the organism ingested.

Common Sources of Infection:

1. The most common source of infection is feces or manure. When the microbe is excreted in the feces, it can contaminate the udder, soil or water. Outside the animal, the organism does not multiply well, if at all, but it can survive over a year in the environment because of its resistance to heat, cold, and drying.
2. Another source of infection is colostrum and milk from infected dams. The likelihood of Johne's bacteria being excreted in milk of infected females increases as the disease progresses. In beef herds, where calves remain with their mothers and nurse daily, the chance for transmission of the infection through colostrum and milk





is high. The bacteria may be excreted directly through the mother's milk or, it might be present on the outside the teats in contaminated feces.

3. Prenatal exposure may be a source of infection for calves. Becoming infected before birth is possible for a fetus, if the dam is in the late stages of disease. Studies have shown that calves born to cows in later stages of Johne's disease were 8 to 40 percent infected while still in the womb.
4. Standing water. Pond water contaminated with infected feces is another potential source of infection.
5. Pastures contaminated with infected feces.

Things to Remember

Fecal contamination is the main source of infection. Fecal contamination of feed, udders, drinking water and environment help spread the disease. Poor farm hygiene will increase the infection transmission rate. This is why biosecurity is so important in preventing the spread of this disease. Animals that live under good husbandry conditions tolerate the Johne's disease infection better. It would appear that some kind of stress may be involved in causing the cow to become infected.

The Four Stages of Johne's Disease in Cattle

Johne's disease is a slow, progressive disease. The signs of Johne's disease may not be seen until years after the initial infection. If the infection remains unchecked, the rate and number of infected animals in the herd increases over time.

Stage I: Silent, Subclinical, Non-detectable Infection

Stage I is the initial infection: the animal is infected, not showing signs of disease and may be shedding small numbers of microbes into the environment that are not detectable by diagnostic tests. This stage typically starts in calves and heifers less than two years of age. Eventually, these animals progress to Stage II.

Stage II: Subclinical Shedders

In Stage II, the infection is progressing and the animal still does not show any clinical signs. Subclinical shedders are typically older heifers or adult animals that may appear healthy, but are shedding the organism in very high numbers, probably enough to infect others nearby or in contact. Infection is detectable by organism based techniques but not often by blood tests. Shedding in Stage I and II is often cyclical depending on stress conditions such as calving, weaning, environmental, etc.



Stage III: Clinical Johne's disease

In Stage III, the animal is showing the early signs of Johne's disease. Animals with advanced infection may have been brought on by a period of stress. These cattle have acute, intermittent, watery, fetid manure. A loss of weight and drop in milk production are also common signs. Many of these infected animals will continue to eat, and are positive on their serologic tests. Clinical signs may only last from a few days to a few weeks before animals progress on to Stage IV.

Stage IV: Advanced Clinical Johne's Disease.

In Stage IV, the animal has obvious clinical disease and is readily recognized by the trained observer and is detected by diagnostic tests. This is the end stage of the disease. Most animals are very thin with fluid diarrhea. Some will progress from Stage II to Stage IV in a few weeks.



Diagnosis of Johne's Disease

The clinical signs of Johne's disease, diarrhea and weight loss can resemble many other diseases. Some herds will experience poor performance in spite of good nutrition. An excellent way of diagnosing Johne's disease is to detect the bacterium that causes the infection. Since this bacterium is not normally found in the manure of uninfected animals, if detected, it is assumed to be causing an infection and pathology in an animal. **Official** Johne's disease tests in Iowa consist of two tests that are organism based tests. They are the standard fecal culture and DNA probe (PCR).

Standard bacterial culture has been used for almost 100 years. It requires little equipment and is technically simple to perform. It does, however, require experienced technologists who are able to identify the growth of bacterial colonies on the culture medium. The test is moderately expensive, costing roughly \$20 to \$30 / test and takes at least 16 weeks to complete because of the slow growth rate of *Mycobacterium tuberculosis*. Due to the high labor costs of fecal culture, it has been discontinued at the ISU VDL.

A FECAL CULTURE THAT IS POSITIVE INDICATES TRUE INFECTION

DNA probes allow detection of *Mycobacterium paratuberculosis* without having to grow the bacterium. Therefore, they are much faster. A DNA probe test can be done in less than 3 days. The main disadvantage is cost.

There is no commercial test for Johne's disease that detects Stage I or early Stage II infections. So, being completely assured that a single negative-test result certifies an animal is infection-free is not possible.



IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

The fastest and easiest way to measure the infection rate (apparent prevalence) in a herd is by doing a pooled fecal PCR on all animals 2 years and older in a herd. Results are most reliable for herds already confirmed to be infected by isolation of the microbe from at least one animal.

More information on Johne's testing at ISU VDL can be found at:

<https://vetmed.iastate.edu/vdpam/about/production-animal-medicine/beef/bovine-disease-topics/johnes-disease>

Iowa Rules for Johne's' Disease

Johne's disease is a reportable disease in at least 13 states, including Iowa. The Iowa Department of Agriculture & Land Stewardship (IDALS) does not place any restrictions on the farm where the Johnes infected cattle are located. However, a person shall not knowingly sell cattle with Johnes Disease except directly to a packer or a packer at a livestock market. Johnes infected cattle move to slaughter only using an Owners-Shipper Statement to document the movement.



The Iowa Department of Agriculture and Land Stewardship (IDALS) offers a Risk Assessment program at no cost for veterinarians and their producers, that will assist them in developing a management plan for decreasing the risk of contracting or spreading Johne's disease. In the Johne's disease risk assessment evaluation, District Veterinarians will assist veterinarians in the field and their producers by walking through different phases of production to determine the potential risk of the herd becoming infected with Johne's disease. The risk assessments can also help the infected herd decrease or eliminate the spread from infected animals to negative animals within the herd.

Ethics

For Cattle Buyers:

It is common that herds get infected only by buying infected cattle. Pre-purchase testing for Johne's disease is today's standard of veterinary practice. Testing the herd of origin is much more reliable than testing only the purchased cattle.



Options in Order of Decreasing Risk of Buying Johne’s Infected Animals:

Options	Risk
No Testing	Very risky, > 10 % chance, <u>for each purchased animal</u> of being infected
Test individual animal before purchase – don’t buy anything from herds with cows suspect or positive	Slightly less risky than not testing; more confidence in negative tests on older animals than heifers
Quarantine and test after purchase: PCR Testing 2x at 6 month interval	Lower risk and is sound policy for several infectious diseases of cattle
Partial test on herd of origin PCR testing 30 head of 2nd lactation or older cows	Low risk of Johne’s disease in any animal from such herds, <u>but is not 0 %</u>
Whole herd testing on herd of origin	Very low risk of Johne’s disease if herd test 100 % Negative

For Cattle Sellers:

Veterinarians should caution cattle owners to beware of the liability laws that might apply to the sale of infected animals. Liability laws protect the buyer against negligence and fraud. Remember, the basis of most consumer protection laws is practicing “the golden rule”. Not testing cattle does not avoid liability issues that might arise later. Test all or part of the herd and disclose the results.

For Veterinarians:

Remember, Johne’s disease is a reportable disease. You will need to inform the State Veterinarian’s Office of an infected herd. Ignoring a problem and not dispensing correct advice has been used as grounds to sue veterinarians. Veterinarians should protect themselves by confirming the diagnosis and providing proper advice in writing. Strongly advise owners in writing that test positive cows be sent ONLY FOR SLAUGHTER, otherwise you and the client may be contributing to the spread of this infection to other herds.

Johne’s Vaccination Program

The whole cell vaccine is prepared from a stock culture of *Mycobacterium tuberculosis*. The bacteria is suspended in mineral oil and sterilized by autoclaving. The vaccine is around 90 percent effective, as shown by trial runs between 1967 and 1976.

Calves are vaccinated by a veterinarian between one to 35 days of age, but preferably after the calf is one week old. The vaccine is given subcutaneously under aseptic conditions in the brisket area. A lump will form at the site of injection of the vaccine, which may vary from one inch in diameter to several inches in diameter. Eighty percent of them are less than four inches. Occasionally, one will break open and drain for a time. It can be hazardous to use, especially if someone were to accidentally inject themselves. The Johne’s vaccine will interfere with both TB testing and immunological tests for Johne’s disease.



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Requirements to use Johne's vaccine:

1. Only if *Mycobacterium paratuberculosis* (organism that causes Johne's Disease) has been isolated by an organism-based test (positive fecal culture or PCR).
2. Conduct a whole herd tuberculin test of all animals 24 months of age or older prior to signing the agreement.
3. Have a Premise ID number prior to signing the Johne's Vaccination Agreement.
4. Purchased replacement stock must be tuberculin-test negative before introduction into the herd.
5. Cattle that change ownership must be accompanied with a Certificate of Veterinary Inspection (CVI)/Health Paper). Johne's vaccinates should be noted on the CVI with the identifying Johne's vaccination tattoo.
6. Herd additions should be from herds not known to be infected, must be tested for tuberculosis or from a TB-accredited herd, and calves under 35 days of age should be vaccinated against paratuberculosis (Johne's) before introduction into the herd.
7. A fecal test on all animals three years of age and over is recommended prior to start of vaccination.
8. Remove official Johne's test positive cattle and clinical cases for slaughter in accordance with State & Federal Regulations.
9. A Johne's Risk Assessment and Herd Management Plan is conducted prior to the start of the vaccination program.
10. The herd veterinarian administers the Johne's vaccine to calves between 1 to 35 days of age.
11. File and submit a report to the Iowa Department of Agriculture & Land Stewardship (IDALS) within 30 days after the date of vaccination.

FIVE Things to Remember about Johne's Disease and the Control Program

- 1) Johne's disease is a **REPORTABLE** but not a quarantineable disease!
 - This means while any positive Johne's test indicates an 'infected herd', a positive individual fecal (PCR or culture) indicates the organism is present and this infected animal can only leave the premise for slaughter only.
 - "Subclinical" animals can shed the Johne's organisms in their manure and possibly thru colostrum, milk and in utero.



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- 2) The Johne's Disease Control Program is voluntary and confidential within Iowa statutes.
 - Risk Assessments ('walk-through' bio-risk evaluations) are free from your area state District veterinarian.
- 3) Vaccination can be utilized for control in infected herds with the approval of the State Veterinarian.
 - This management tool has shown great benefit when combined with best management practices.
- 4) Even though youngest animals are most susceptible, older animals can be infected but clinical signs tend to be delayed.
 - Manure is usual means of transmission - one thimbleful from a heavy to 'Super-shedder' can infect a calf!
 - 'Super-shedders' shed at the rate comparable to 20,000 low shedders and some can be subclinical initially!
- 5) Bulls should never be forgotten! Make sure all bulls are tested with an organism based test before adding to the cows. One positive bull can expose a large percentage of a herd.

Johne's Control Program website for more information:

<http://www.iowaagriculture.gov/animalIndustry/johnesDisease.asp>

Gary Eiben, DVM

Johne's Program Coordinator

Cell phone: (515) 669-6095

E-mail: Gary.Eiben@iowagriculture.gov

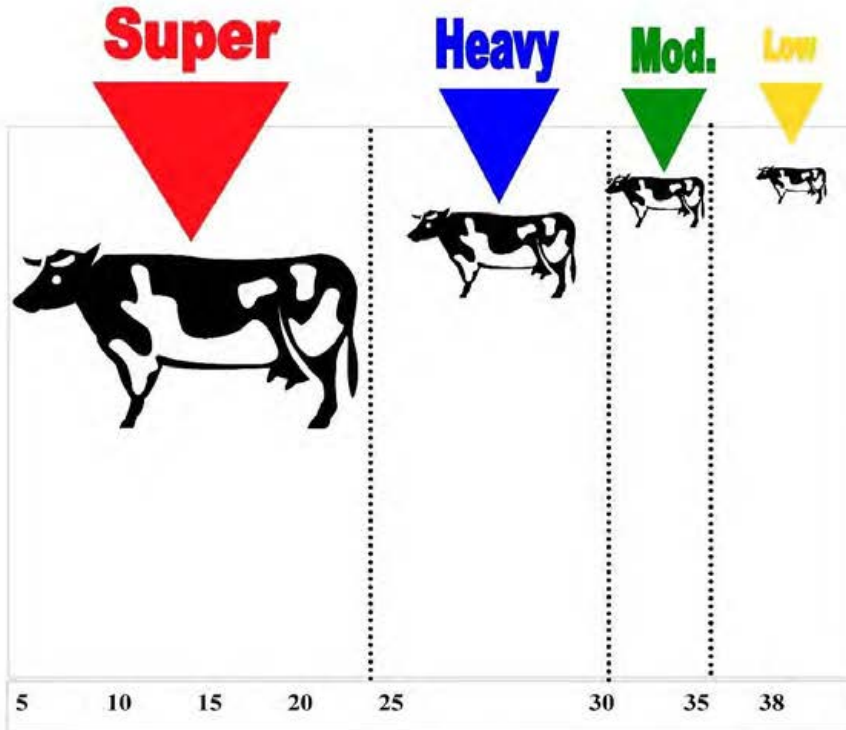
Johne's Vaccination Fact Sheet

<http://www.iowaagriculture.gov/animalIndustry/IVAH/VaccinationFactSheetJohnes.pdf>

Johne's Voluntary Herd Classification Program

<http://www.iowaagriculture.gov/animalIndustry/IVAH/JohnesVoluntaryHerdClassificationProgram.pdf>

PCR Guidelines for Estimating Shedding Categories



Ct = Cycles to Positive	
Super Shedder.....	<22
Heavy Shedder.....	22-29
Moderate Shedder....	29-34
Low Shedder.....	34-38
* Inconclusive.....	38-42
* Recommend to retest suspect animals in 30 to 60 days.	

One Super Shedder is equal to 20,000 Low Shedders!!!

2010 cELISA Interpretation Categories (Milk)	
S/P	Interpretation
≤ 0.30	Negative
0.30 - .40	Suspect*
≥ 0.40	Positive
*A second cELISA test in 60 to 90 days is recommended to help determine status OR utilize fecal PCR or culture to confirm.	

2010 cELISA Interpretation Categories (Serum/Plasma)	
S/P	Interpretation
≤ 0.60	Negative
0.60 - .70	Suspect*
≥ 0.70	Positive
*A second cELISA test in 60 to 90 days is recommended to help determine status OR utilize fecal PCR or culture to confirm.	



Johne's Disease Control Program-Johne's Vaccination Agreement

Between IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP And

Date _____

Name of Herd Owner _____

Address _____

Premise # _____

And

Name of Iowa Accredited Veterinarian _____

Address _____

Vet code (accreditation #) _____

A. The Department Agrees To:

- 1) Permit use of Johne's disease vaccine only if Mycobacterium paratuberculosis has been isolated by an organism-based test (positive fecal culture or PCR).
2) Supply vaccine to veterinarian for administration to calves in owner's herd.
3) Receive and file vaccination records and test records.
4) Supervise program as necessary.

B. The Veterinarian Agrees To:

- 1) Administer vaccine when calf is from 1 to 35 days of age.
2) Identify calf by official ear tag, tattoo, or registry number and further identify calf with a tattoo in the left ear which includes 1, 2, 3, or 4 for the respective quarter of year when vaccinated followed by letter 'J' for Johne's, followed by a number (0 - 9) representing the year when vaccinated.
3) File and submit a report to the Department within 30 days after date of vaccination. This report is to include the sex, birth date, and official individual identification and include identification of dam.
4) Compensate Department for cost of vaccine.

C. The Owner Agrees To:

- 1) Submit no claims against Department, veterinarian, or vaccine producer losses or adverse effects of the vaccine.
2) Compensate veterinarian for administration of vaccine, collection of fecal samples and laboratory charges.
3) By Iowa statues, with change of ownership animals must be accompanied with a certificate of veterinary inspection (CVI/health paper). Johne's vaccinates should be noted on the CVI with the identifying Johne's vaccination tattoo. Cattle going directly to slaughter are exempt and do not need a CVI.
4) Remove official Johne's test positive cattle and clinical cases for slaughter in accordance with state & federal regulations.
5) Have a Premise ID number prior (or submitted) to signing agreement.
6) Conduct a whole herd tuberculin test (all animals 24 mos. of age and older) by intradermal caudal fold prior to signing agreement.
7) Purchased replacement stock must be tuberculin-test negative before introduction into the herd.

D. It is Mutually Understood and Agreed:



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LAND STEWARDSHIP**

- 1) This agreement is to define in general terms the basis on which parties concerned will cooperate and does not constitute a binding obligation on either party for the expenditures of funds. Each party will be responsible for its own costs under this agreement.
- 2) The responsibilities assumed by each of the parties hereto is contingent upon funds being available from which expenditures legally may be met.
- 3) A fecal test on all animals three years of age and over is recommended prior to start of vaccination program.
- 4) Animals positive to organism-based detection/fecal test (culture or PCR) should be promptly identified and premises cleaned and disinfected following their shipment according to Iowa Code of Law and Administrative Rules.
- 5) Herd additions should be from herds not known to be infected, must be tested for tuberculosis or from a TB-accredited herd, and calves under 35 days of age should be vaccinated against paratuberculosis before introduction into herd.
- 6) Best management practices and biosecurity measures should be instituted.
- 7) The vaccination program will be conducted until one or all parties feel the necessity to terminate.
- 8) This agreement shall become effective upon date of final signature, but may be modified or discontinued at the request of either party. Requests for termination or modification shall be submitted to the other party in writing for consideration not less than 60 days in advance of the effective date of such termination or modification.
- 9) Risk assessment and Herd management plan is conducted prior to the start of vaccination program and perform a RAMP every 3 years or at the discretion of the Designated Johne’s Coordinator.

Date

Owner

Date

Veterinarian

Date

District Veterinarian

Date

**State Veterinarian, Division of Animal Industry
Iowa Department of Agriculture & Land Stewardship**

SAMPLE



C-PUNCH VERIFICATION FORM

Animal ID (Accession#): _____

Status of Animal (dead/euthanized): _____

Date (C-Punched): _____

Owner Shipper Statement issued yes

Owner's Signature: _____

Owner Name & Address: _____

Name

Address, City, State, Zip Code

Phone: _____ County _____

Discussed Slaughter-Only Restrictions

District Veterinarian: _____

Signature



Johne's Owner-Shipper Statement

The following livestock (Record ID number and description) are being transported to a livestock market for slaughter channels only:

CATTLE			
	Number ID	Ear Tag	Lab Report Accession nos.
Cows/Heifers			
Bulls			

Are animals c-punched? () Yes () No

Owner Name (Print) _____

Owner Signature _____

Owner Address _____

Market Name and address: _____

Livestock Market Representative: These animals are sold to slaughter only

Signature: _____ "Please save form in records"

Please return form to:
Iowa Department of Agriculture and Land Stewardship
FAX: 515-281-4282
Bureau of Animal Industry
Wallace State Office Building
502 E 9th St, 2nd Floor
Des Moines, IA 50319

Questions? Please contact:
Dr. Gary E. Eiben – Johne's Program Coordinator
Gary.Eiben@iowaagriculture.gov
515-669-6095

What is Trichomoniasis?

Trichomoniasis is a venereal disease of cattle characterized by early fetal death, infertility, rare abortions, and pyometra in cows and heifers, that results in extended calving intervals

- It is caused by a protozoan, *Tritrichomonas foetus*, they can be found in the genital tracts of cattle.
- When cows are bred naturally by an infected bull, 30-90 % become infected.
- Bulls of all ages can remain infected indefinitely but this is less likely in younger males.
- Most females eventually clear the infection, but infertility and infectivity may remain for 2-6 months following infection and chronic infections can occur.
- Pregnancy typically progresses for 60-120 days, then the fetus dies and is reabsorbed, resulting in an irregular return to estrus.

Problems with Cows

- Producers may notice excessive numbers of cows still cycling at the end of the breeding season.
- Most commonly seen as increases in the number of short-term pregnancies and open cows (up to 40% or more) when pregnancy checked.
- Fetal deaths and abortions can occur, and the organism can be found as late as 8 months of gestation, and live calves can be born to infected dams.
- Subsequent calving season will be spread out.
- One way of telling if the herd is still infected, is evaluating calf birth dates during the following calving season and dividing them into 21 day periods. An affected herd will show low conception rates in the first 2-3 periods and have a large percentage of open cows.

Problems with Bulls

- Commonly, symptoms are not seen in bulls.
- May occasionally see a purulent preputial discharge.
- Bulls may clear the infection, but often become carriers.
- Bulls older than 4 years-old are more likely to become carriers because they harbor the organism in the penile crypts.

Diagnosis

- History and clinical signs are useful but are similar to other cattle diseases, i.e. campylobacteriosis.
- Confirmation of the disease depends on isolating or testing for the protozoan that causes Trichomoniasis.
- Diagnostic tests are directed at bulls because they are the most likely carriers.

Treatment

- Trichomoniasis is a reportable disease and there is no legal treatment.
- Various drugs have been used to treat bulls, but none are both safe and effective.
- Bulls are susceptible to reinfection after treatment.

Control

- Control consists of eliminating the infection by testing and culling bulls.
- Replacing them with virgin bulls
- Using clean cows (clean cows are assumed to be those with calves at foot) and virgin heifers.
- Vaccine is available for cows for use at 8 and 4 weeks prior to breeding.
- Currently, the vaccine is not labeled for use in bulls.
- Eliminating Risk Factors is the Best Control:
 - Bull exposure from neighboring pastures/herds
 - Cows commingling with neighboring pastures/herds
 - New bull additions without testing (non-tested bulls)
 - Leasing or borrowing bulls
 - Retaining open cows into the next breeding season

Trichomoniasis Response Plan – Iowa

1. Conduct herd history and investigation.
2. Issue an Order of Quarantine
 - a. All non-virgin bulls
 - b. Cows not over 120 days pregnant
3. Cattle **NOT to be quarantined**
 - a. Virgin bulls less than 24 months of age
 - b. Virgin heifers less than 24 months of age
 - c. Cows 120 days or more pregnant – confirmed by veterinarian
 - d. Mature bulls with 2 negative PCR Trich tests (at least 3 weeks apart)
 - e. Cows with calf by side and no exposure to cohort bulls or any Trich positive bulls
4. Quarantine release protocol
 - a. Release all cows over 120 pregnant- confirmed by veterinarian
 - b. Bulls with 2 consecutive negative Trich tests – PCR. Testing shall be at least three weeks apart
5. Trich Herd Management Plan
 - a. When bulls are pulled from cows after breeding season – isolate cows from bulls for at least 120 days and pregnancy test by veterinarian
 - b. Use Trich test negative mature bulls, artificially inseminate or use virgin bulls
 - c. Trich test all mature bulls at least two weeks after pulling from cow herd. Positive bulls to slaughter. Retest bulls prior to breeding next breeding season.
 - d. Cull to slaughter all cows open after 120 days of pulling bulls
6. Practice Good Biosecurity
 - a. Use virgin bulls or test-negative bulls
 - b. Do not lease or borrow untested bulls
 - c. Do not buy open cows unless they have a calf at side and isolated from bulls
 - d. Maintain good fences



Iowa's Chronic Wasting Disease (CWD) Herd Certification Program (HCP)

The **Iowa CWD HCP** is a voluntary program. Each herd must have an annual inspection within 90 days of its anniversary date; inventory reconciliation must be conducted by a state district veterinarian. Certified CWD cervid herd status must include all Cervidae under common ownership. They cannot be commingled with other cervids that are not certified, and a minimum geographic separation of 30 feet between herds of different status must be maintained.



Definitions: “Cervidae” means all animals belonging to the Cervidae family. “CWD susceptible Cervidae” means whitetail deer, blacktail deer, mule deer, red deer, elk, moose and related species and hybrids of these species.



Compliance for the CWD HCP: Monitored CWD cervid herd means a herd of Cervidae that is in compliance with the Cervid Chronic Wasting Disease Surveillance Identification (CCWDSI) Program. Monitored herds are defined as one-year, two-year, three-year, four-year, and five-year monitored herds in accordance with the time in years such herds have been in compliance with the Cervid Chronic Wasting Disease Surveillance Identification (CCWDSI) program. The ultimate goal of the CWD HCP is completing five years of compliance and reaching the Certified Status, and then maintaining this status.

Annual Inventory Inspections: A herd is certified for 12 months. Each cervidae herd enrolled in the CWD HCP must have an annual inspection and inventory reconciliation conducted by a state district veterinarian. These inspections must be done annually within 90 days of the CWD anniversary date (initial inventory date). Records shall be kept to document the history/accountability of all animals in the herd, including identification, during the inspection period. These records shall include, but are not limited to:

1. All forms of identification date of movement, and sex of all animals moving into or out of the herd. All movement of animals other than to a state or federally inspected slaughter establishment shall be accompanied by an intrastate/interstate movement certificate of veterinary inspection signed by a licensed, accredited veterinarian. A copy of the certificate of veterinary inspection needs to be given to the state district veterinarian at the time of inspection.
2. All forms of identification, date of birth, and sex of all animals born on the premise.
3. All forms of identification, date of death, and sex of all animals that die, including the cause of death, if known. A copy of the CWD laboratory report of all animals 12 months and older must to be given to the state district veterinarian at the time of the annual inspection.
4. A copy of test charts for tuberculosis or brucellosis must be provided to the state district veterinarian at the time of the annual inspection.
5. Identification of all animals that escaped.

Triennial Physical Herd Inventory Inspections: Physical Inventories can be performed as part of an official herd test for tuberculosis or brucellosis. Physical Herd Inventories are separate and different from Annual Inventories conducted by our State District Veterinarians and the Physical Herd Inventories are to be conducted triennially.

Physical Herd Inventories will be required for advancement in the program. Physical Herd Inventory completions are allowed during the 90 days before or the 90 days after your herd's expiration date.

A complete Physical Herd Inventory must provide verification to reconcile all deer and verification of two approved individual identifications (one must be a USDA official identification) with the records maintained by the owner. All Cervid animals must receive the identification before 12 months of age.

The owner must present the entire herd for the Physical Herd Inventory inspection where the department, a state authorized veterinarian (accredited veterinarian) or authorized federal personnel can safely read all identifications on the animals and be able to record all identification devices. **A complete physical herd inventory must be performed at the time a herd enrolls in the Chronic Wasting Disease Herd Certification Program.**

Official Cervid Identification: All Cervid 12 months of age or older (All Animals under 12 months of age leaving the premises), shall have a minimum of two forms of animal identification. One of these identifications must be a nationally unique official animal identification. The official identification device must be a device approved by APHIS, and must be an 840 visual tag, 840 radio frequency identification devices (RFID), silver/steel and plastic USDA tag or other approved device. Information on official animal identification devices can be found on the APHIS Traceability website at the following address:
<http://www.aphis.usda.gov/traceability/devices.shtml>

The second form of identification must be one that is approved by IDALS:

1. A plastic or other material tag that indicates the official herd number issued by USDA, and includes individual animal identification which is no more than five digits and is unique for each animal.
2. A legible tattoo which includes the official herd number issued by the USDA, and includes individual animal identification which is no more than five digits and unique for each animal.
3. A plastic or other unique material tag which provides unique animal identification and is issued and approved by the North American Elk Breeders Association or by the North American Deer Farmers Association.

Animals that lose their identification should be retagged as soon as possible. All animals 12 months of age or older must have individual identification and it must be reconciled in herd records before the herd status can be advanced.

Official Laboratory Confirmation: Any Cervidae **12 months of age and older** that died, or were sent to slaughter, must have the date of death and a negative laboratory report showing the official tag numbers and accession number. A copy of approved laboratory reports shall be maintained by the owner for purposes of completion of the annual inventory examination for recertification. If there are deaths for which tissues were not submitted for laboratory diagnosis due to postmortem changes or unavailability, the department shall determine compliance. If a death is too young to test (TYTT), note date and reason for death.

Movement into a CWD Monitored Herd: (Note of Caution) If a lesser status animal is added to a CWD herd, the whole herd will be lowered to the lesser status.



Intrastate Movement Requirements: All intrastate movement of Cervidae other than to a state or federally inspected slaughtered establishment shall be accompanied by an intrastate movement certificate of veterinary inspection signed by a licensed, accredited veterinarian. Movement of CWD susceptible Cervidae, other than direct movement to slaughter, shall only be allowed from herds that have been enrolled in the Iowa CWD monitoring program and that have successfully completed at least one year in the program. “Been enrolled” means that the herd owner has received from the department written notification of the herd’s enrollment and participation in the program.

Intrastate movement certificate shall include all of the following:

1. Consignor’s name and address.
2. Consignee’s name and address.
3. Individual, official identification of each animal.
4. For CWD susceptible Cervidae, the certificate shall include the CWD herd premises number, the herd status level, the anniversary date, and the expiration date.
5. For Cervidae other than CWD susceptible Cervidae, the following statement must be on the certificate: “The animal(s) has not spent any time within the past 36 months in a zoo, animal menagerie, or like facility, or has not been on the same premise as a cervid herd which has been classified as a CWD infected herd, exposed herd or trace herd”.

Import Requirements: (Health certificate copies must be kept on file for all animals purchased.) Movement, of CWD susceptible Cervidae, other than direct movement to slaughter, shall only be allowed from herds which have satisfactorily completed at least five years in an official recognized CWD monitoring program. Cervidae entering Iowa must be accompanied by all of the following: An official Certificate of Veterinary Inspection issued by a licensed, accredited veterinarian. A permit number requested by the licensed, accredited veterinarian signing the certificate and issued by the State Veterinarian prior to movement must be recorded on the certificate.

One of the following statements must appear on the health certificate:

- 1) **For CWD susceptible Cervidae:** “All Cervidae on this certificate originate from a CWD monitored or certified herd in which these animals have been kept for at least one year or were natural additions. There has been no diagnosis, signs, or epidemiologic evidence of CWD in this herd for the past five years.”
- 2) **For Cervidae other than CWD susceptible Cervidae:** “All Cervidae on this certificate have not spent any time within the past 36 months in a zoo, animal menagerie, or like facility, and has not been on the same premises as a cervid herd which has been classified as a CWD infected herd, exposed herd or trace herd.”

The CWD herd number, anniversary date, and expiration date and herd status must be listed on the Certificate of Veterinary Inspection. Each animal must be officially identified, and all forms of identification must be listed on the certificate. Cervidae originating from an area considered to be endemic to chronic wasting disease shall not be allowed entry into Iowa. Cervidae that originate from a herd that has had animal introductions from an area endemic to chronic wasting disease during the preceding five years shall not be allowed entry into Iowa.



IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

Tuberculosis (TB) Testing of Cervidae: All cervidae 12 months of age and older must be tested negative for tuberculosis (TB) and testing must be done by a licensed, accredited veterinarian that has been certified to test cervidae. All tuberculosis (TB) testing for movement of cervidae must be completed prior to the movement of the animal. (Injection of tuberculin and reading of the injection site 72 hours later must be done prior to movement of the animal).

Brucellosis (BRT) Testing of Cervidae: All cervidae 6 months of age and older must originate from a Certified Brucellosis Free herd, or be tested negative for Brucellosis within 90 days of importation.

Interstate movement requirements: (Animals leaving Iowa) Cervidae leaving Iowa must meet the state of destination's entry requirements prior to movement.

Slaughter Inspection: Slaughter inspection services will continue to be provided at state licensed slaughter facilities. Meat that is intended for retail sale in Iowa must be slaughtered and inspected at a state or federal licensed facility. If you are slaughtering cervidae at a state licensed facility and the meat is for your own personal consumption, the carcass inspection and brain stem submission will not automatically occur. You could retrieve the head yourself from the slaughter facility and take it to your local veterinarian for brain stem and lymph node submissions. This same procedure could be utilized for home butchered animals.

If you have additional questions, contact the State District Veterinarian in your area or:

Dee Clausen

Farm Deer Program Coordinator

IDALS, Bureau of Animal Industry,

Wallace Building, 2nd Floor

Des Moines, Iowa 50319

(515) 281-8236

Revised CWD Program Standards

<https://s3.amazonaws.com/public-inspection.federalregister.gov/2018-06341.pdf>

ADT/Traceability Fact sheet for interstate transport of Cervids

https://www.aphis.usda.gov/animal_health/animal_diseases/cwd/downloads/fs_for_interstate_movement_of_cervidae_species.pdf

Regulatory Sample Collection

https://www.aphis.usda.gov/animal_health/animal_diseases/cwd/downloads/cwd_sample_collection_guidance_card.pdf

**Iowa Department of Agriculture & Land Stewardship
Intrastate Requirements**

21-66.14(163) Intrastate movement requirements.

66.14(1) All intrastate movements of Cervidae other than to a state or federally inspected slaughter establishment shall be accompanied by an intrastate movement certificate of veterinary inspection signed by a licensed, accredited veterinarian. Movement of CWD susceptible Cervidae, other than direct movement to slaughter, shall only be allowed from herds that have been enrolled in the Iowa CWD monitoring program and have successfully completed at least one year. As used in this subrule, "been enrolled" means that the herd owner has received from the department written notification of the herd's enrollment and participation in the program.



66.14(2) Such intrastate movement certificate shall include all of the following:

- a. Consignor's name and address.
- b. Consignee's name and address.
- c. Individual, official identification of each animal.
- d. For CWD susceptible Cervidae, the certificate shall include the CWD herd premises number, the herd status level, the anniversary date, and the expiration date. The following statement must be included on the certificate:
"There has been no diagnosis, sign, or epidemiological evidence of chronic wasting disease in this herd for the past year."
- e. For Cervidae other than CWD susceptible Cervidae, the following statement must be included on the certificate:
"The animal(s) has not spent any time within the past 36 months in a zoo, animal menagerie, or like facility, or has not been on the same premises as a cervid herd which has been classified as a CWD infected herd, exposed herd, or trace herd."

CANINE BRUCELLOSIS OVERVIEW

PATHOGENESIS AND TRANSMISSION

- Transmission between dogs occurs mainly at breeding time and at whelping time when the dog is under stress. The organism is shed in birthing fluids, semen, urine, saliva, milk, and any other body fluids. Pups can be infected at birth because the organism penetrates the uterus. Dogs harbor the organism in their reproductive tracts. Infection occurs when the organism penetrates the mucous membranes of the eyes, mouth, or the vagina. It enters and lives inside the neutrophils and macrophages (white corpuscles) whose purpose is to fight disease. Because they live inside these cells, antibiotics and the body's antibodies are not able to reach them and kill them. Antibiotics and antibodies may temporarily reduce the number of circulating organisms in the blood stream and consequently appear to mask or reduce symptoms. However, because the organism is intracellular, dogs will stay infected for life because the organism cannot be eliminated from the body.

SYMPTOMS

- There are usually no obvious symptoms of infection, particularly early in the course of the disease. After a period of months, there will be evidence of conception failures and infertility. There may also be abortions in the third trimester of pregnancy, with a prolonged vaginal discharge.

DIAGNOSIS

- Diagnosis is normally suspected because of clinical signs such as infertility and or abortions. Diagnosis is always confirmed by the use of laboratory tests. These tests include antibody detection tests such as the RSAT, 2ME-RSAT, TAT, 2ME-TAT, AGID II, and IFA. Another diagnostic blood test is the culture of the actual organism from the blood, simply called the blood culture test.

TESTING PROTOCOL

- Iowa uses the blood serology tests as its official testing program, and all dogs 6 months of age and older are tested. The ISU Diagnostic Lab uses the Rapid Slide Agglutination Test (RSAT) as its screening test. It is quick and relatively inexpensive. It can make early detection, as soon as two weeks following infection. A negative test is 99% accurate, but false positives occur because there may be cross reaction to other gram negative bacteria such as *Brucella ovis*, or Bordetella. The addition of 2-mercaptoethanol (2ME-RSAT) to the reagent kills many of the other rogue gram negative bacteria that cause false positives. This results in a more sensitive test and is used by ISU VDL on all positive RSAT tests. In rare cases where the RSAT is positive and the 2ME-RSAT is negative, the dog will be classified as a suspect and retested in 30 days. They seldom stay suspect, either going negative or positive.
- The Tube Agglutination Test (TAT) is another widely used test, and often used as a confirmatory test on a positive RSAT. 2-mercaptoethanol (2ME-TAT) can also be added to make this a more sensitive test. The TAT can detect antibodies after two weeks of infection. The serum may, at the discretion of the State Veterinarian be sent to Cornell University for the Agar Gel Immunodiffusion (AGID II test). This is the most accurate test, but is the most time consuming and expensive. It detects infection after 5-10 weeks post-exposure. All blood collected for these serology tests are collected in red top tubes.
- The state of Missouri uses the blood culture test as their official test. Blood is collected in a Blue top tube (buffered citrate) to prevent clotting. The blood is cultured for the actual organism.

After becoming infected, dogs have the organism circulating in their blood for at least one year. It would be possible to have a false negative, but a positive is a positive because the organism is actually there. False negatives could be eliminated by repeating the test in 30 days. Having two or more consecutive false negative tests on the same dog is highly unlikely.

- In addition to blood culture, there is another organism based test developed by Kansas State University known as the Polymerase Chain Reaction (PCR) test. It is highly specific and sensitive, so a positive is a positive. False negatives can occur if the organism is not present in the blood consistently. As with blood culture, it should be verified the dogs have not been on antibiotics which can result in false negative test results.

TREATMENT

- Because the organism lives and reproduces intracellularly there is no effective treatment. Medication is not successful and there is no vaccine available because there is no vaccine that is effective. The only remaining option is to euthanize and remove any known infected dogs. There have been exceptions made in the case of house pets where there is much emotional attachment. In certain cases, if these pets are neutered and placed on antibiotics for long periods of time, and isolated from the kennel population, they may be kept by their owners.

STATE OF IOWA QUARANTINE REMOVAL PROTOCOL

- Any kennel in Iowa containing any test positive dogs will be quarantined by the State of Iowa. To have this QRT removed the kennel must have 2 complete negative tests at least 30 days apart of all dogs that are 6 months of age and older. All known infected dogs must be removed, and euthanasia is strongly recommended. The first test cannot be conducted until 30 days after the removal of all known infected dogs.

ZOONOSIS ----- TRANSMISSION TO HUMANS

- Transmission to humans can occur, but is not common. Most infections have involved owners who have reported contact with aborting females or the placenta or its fluids. Human infection is usually mild and may include a skin rash and a fever. However, people who are young, or aged, or immunocompromised, may be at risk for the infection to be much worse. In April of 2012 a 3 year old girl was hospitalized in New York City with fever and dyspnea. She was subsequently diagnosed with *Brucella canis*, and the organism was cultured from her blood. History revealed that the family puppy, purchased three weeks prior, was also cultured and found positive for *B. canis*. The puppy was traced back to the kennel of origin in Iowa. The kennel was tested, found to be infected, and followed the protocol, and was released from QRT. This is another prime example of why the State of Iowa considers *Brucella canis* a serious disease and has a protocol to control and eliminate this disease.

PREVENTION

- The only truly reliable method of keeping Canine brucellosis out of your kennel is to isolate and test ALL incoming dogs prior to introduction into the kennel population. It is best to isolate for 30 days before testing.

Keeping Brucellosis Out of Your Dog Kennel

Establishing an Isolation and Testing Program for Newly Acquired Dogs:

- The isolation facilities must be separated from the rest of the animal holding facilities by at least 30 feet, with no possibility of exposure to urine or feces via runoff/drainage.
- Organic materials removed from the isolation facility (feces, urine, discarded feed, birth/abortion products, etc) must be disposed of in a manner that prevents contact with any other animals.
- No animals running loose outside of cages/runs/enclosures, where nose-to-nose contact could occur.
- Dogs should move through isolation and testing in batches, with no dogs leaving until all have had two negative tests, 30 days after arrival and again 30 days after the first test. (In the event that a Brucellosis test-positive animal is found, quarantine of the entire facility may be avoided if the animal has resided only in the isolation facility since arrival, and no other dogs have been removed from isolation since the arrival of the test-positive dog).
- The isolation facility should have designated boots and coveralls that are put on upon entering, and removed upon leaving the building. Alternatively, boots can be thoroughly washed and disinfected upon entering and leaving. Hands are washed upon entering and leaving. It is recommended that chores in the isolation facility be completed at the conclusion of each day.
- Equipment must not be carried back and forth between facilities. If this must occur, equipment must be adequately cleaned and disinfected.
- The isolation unit should be thoroughly cleaned daily. Upon the discovery of a Brucellosis test-positive dog, the facility, and particularly the dog's pen, should be carefully cleaned and disinfected following the euthanasia and removal of the affected dog.
- It is recommended that breeding and whelping be avoided in the isolation facility.

In the event that a dog belonging to you tests positive for canine brucellosis, an investigation will be conducted, and the entire kennel would be quarantined pending completion of the investigation.

- If it can be determined that the animal has been maintained in isolation from the rest of the facilities, and adequate biosecurity practices, as described above, were observed, then the quarantine would be limited to the isolation facility, and the rest of the business would remain unaffected.

Disinfecting for dog kennels to prevent the spread of Brucellosis

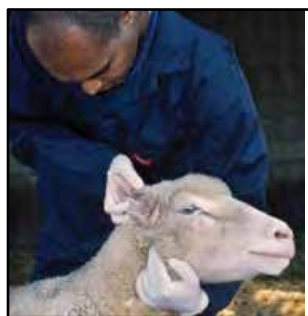
- *Brucella* is relatively hardy, but not a robust agent. It does not form spores. Most common disinfectants are effective at killing *Brucella* organisms. It can survive freezing and thawing and can survive for several weeks in milk, water, urine, or damp soil. It will die relatively quickly in dry conditions and is killed by sunlight. Contaminated objects are easily sterilized or disinfected by common methods and most disinfectants. It is essential when disinfecting to remove all organic material such as feces, feed, and bedding, and apply the disinfectant to a thoroughly cleaned surface.

NAHERC (National Animal Health Emergency Response Corps)

When an animal health emergency occurs, an immediate response is necessary to protect both animals and people. The USDA, APHIS will look to many sources to obtain veterinary personnel to help meet critical staffing needs during such an emergency.

In 2001, APHIS established the National Animal Health Emergency Response Corps (NAHERC) to respond to exotic disease outbreaks and other disasters that affect livestock, poultry, companion animals, and wildlife. More veterinarians are urgently needed to assure a decisive response to any potential animal health crises. More information is available at the NAHERC web site:

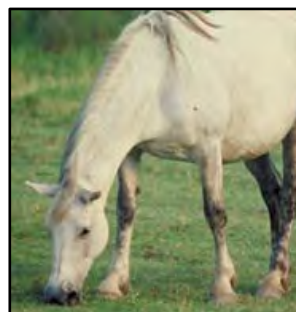
https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/emergency-management/ct_naherc



Veterinarians with a valid US veterinary from an accredited program and Animal Health Technicians (AHT's) with a diploma and/or equivalent experience are eligible to apply. Applications are available online. Go to <http://www.usajobs.gov> and, under "Search Jobs," enter the keyword "NAHERC". Select either Veterinarian or AHT job announcement. Follow instructions and enter a short resume. Fax or mail a copy of your credentials to the address provided. For more details or assistance, contact the NAHERC Coordinator at NAHERC@aphis.usda.gov or (301)734-8073.

Tours are typically 21-30 days long. During this time you will become a temporary USDA-APHIS employee. Veterinarians will have the rights and benefits of a GS11 Step 1 Federal employee. AHTs will be paid at the GS7 Step 1 level. You have the right to refuse any assignment.

More recently, training in Incident Command (ICS) and other emergency response protocols has been developed. These classes may be taken at: <http://naherc.cfsph.iastate.edu/>





Iowa's Rapid Veterinary Information Network

IRVIN

IRVIN is a burst e-mail program that exclusively targets Iowa veterinarians who are interested in receiving important animal health bulletins. The program was developed several years ago. IRVIN has been used successfully many times sending informational bulletins on West Nile surveillance, Exotic Newcastle Disease, and the diagnosis of BSE.

The goal of IRVIN is to provide accurate information targeted at veterinarians to provide them details about an outbreak, what responses are appropriate and specific actions that can be taken. The program has been very well received by Iowa veterinarians.

Iowa's Department of Agriculture has always valued the vital role that veterinarians play in protecting Iowa's animal agriculture. IRVIN has taken an incredibly fast efficient way to communicate information with the touch of a few key strokes.



IRVIN SIGN UP

Please return this card with the following information:

Veterinarian: _____

Email: _____

Address & Telephone: _____

Return to: Iowa Department of Agriculture & Land Stewardship, Bureau of Animal Industry, 502 E 9th St., Des Moines, IA 50319 or call (515) 281-6358

Helpful Links



Iowa Rabies Resource Manual

<https://idph.iowa.gov/Portals/1/Files/Rabies/Rabies%20Resource%20Manual-%20Update%20II-%207-8-10.pdf>



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