

Animal and Plant Health Inspection Service Dairy 2007 Heifer Calf Blood Collection Record



National Animal Health Monitoring System

2150 Centre Ave, Bldg B Fort Collins, CO 80526

Form Approved OMB Number 0579-0205 Approval expires: 4/30/10

Veterinary Services

Instructions:

1) Sample heifer calves which received colostrum and are between 24 and 72 hours of age.

2) Sample a maximum of 10 eligible calves available today or at a later visit.

3) Aseptically collect approximately 8 ml sera in the tubes provided.

4) Write the State, Operation, and Animal IDs on the tube label. Record the tube number from the label to this form and complete the information for each sample. Ship on ice to NVSL within 24 hours with yellow copy of this form. Send the original to your Coordinator.

State FIPS:	Operation #:	Collector:	Date:	Kit #:	Time to collect samples:
2 digits	4 digits	Initials	mm/dd/yy	Printed on labels	in minutes

Tube # from label	Calf ID	Age in hours (include quarter hour)	Was this calf allowed to nurse its mother?	How was the first feeding of colostrum provided?	How many quarts of colostrum were administered at first feeding?	How many hours has it been since this calf received its first colostrum feeding? (include quarter hour)
			\square_1 Yes \square_3 No	$\begin{array}{c} \square_1 & \text{By Bottle} \\ \square_2 & \text{By Tube} \\ \square_3 & \text{Nursed dam} \end{array}$		
			□ ₁ Yes □ ₃ No	□ ₁ By Bottle □ ₂ By Tube □ ₃ Nursed dam		
			\square_1 Yes \square_3 No	$\begin{array}{c} \square_1 & \text{By Bottle} \\ \square_2 & \text{By Tube} \\ \square_3 & \text{Nursed dam} \end{array}$		
			□ ₁ Yes □ ₃ No	□ ₁ By Bottle □ ₂ By Tube □ ₃ Nursed dam		
			\square_1 Yes \square_3 No	$\begin{array}{c} \square_1 & \text{By Bottle} \\ \square_2 & \text{By Tube} \\ \square_3 & \text{Nursed dam} \end{array}$		
			□ ₁ Yes □ ₃ No	□ ₁ By Bottle □ ₂ By Tube □ ₃ Nursed dam		
			\square_1 Yes \square_3 No	□ ₁ By Bottle □ ₂ By Tube □ ₃ Nursed dam		
			□ ₁ Yes □ ₃ No	$\Box_1 \text{ By Bottle} \\ \Box_2 \text{ By Tube} \\ \Box_3 \text{ Nursed dam}$		
			\square_1 Yes \square_3 No	$\Box_1 \text{ By Bottle} \\ \Box_2 \text{ By Tube} \\ \Box_3 \text{ Nursed dam}$		
			□ ₁ Yes □ ₃ No	$ \Box_1 By Bottle \Box_2 By Tube \Box_3 Nursed dam $		

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 0579-0205. The time required to complete this information collection is estimated to average 1 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected.

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