



Animal and
Plant Health
Inspection
Service

Veterinary
Services

Beef 2007-08 VS Initial Visit

(January 14 – March 31, 2008)



National Animal Health
Monitoring System

2150 Centre Ave Bldg B
Fort Collins, CO 80526

Form Approved
OMB Number 0579-NEW

State FIPS:	Operation #:	Interviewer:	Date:
2 digits	4 digits	Initials	(mm/dd/yy)

Arrival time at operation: _____

Be sure the Producer understands that in this questionnaire, the term “you” refers to how “this operation” conducts the management practices of the beef operation.

Indicate to the Producer that these questions (except where noted) refer to the cow-calf operation and do not include any dairy, stocker, or feedlot enterprise that is part of this operation.

From the General Beef Management Report, enter the response to the following questions:

- | | |
|--|-------|
| Page 2, Item 1a, total number of beef cows on hand as of October 1, 2007..... | _____ |
| Page 2, Item 8, beef calves born alive or expected to be born alive in 2007 | _____ |
| Page 4, Item 21d, total number of calves weaned or expected to be weaned in 2007 | _____ |

Section A—General Management

1. How many beef cows, including heifers that have calved, were on hand on January 1, 2008? _____ head
2. During 2007, how many beef calves were born:
 - a. Alive?..... _____ head
 - b. Dead?..... _____ head

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-NEW. The time required to complete this information collection is estimated to average 1.25 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected.

**NAHMS-203
JAN 2008**

Section B—Herd Management and Sales Practices

1. What is the average weight of **mature beef cows** at the time calves are weaned? _____ lb
2. During 2007, did this operation **sell** any beef cattle or weaned calves?..... ₁ Yes ₃ No

If Item 2 = NO, SKIP to Section C.

List B1—Method-of-Sale Code, Item 3		
1 – Auction	4 – Consignment	7 – Other (specify: _____)
2 – Direct – video/Internet auction	5 – Forward contract	
3 – Direct – private treaty	6 – Carcass basis	

3. Now I'd like to ask about beef cattle and weaned calves **sold** during 2007. I'll need the number of head sold and the **primary** method of sale. *[Use code from List B1, above.]*

During 2007, how many:

	No. Head	Sale Code
a. Steers, weaned or older, were sold?		
b. Heifers, weaned or older, were sold for breeding stock?		
c. Other heifers, weaned or older, were sold for purposes other than breeding (culls, whether for feeding or slaughter)?		
d. Cows were sold for breeding stock?		
e. Other cows were sold for purposes other than breeding (culls, whether for feeding or slaughter)?		
f. Bulls, weaned or older, were sold for breeding stock?		
g. Other bulls, weaned or older, were sold for purposes other than breeding (including feeding or slaughter)?		

4. *[Refer to Items 3a, 3c, and 3g above, weaned calves sold for purposes other than breeding. If 3a, 3c, and 3g all = ZERO, skip to Item 5.]*
 For weaned calves sold for purposes other than breeding, how many days after weaning, on average, are the calves held before they leave the operation? _____ days
5. *[Refer to Item 3e above, cows sold for purposes other than breeding (culls). If ZERO, skip to Section C.]*
 What was the average weight of cows sold for purposes other than breeding (culls) during 2007? _____ lb

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6. Of the (Item 3e) cows sold for purposes other than breeding (culls), how many were sold primarily because of:

- a. Pregnancy status (open or aborted)? _____ head
- b. Other reproductive problems (other than open or aborted)? _____ head
- c. Producing poor calves?..... _____ head
- d. Age or bad teeth?..... _____ head
- e. Physical unsoundness, e.g., injury or lameness? _____ head
- f. Bad eyes? _____ head
- g. Digestive problem? _____ head
- h. Respiratory problem?..... _____ head
- i. Udder problem? _____ head
- j. Temperament? _____ head
- k. Economics, such as drought, herd reduction, or market conditions? _____ head
- l. Some other factor? (specify: _____)..... _____ head
- m. *[Add numbers by cause. **TOTAL** should equal number of head in Item 3e.]* = _____ **HEAD**

7. How many of the (Item 3e) cows sold for purposes other than breeding (culls) were:

- a. Less than 5 years old? _____ head
- b. 5 to 9 years old? _____ head
- c. More than 9 years old? _____ head
- d. *[Add numbers by age. **TOTAL** should equal number of head in Item 3e.]*..... = _____ **HEAD**

Section C—Vaccination and Testing Practices

Vaccination Practices

1. Which of the following vaccines were used in 2007 for:
 [Enter "X" in appropriate columns for each vaccine used; leave all others blank.]

	Calves 1 to 21 days	Calves 22 days <u>through</u> weaning	Weaned replacement heifers <u>through</u> breeding	Bred replacement heifers <u>through</u> calving	Cows	Bulls
GENERAL (resp and/or repro)						
a. IBR (Rednose, infectious bovine rhinotracheitis)						
b. BVD (Bovine viral diarrhea)						
c. <i>Histophilus somni</i> (formerly <i>Haemophilus somnus</i>)						
RESPIRATORY						
d. PI3 (parainfluenza virus)						
e. BRSV (bovine respiratory syncytial virus)						
f. <i>Pasteurella/Mannheimia</i>						
REPRODUCTIVE						
g. <i>Brucella abortus</i>						
h. <i>Leptospira</i>						
i. <i>Campylobacter (vibrio)</i>						
j. <i>Tritrichomonas</i>						
k. <i>Neospora</i>						
CLOSTRIDIAL						
l. <i>C. chauvoei</i> (blackleg) and/or <i>C. septicum</i> (malignant edema)						
m. <i>C. perfringens</i> C and D (enterotoxemia, overeating)						
n. Other clostridial vaccinations						
DIGESTIVE						
o. Rota/Corona						
p. <i>E. coli</i>						
q. <i>Salmonella</i>						
OTHER						
r. <i>Anaplasma</i>						
s. Johne's						
t. <i>Moraxella bovis</i> (pink eye)						
u. Wart virus						

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2. How many times is a calf vaccinated for respiratory disease before sale? #
 [Count each injection for respiratory disease(s) as one vaccination.]

If Item 2 = 0, SKIP to Item 4.

3. When vaccinating calves for respiratory disease before sale, do you vaccinate them:
- a. After weaning but before sale? ₁ Yes ₃ No
 - b. At weaning? ₁ Yes ₃ No
 - c. Less than 14 days prior to weaning? ₁ Yes ₃ No
 - d. 30 to 14 days prior to weaning? ₁ Yes ₃ No
 - e. From birth through 31 days prior to weaning? ₁ Yes ₃ No
4. On average, how many **cows** are vaccinated with the same needle before the needle is changed? #

If Item 4 = 1, SKIP to Item 5.

- a. Is the needle cleaned between animals? ₁ Yes ₃ No
- b. Is the needle disinfected between animals? ₁ Yes ₃ No

Clostridial Vaccination Practices

5. [Note to Data Collector: Look at Items 1l, 1m, and 1n on previous page to answer this question.]
 During 2007, did you give any clostridial vaccines (such as for blackleg) to any beef cows or beef calves on this operation? ₁ Yes ₃ No

If Item 5 = NO, SKIP to Item 6.

- a. What injection route and location do you typically use for administering clostridial vaccines to cows and calves?
 [Enter the code for the injection route (List C1) and location (List C2) used most often for cows and for calves on this operation.]

List C1—Injection-Route Codes for Clostridial Vaccines		
1 – In the muscle (IM)	2 – Under the skin (SQ)	3 – Other (specify in margin)

List C2—Location Codes for Clostridial Vaccines		
1 – Neck	3 – Side or rib	5 – Lower rear leg
2 – Shoulder	4 – Upper rear leg/hip	

Clostridial Vaccines		
	Injection Route (from List C1)	Location (from List C2)
Cows		
Calves		

BVD Vaccination Practices

6. [Note to Data Collector: Look at Item 1b on page 4 to answer this question.]

During 2007, did you vaccinate any cattle against BVD? ₁ Yes ₃ No

If Item 6 = NO, SKIP to Item 9.

7. Were the following age groups vaccinated against BVD during 2007?
[If YES, enter vaccine code from BVD Vaccine Reference Card for the product used most commonly for that age group.]

- | | | <u>Vaccine Code</u> |
|--|--|---------------------|
| a. Calves 1 to 21 days..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| b. Calves 22 days through weaning..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| If Item 5b = YES, number of times vaccinated | | _____ times |
| c. Weaned replacement heifers before breeding..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| d. Bred replacement heifers before calving | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| e. Cows prebreeding | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| f. Cows precalving (e.g., at pregnancy check)..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |
| g. Bulls..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ |

8. Are the following cattle classes given annual **BVD booster injections**?
[If YES, enter vaccine code from BVD Vaccine Reference Card for the product used most commonly.]

- | | | <u>Vaccine Code</u> |
|---------------|--|---------------------|
| a. Cows | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ code |
| b. Bulls..... | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | _____ code |

Testing Practices

BVD Testing Practices

9. Do you believe that removing calves that have tested positive for BVD virus affects the **value** of the remaining calves in the group? ₁ Yes ₂ D/K ₃ No

If Item 9 = NO or DON'T KNOW, SKIP to Item 10.

- | | <u>Increased value</u> | <u>Decreased value</u> |
|---|------------------------|------------------------|
| a. How much does the value of a BVD-negative calf increase or decrease after its group is tested for BVD persistent infection (PI) and all positive animals are removed?..... | + _____ \$/hd | OR - _____ \$/hd |

10. Do you believe that removing calves that have tested positive for persistent infection (PI) with BVD virus affects the **health** of the remaining cattle in the group? ₁ Yes ₂ D/K ₃ No

If Item 10 = NO or DON'T KNOW, SKIP to Item 12.

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11. Which of the following health effects would you expect to see from removing positive calves?

- a. Improved reproductive efficiency (fewer abortions, stillbirths) ₁ Yes ₃ No
- b. Reduced sickness and/or treatment costs ₁ Yes ₃ No
- c. Reduced death loss ₁ Yes ₃ No
- d. Other (specify: _____) ₁ Yes ₃ No

12. In the past 3 years, have you tested any **beef calves** for persistent infection (PI) with BVD?.....

- ₁ Yes ₃ No

If Item 12 = NO, SKIP to Item 16.

13. During 2007, did you test:

- a. All calves born to heifers/cows bred on the operation? ₁ Yes ₂ N/A ₃ No
- b. All calves born to heifers/cows purchased when pregnant?..... ₁ Yes ₂ N/A ₃ No
- c. All calves acquired as part of a cow-calf pair?..... ₁ Yes ₂ N/A ₃ No
- d. Clinical suspects? ₁ Yes ₂ N/A ₃ No
- e. Other (specify: _____) ₁ Yes ₂ N/A ₃ No

14. What samples were collected?

- a. Ear notches ₁ Yes ₃ No
- b. Serum samples ₁ Yes ₃ No

15. How were the samples tested at the laboratory?

- a. Pools followed by individual testing if a positive was identified ₁ Yes ₂ D/K ₃ No
- b. Individual sample testing only ₁ Yes ₂ D/K ₃ No

Other Testing Practices

16. In the last 3 years, have you done any fecal testing to evaluate parasite burdens?

- ₁ Yes ₃ No

Section D—Disease Control, Illness, and Deaths

1. Do you use antibiotics in feed to prevent disease and/or promote growth? ₁ Yes ₃ No

If Item 1 = NO, SKIP to Item 3.

List D1—Column A, Item 2	
1 – Trade journals	5 – Supplier of antibiotics other than veterinarian (e.g., feedstore, direct marketer, internet company)
2 – Other producers	6 – Other (specify: _____)
3 – Local veterinary practitioner	7 – No other sources
4 – Consulting or second-opinion veterinarian	8 – Do not use antibiotics for this purpose

2. For the three animal classes listed in the table below and for the primary purposes indicated:
- a. Other than your knowledge or experience, who or what has the primary influence on decisions regarding which antibiotics to use in feed? *[Enter a code from List D1 (above) in Column A.]*
 - b. For those primary purposes for which antibiotics are used in feed:
 - i. What is the primary antibiotic used? *[Consult the attached Antibiotic Reference Card, and enter the appropriate code for the primary antibiotic used in Column B.]*
 - ii. On average, how many days was the antibiotic fed to an animal in that age group? *[In Column C, enter the average number of days the antibiotic was fed to an animal in that age group.]*

		Column A	Column B	Column C
Animal Class	Primary Purpose	Primary Influence	Primary Antibiotic	Average Number of Days Fed
Unweaned calves	Prevent respiratory disease			
	Other (specify: _____)			
Replacement heifers weaned but not yet calved	Prevent respiratory disease			
	Promote growth			
	Other (specify: _____)			
Other calves weaned but not yet shipped for feeding or sold as breeding stock (If none, enter "N/A.")	Prevent respiratory disease			
	Promote growth			
	Other (specify: _____)			

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3. Do you use either oral or injectable antibiotics to **treat** disease? ₁ Yes ₃ No

If Item 3 = NO, SKIP to Item 7.

List D2—Primary Influence on Decisions, Item 4	
1 – Trade journals	5 – Supplier of antibiotics other than veterinarian (e.g., feed store, direct marketer, internet company)
2 – Other producers	6 – Other (specify: _____)
3 – Local veterinary practitioner	7 – No other sources
4 – Consulting or second-opinion veterinarian	8 – Do not use antibiotics to treat this disease

4. For the two animal classes listed in the table below and for the primary purposes indicated, aside from you, who or what has the primary influence on decisions regarding which **oral** or **injectable** antibiotics to use? [Enter a code from List D2 (above).]

Animal Class	Primary Purpose	Primary Influence on Decisions
Unweaned calves	Treat pinkeye	
	Treat respiratory disease	
	Treat digestive disease	
	Other (specify: _____)	
Heifers weaned but not yet calved	Treat pinkeye	
	Treat respiratory disease	
	Other (specify: _____)	

5. How many **affected/sick** animals in each of the following categories were **treated** at least once with either oral or injectable antibiotics for any **diseases** or **disorders** during 2007? This does NOT apply to preventive treatments.

[Write in N/A if category not on operation.]

- a. Unweaned calves _____ head
- b. Heifers weaned but not yet calved _____ head
- c. Cows _____ head

If Items 5a, 5b, and 5c all = ZERO, SKIP to Item 6a.

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6. Complete the table below on oral and injectable antibiotics used during 2007 for **DISEASES** or **DISORDERS** in unweaned calves, heifers weaned but not yet calved, and cows. **This does NOT include preventive treatments.**
[Codes for this table are in the Antibiotic Reference Card.]

Animal Class	Disease or Disorder	Number Affected during 2007	Number of Affected Animals Treated with ORAL Antibiotics	Primary ORAL Antibiotic Used (Code)	Number of Affected Animals Treated with INJECTABLE Antibiotics	Primary INJECTABLE Antibiotic Used (Code)
Unweaned calves	Respiratory					
	Diarrhea/scours or other digestive					
	Pinkeye					
	Navel infection					
	Other (specify)					
Replacement heifers weaned but not yet calved	Respiratory					
	Pinkeye					
	Lameness/footrot					
	Other (specify)					
Cows	Respiratory					
	Diarrhea or other digestive					
	Pinkeye					
	Reproductive (retained placenta/ uterine infection)					
	Abortion					
	Lameness/footrot					
	Other (specify)					

- a. In general, do you treat calves 7 days and older with antibiotics for diarrhea (scours)? ₁ Yes ₃ No

7. How often do you usually deworm unweaned calves, replacement heifers weaned but not yet calved, weaned stocker calves, and cows?

	Never	Occasionally (Less than Once a Year)	Once a Year	More than Once a Year
Unweaned calves				
Replacement heifers weaned but not yet calved				
Stocker calves—weaned				
Cows				

If ALL categories = NEVER, SKIP to Item 10.

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8. Which of the following do you use **primarily** to decide when to treat your cattle for internal parasites (worms)? *[Select one only.]*

- ₁ When the cattle look rough
- ₂ On a regular schedule
- ₃ Based on fecal tests
- ₄ Other (specify: _____)

9. Have you used the following products to treat cattle for internal parasites in the last 3 years? *[For dewormer categories, see Dewormer Reference Card.]*

- a. Avermectins (Ivomec®--ivermectin, Cydectin®--moxidectin)? ₁ Yes ₃ No
- b. Benzimidazoles (Valbazen®--albendazole, Panacur®--fenbendazole)? ₁ Yes ₃ No
- c. Imidazothiazoles (Levasole®--levamisole)? ₁ Yes ₃ No
- d. Salicyclanilides (Flukiver®--closantel, radoxanide)? ₁ Yes ₃ No
- e. Tetrahydropyrimidines (Banminth®--pyrantel, febantel)? ₁ Yes ₃ No

10. My next questions are about cattle and calves that died or were lost. During 2007, of the (Section A, Item 2a) **beef calves born alive**, how many died or were lost prior to weaning from all causes? *[Exclude calves born dead (Section A, Item 2b).]*..... _____ #

If Item 10 = ZERO, SKIP to Item 11.

- a. How many of these (Item 10) **unweaned calves** died or were lost:
 - (1) 24 hours or less after birth? _____ head
 - (2) More than 24 hours but less than 3 weeks after birth? _____ head
 - (3) 3 weeks or more after birth, but before weaning? _____ head
 - (4) *[Add Items 10a(1), 10a(2), and 10a(3). Total should equal Item 10.]* _____ head

11. During 2007, how many **beef breeding cattle** (replacement heifers, cows, and bulls) died or were lost from all causes? _____ head

If both Items 10 AND 11 = ZERO, SKIP to Item 14.

12. How many of the deaths or losses of (Item 10) unweaned calves and/or (Item 11) beef breeding cattle in 2007 resulted primarily from the following causes?

Cause	Unweaned Beef Calves		Beef Breeding Cattle
	Less than 3 Weeks Old	3 Weeks and Older	
Digestive problems (bloat, scours, parasites, enterotoxemia, acidosis, etc.)			
Respiratory problems (pneumonia, shipping fever, etc.)			
Metabolic problems (milk fever, grass tetany, etc.)			
Mastitis (cows only)			
Lameness or injury			
Calving-related/birth-related problems			
Other known diseases (specify: _____)			
Weather-related causes (lightning, drowning, chilling, etc.)			
Poisoning (nitrates, noxious feeds, noxious weeds, etc.)			
Predators (known or unknown)			
Theft (stolen)			
Other known causes (old age, etc.) (specify: _____)			
Unknown causes			
<i>[Add number by cause. Total should equal Item 10 or 11.]</i>	<i>Add both columns to get total for unweaned calves.</i>		

13. What percentage of the unweaned calves and breeding cattle that died in 2007 were disposed of by the following methods?

	<u>Unweaned Calves</u>	<u>Breeding Cattle</u>
a. Buried on this operation.....	_____ %	_____ %
b. Burned on this operation.....	_____ %	_____ %
c. Landfill.....	_____ %	_____ %
d. Renderer	_____ %	_____ %
e. No disposal method (e.g., left to nature/scavengers)	_____ %	_____ %
f. Other (specify: _____)	_____ %	_____ %
<i>[Total should equal 100%.]</i>	100%	100%

14. Did you bring any new cattle onto this operation in the last 3 years? ₁ Yes ₃ No

If Item 14 = NO, SKIP to Item 17.

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15. Before bringing cattle onto this operation in the last 3 years, did you normally require **vaccination** of the animals for:

- a. Brucellosis? *[If only bulls brought on, check N/A.]*..... ₁ Yes ₂ N/A ₃ No
- b. Bovine viral diarrhea (BVD)? ₁ Yes ₃ No
- c. Infectious bovine rhinotracheitis (IBR)? ₁ Yes ₃ No
- d. *Leptospirosis*? ₁ Yes ₃ No
- e. Anything else? (specify: _____) ₁ Yes ₃ No

16. Before bringing cattle onto the operation in the last 3 years, did you normally require **tests** for:

- a. Brucellosis for animals 2 years of age or older?
[If only cattle less than 2 years brought on, check N/A.]..... ₁ Yes ₂ N/A ₃ No
- b. Johne's disease (*M. paratuberculosis*)? ₁ Yes ₃ No
- c. Bovine viral diarrhea (BVD) (persistently infected)? ₁ Yes ₃ No
- d. Bovine tuberculosis (TB)? ₁ Yes ₃ No
- e. Anything else? (specify: _____)..... ₁ Yes ₃ No

17. Are any of the cattle on this operation used for rodeo events (e.g., team roping):

- a. On the premises? ₁ Yes ₃ No
- b. Off the premises? ₁ Yes ₃ No

If Item 17 = YES for **either** 17a or 17b, how many of your cattle are used for rodeo events?..... _____ #

Section E—Opinions on Significance of Health Problems

1. Indicate whether you strongly agree, agree, disagree, or strongly disagree with each of the following statements about specific health problems and their **economic impact** on your operation during 2007. **Include** the cost of prevention, cost of treatment, and lost production in the economic impact.

[Data Collector: To begin, say, "Internal parasites had a significant economic impact on this cow/calf operation during 2007."]

	Strongly Agree	Agree	Disagree	Strongly Disagree	No Opinion
PARASITES					
a. Internal parasites					
b. External parasites (flies, lice, ticks, grubs)					
DIGESTIVE					
c. Calf scours					
d. Bloat/colic/ulcers (abomasal/stomach)					
e. Coccidiosis					
REPRODUCTIVE					
f. Open/late calvers					
g. Abortion					
h. Weak calves					
RESPIRATORY					
i. Calf pneumonia/shipping fever					
j. Cow asthma					
PLANT-RELATED					
k. Any plant-related toxicities					
OTHER					
l. Pinkeye					
m. Footrot					
n. White muscle disease (selenium/vitamin E deficiency)					
o. Copper deficiency					
p. <i>Anaplasma</i>					
q. Grass tetany					

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2. Indicate whether you strongly agree, agree, disagree, or strongly disagree with each of the following statements about specific health problems and their importance to the beef industry.

[Data Collector: To begin, say, "Tuberculosis is a significant problem for the U.S. beef cattle industry."]

	Strongly Agree	Agree	Disagree	Strongly Disagree	No Opinion
a. Tuberculosis					
b. Brucellosis					
c. <i>Tritrichomonas</i> infection					
d. Johne's disease (paratuberculosis)					
e. Bovine leukosis virus (BLV) infection					
f. BVD					
g. <i>Anaplasma</i> infection					
h. <i>Neospora</i> infection					
i. Internal parasites (worms)					
i.1. Resistance to anthelmintics (dewormers)					

3. Do you strongly agree, agree, disagree, or strongly disagree with the following statement:

"The United States is well prepared to handle outbreaks of livestock disease currently not found in this country, such as foot-and-mouth disease and rinderpest."

	Strongly Agree	Agree	Disagree	Strongly Disagree	No Opinion

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State FIPS: _____ 2-digits	Operation #: _____ 4-digits	Interviewer: _____ Initials	Date: _____ (mm/dd/yy)
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1. Total time for interview (include time to discuss the program and complete the questionnaire). If more than one data collector present, enter the combined time..... _____ min VITIME

2. Total travel time (round trip). If more than one data collector present, enter the combined time..... _____ min VTTIME

3. Data collector(s): *[Enter the number for each category.]*
 _____ Federal VMO _____ Federal AHT _____ State personnel _____ Other (specify) VVMO/VAHT/VST/VOTH

4. Enter response code 99 if questionnaire is completed or enter one code of 0-7 that best describes the reason why the owner is not participating..... _____ code VRCO

 99 = Survey completed
 00 = Producer not contacted by VMO
 01 = Poor time of year or no time
 02 = Does not want anyone on operation
 03 = Bad experience with government veterinarians
 04 = Does not want to do another survey or divulge information
 05 = Told NASS they did not want to be contacted
 06 = Ineligible (no beef cows)
 07 = Other reason (explain below)

5. Producer data quality..... ₁ Good to Excellent ₂ OK ₃ Poor VPDQ

6. Check the appropriate response for each type of biological sampling the Producer agreed to:
₁ Ear notches (BVD)
₂ Fecal (pathogens)
₃ Fecal (parasites)

7. Which of the following best describes the respondent's position with this operation? _____ code VPOS
 1 = Owner
 2 = Manager
 3 = Family member (other than owner or manager)
 4 = Other hired employee
 5 = Other (specify: _____) VPOSOTH

8. How often did the producer consult written (e.g., ledger, pocket diary, calendar) or computerized records to answer questions for which records might have been helpful in giving accurate and complete information?
₁ Never
₂ Occasionally (one to three times)
₃ Frequently (four or more times) _____ code VPOS

Comments regarding this questionnaire or operation:

VMO or AHT Signature: _____

State/Operation #: _____

TO BE COMPLETED BY THE COORDINATOR:

Field data quality ₁ Good to Excellent ₂ OK ₃ Poor VFDQ