



## INSTRUCTIONS FOR THE JOHNE'S PROGRAM TEST RECORD (VS Form 4-30A)

The purpose is to outline the Voluntary Bovine Johne's Disease Control Program test record form. The major objective of the test record are to provide uniformity in recording and reporting tests for Johne's disease. To show specific information relative to each test in a herd and to include all pertinent information concerning the results. In addition, to facilitate the recording of uniform statistics information so that it will be readily available for special herd studies and program evaluation.

The instructions for the Johne's Test Record, below are listed by number within the record.

1. Enter the State postal code.
2. Enter the County's name.
3. Premise ID number, owner number and the kind of herds: Premise ID number is the code number for the herd, farm, ranch, dairy, or premises ID is to be recorded in this block by the states that are maintaining a master identification file.
4. Owner's Name and Address: Owner's Name and Address: In the top center portion of the form the herd owner's last name, first name, and middle initial, and complete mailing address should be printed or legibly written.
5. Reason for Test: Initial or a Retest. Check one or more boxes for the reason for the test as Slaughter, Herd Certificate, Livestock Market reason, Ring, Area Test, Diagnostic, Epidemiology, Private Sale, or Other (specify in remarks.)
6. Range (RGE), Township (TWP), Section (SEC), and Global Position System (GPS).GPS coordinates: Spaces are provided in the upper left hand section of the form underneath the Name and address of the premises. A GPS coordinates helps to determine the latitude and longitude of the location.
7. Completed Herd Test of All Eligible Animals- The testing veterinarian should check the applicable block. When the "No" block is checked, the total number of eligible animals in the herd should be recorded.
8. Kind of Herd: This space is provided to show on the chart whether the purpose of the herd is dairy, beef, or mixed breeds.
9. Species: Cattle, Sheep, Goats, etc.
10. Enter the name of the laboratory and the date the sample was sent.
11. Certification for Payment: The appropriate block should be checked by the testing veterinarian. All private tests (at owner's expense) should be checked in the private block. The appropriate block should be checked by the testing veterinarian. The complete mailing address of the veterinarian completing the work should be printed or legibly written.

Remarks: This section is located in the middle of the right hand side of the form. It is available space for additional comments and if you have additional test to run.

12. Test to Run: Identify the test type to be run (Elisa, fecal culture, PCR, etc)

### 13. Sample Collection:

- Samples No: Identifies the sample with animal identification.
- Record all identification number(s):Record all Eartags(s) and Tattoo(s).
- Vacc Tattoo: If vaccinated, the vaccination tattoo should be recorded in this space.
- Age(DOB (mm/yy): The month and year the animal was born.
- Breed: Breed of Animal.
- Sex: M for Male or F for Female.

### 14. Test Results:

- Elisa: Enzyme-linked immunosobenant assay. Record result (S/P or OD valves) in the first column and the interpretation in the second column.
- Culture: Record colony counts or time to positive in the first column and the interpretation in the second column
- PCR: Polymerase chair reaction record quantitative results in the first column and the interpretation in the second column.· Blank spaces: are for addition test that are requested.

**The Veterinarian should transmit all records to the central office as soon as possible.**