



Animal and Plant Health Inspection Service

Veterinary Services

Goat 2009 General Producer Agreement

National Animal Health Monitoring System

2150 Centre Ave, Bldg B Fort Collins, CO 80526

Form Approved OMB Number 0579-xxxx Expires: xxxx

The U.S. Department of Agriculture's Animal and Plant Health Inspection Service (APHIS), the State of _____, and the Producer hereby enter into this National Animal Health Monitoring System (NAHMS) Goat 2009 Study PRODUCER AGREEMENT, the terms of which are set forth below.

- 1. APHIS and/or the State of _____ will provide personnel who will be referred to as the Data Collector. The Data Collector and the Producer will participate together in implementing a statistically valid NAHMS study for determining national estimates of goat-health practices and for compiling health information to enhance goat production. The Data Collector and the Producer will complete one personal interview.
2. The Producer will assist APHIS by providing accurate information regarding goat-health and management practices related to the study objectives. The Producer retains the right to refuse any questions deemed inappropriate.
3. The Data Collector will keep the origin of the data confidential by recording the data with the Producer's unique code number only. The Data Collector will not keep any key to the code after the completion of the study. The Data Collector and all other project personnel acknowledge that the Producer is providing information and samples that he/she does not customarily share and is providing it with the expectation that it will not be made public. The one exception to data confidentiality is the suspicion or diagnosis of a dangerously contagious, infectious, or exotic disease foreign to the U.S. on the Producer's premises (e.g., foot-and-mouth disease), in which case further investigation and possible action may occur.
4. Data collected by the Data Collector will not be used for regulatory purposes. However, information on a Producer's animals revealed from sources unrelated to the Goat 2009 study, such as testing and inspection for movement or sale of animals or tracebacks on testing done at slaughter, may cause regulatory action to be initiated by the State or APHIS.
5. APHIS may publish, or authorize others to publish, the aggregate (summary) findings acquired from NAHMS for the benefit of the goat industry, allied private industry, and other interested groups, but will ensure that the identity of the Producer is withheld. APHIS may not publish, or authorize others to publish, individual responses. APHIS may perform additional testing, or authorize others to perform additional testing of samples collected through the study, for the benefit of the goat industry, but will ensure that the identity of the Producer is withheld.
6. After completion of data reporting by the Producer, APHIS will provide the Producer with several reports containing summary results from all participating Producers. The Producer can obtain any further information available from this study by accessing the NAHMS Web site or subscribing to the NAHMS goat mailing list.
7. The Producer will complete a brief evaluation of the Goat 2009 study, the results of which will be used to assist APHIS in the design and implementation of future NAHMS surveys.
8. Any changes to or waivers of the terms of this PRODUCER AGREEMENT shall be binding on APHIS and the STATE of _____ and the Producer only if they are put in writing by each party.
9. The effective data collection period of this PRODUCER AGREEMENT shall begin with today's date of ___/___/___ and end no later than December 15, 2009.

Continued on next page with biological testing.

_____/date VS Employee, U.S. Department of Agriculture, APHIS OR _____ Department of Agriculture

_____/date Producer or authorized representative

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 number for this information collection is 0579-xxx. The time required to complete this information collection is estimated to average 0.5 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. NAHMS-218 NOV 2008

10.	Biologic Sampling by Data Collector –	I AGREE to participate if selected	I DO NOT want to be considered
a.	Blood		
	<p>About 10 ml of blood collected from no more than 51 goats will be tested for <i>Mycobacterium paratuberculosis</i> (Johne's) and caprine arthritis encephalitis (CAE). These results will be returned to the Producer.</p> <p>Sera will be banked for possible future testing. See Item 5 on previous page.</p> <p style="text-align: right;">(Producer to initial appropriate column.)</p>	_____	_____
b.	Environmental Samples		
	<p>Six samples of pooled manure will be collected from various locations on the goat operation. The samples will be tested for Johne's and results will be returned to the Producer.</p> <p style="text-align: right;">(Producer to initial appropriate column.)</p>	_____	_____

➔ **Item 11 may need to be completed after the Data Collector and Producer review the Info Sheets and special Agreements.**

11.	Biologic Sampling by Producer –	Yes, and I signed the supplemental agreement	I'm interested, but want more time to consider	No, I do not want to participate
a.	Fecal			
	<p>One pooled sample of fresh fecal materials will be collected from up to 20 goats. Samples will be tested for specific food-safety pathogens. A subset of the samples will be tested for anthelmintic reaction.</p> <p>Producer will need to sign the Supplemental Producer Agreement to participate.</p> <p style="text-align: right;">(Producer to initial appropriate column.)</p>	_____	_____	_____

b.	Scabs	Yes, and I signed the supplemental agreement	I'm interested, but want more time to consider	No, I do not want to participate
	<p>Scabs from up to 10 goats suspected of having soremouth will be collected. Samples will be tested for soremouth, and the Producer will receive the result.</p> <p>Producer will need to sign the Supplemental Producer Agreement to participate.</p> <p style="text-align: right;">(Producer to initial appropriate column.)</p>	_____	_____	_____

c.	Bulk Milk	Yes, and I signed the supplemental agreement	I'm interested, but want more time to consider	No, I do not want to participate
	<p>One bulk milk sample will be collected from dairy operations. The sample will be tested for various pathogens and bacteria such as <i>E. coli</i>, Staph, Strep, and <i>Salmonella</i>. Producer will receive the results.</p> <p>Producer will need to sign the Supplemental Producer Agreement to participate.</p> <p style="text-align: right;">(Producer to initial appropriate column.)</p>	_____	_____	_____



Animal and Plant Health Inspection Service

Veterinary Services

Goat 2009 Supplemental Producer Agreement

National Animal Health Monitoring System

2150 Centre Ave, Bldg B #2E7
Fort Collins, CO 80526

Contact: Judy Rodriguez
970 494 7255
judith.m.rodriguez@aphis.usda.gov

The U.S. Department of Agriculture's Animal and Plant Health Inspection Service (APHIS), the State of _____, and the Producer hereby enter into this National Animal Health Monitoring System (NAHMS) Goat 2009 Supplement Producer Agreement, the terms of which are set forth below.

1. The Producer must perform the following:
 - a. Collect, store, and ship the biologic samples as instructed.
 - b. Complete the appropriate submission forms, mail a copy to the NAHMS staff, and send a copy with the samples to the appropriate laboratory.
 - c. Use Federal Express to ship samples to the laboratory.
2. NAHMS will provide the Producer all of the appropriate collection materials needed to complete the sampling including preaddressed/prepaid FedEx airbills, business-reply envelopes, ice packs, sample bags, boxes, and instructions.
3. The Producer allows his/her name, shipping address (and mailing if different), and phone number to be given to Judy Rodriguez on the NAHMS staff for the purpose of sending/expediting the collection materials (kit) and testing results directly to the Producer and to contact the Producer if a problem arises. Judy will maintain this information in a confidential manner, use only for the purposes described, and purge the information after results are returned to the Producer.

Operation Number: _____ (VS Data Collector – please enter the 4-digit farm ID)

Producer name: _____ Best contact (e-mail or phone #): _____

Shipping address: _____ Postal/mailling address: _____

(not PO Box) _____ City, State, Zip Code: _____

4. By checking the appropriate box and signing below, the Producer agrees to participate in one or more of the **Producer-collected** biologic sampling.

Fecal Samples — Your signature indicates that you want to participate in the Fecal Sampling and will collect the samples as instructed.

_____/_____
date
Producer or authorized representative

Scab — Your signature indicates that you want to participate in the Scab Sampling and will collect the samples as instructed.

_____/_____
date
Producer or authorized representative

Bulk Milk — Your signature indicates that you want to participate in the Bulk Milk Sampling and will collect the samples as instructed.

_____/_____
date
Producer or authorized representative

Data Collector – If the Producer wants more time to decide, leave this agreement and instruct the Producer to sign, date, and send to NAHMS using the provided envelope. The Producer should contact Judy Rodriguez if he/she doesn't hear from her within 10 days to ensure that form wasn't lost in mail. If signed during your visit, mail Judy the original and email her that it is coming. A copy is left with the Producer and a copy is sent to your Coordinator.