See reverse for additional OMB statement

PAGES

PAGE

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

ORIGIN OF REACTORS/HERD ADDITIONS

INSTRUCTIONS: If animals are traceable to a herd source, obtain all supporting documents (i.e., health certificates, sales yard releases, brand inspection records, test charts, sales slips, etc.)

1. NAME OF HERD OWN	2. DOCUMENT NUMBER	
0001.11.17.7	4 11500 110	+_
3. COUNTY	4. HERD NO.	5.

SUPPLEMENTAL TO VS FORM 4-108

6. LIST ORIGIN OF REACTORS AND HERD ADDITIONS (Identify each MCI and initial herd reactor – negative additions need not be listed individually.)												
SOURCE			IDENTIFICATION						CULT	URE	REMARKS	
NAME AND ADDRESS (Include all reactors both raised and purchased)	Date Added	Most Recent Status of Animal(s) "M," "R," or "N"	Tag No's	Brand	Sex	Age when purchased	Breed	Vac. Status	Specimen Submitted	Results	Date of last calving (Circle if abortion) Disposition of calf (Id. if in herd)	STATUS AT ENTRY TO HERD
A	В	С	D	Е	F	G	Н	I	J	K	L	М
				-					-			
				-								
				-								
				_								
				_								
				_								
				_								
				-								
				-								
			<u> </u>									
7. Have arrangements been made to contact owners of source herds of all purchased suspects and reactors?		8. SIGNATURE OF VETERINARIAN						CODE		9. DATE		
Yes No (If no, explain on reverse)												

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 0579-0047. The time required to complete this information collection is estimated to average 4 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.

NOTICE TO HERD OWNERS

Herd Owners (*Managers or Agents*) of herds of brucellosis affected livestock must be advised that information is given voluntarily to assist in the elimination of brucellosis from the livestock population. Cooperation of all affected herd owners (*Managers or Agents*) is needed to complete a thorough epidemiologic investigation to identify the source of the disease, the method of spread and the possible dissemination of new herds. The authorities under which the brucellosis program is conducted are contained in 21 U.S.C. 111, 112, 114, 114a, 114a-1, 115, 120, 121, 125, and 134a-f and Title 9, Code of Federal Regulations, Parts 51 and 78.

INSTRUCTIONS

The purpose of this form is to record information of epidemiologic importance individually for: (1) each MCI reactor (if any), (2) each reactor on the initial herd test, and (3) by lot for any other purchases. In most cases, this should cover the 2-year period prior to discovery of the infection but the time period may vary upon epidemiologic findings.

- 4.1. From 4-108. Item 2 is the preprinted number on the 4-108.
- Indicate which page of 4-108A this is and how many total pages were completed.
- 6-A. Record the complete legal name and mailing address of the supplier for each animal or group of animals added to the herd. List each MCI reactor (*if any*) on a separate line. List each farm reactor on the initial herd test on a separate line. List each purchase (*one purchase lot per line*) for all other animals added to the herd over the past 2 years (*or longer at the discretion of the investigator*).
- 6-B. List the date the present owner acquired control of the animal(s).
- 6-C. Indicate the latest status of the animal(s) by "M" (MCI Reactor), "R" (herd reactor), or "N" (negative).
- 6-D. List the identification other than brand for each reactor animal when purchased if known and when found to be a reactor and the reactor tag number. For purchase lots, indicate the number of animals involved and list the tag range (if in series), State codes, or other available identification.
- 6-E. List all brands on the animal(s) or listed on any permit received with the animals.
- 6-F. Indicate "F" for female and "M" for male. For purchase lot data, record the number of each.
- 6-G. Indicate the age when purchased. For purchase lots, record the age range and the average or most frequent age.
- 6-H. Record the breed of reactors, if known. If nondescript, record the most probable breed by appearance, etc. For purchase lots, record the predominant breed or as mixed beef or mixed dairy.

- 6-I. Record the brucella vaccination status as "CV" (calfhood), "AV" (adult), "NV" (not vaccinated), or "UN" (unknown).
- 6-J. Indicate material submitted for brucella culture. Use "T" for lymphoid and other glandular tissue. Use "F" for fetus, placenta, or uterine exudates. Use "M" for milk including any udder secretion. If two or more were submitted, list one above the other.
- 6-K. Record brucella culture results as "N" (negative), "1" (type 1), "2" (type 2), "4" (type 4), "19 S" (Strain 19), "S" (suis), and "U" (contaminated or unsatisfactory). If milk, placentas, and/or tissues are submitted, record the results for each material.
- 6-L. For reactors, record the date of last calving (circle the date if it was an abortion or a full term dead or weak calf), indicate where the calf is now, and any other information considered pertinent. For purchase lots, record pertinent information such as culled aborters, etc.
- 6-M. Enter the respective code number(s): 1-untested, 2-negative test, 3-from a brucellosis certified free herd, 4-from a certified free (or class A) area.
- Indicate "yes" if you are going to contact all herds of origin of reactors or other suspicious purchases. Indicate "no" if you are not going to contact all and explain on back of form.
- 8. Signature of Veterinarian responsible for the completion of this investigation.
- Date signed by the Veterinarian responsible for this investigation.

Attach copies of any supporting documents that might help trace additions. This could be market invoices and release slips, brand inspections, health certificates, receipts, etc.

VS FORM 4-108A (Reverse)

Form Copy Designations

PART 1-HERD FILE
PART 2-CATTLE DISEASES STAFF,
RIVERDALE, MD (Free Areas only)
PART 3-STATION EPIDEMIOLOGIST
PART 4- STATE OR FEDERAL FIELD
VETERINARIAN