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**INSTRUCTIONS FOR THE JOHNE'S PROGRAM TEST RECORD (VS FORM 4-30)**

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The major objectives of the test records are to provide uniformity in recording and reporting tests for Johne's disease, to show specific information relative to each test in a herd including all pertinent information concerning the results, and 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 within the record.

1. Enter State.
2. Enter the County's name.
3. Premises ID number, and the kind of herds: Premises ID number is the code number for the herd, farm, ranch, or dairy. 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: In the top center portion of the form the herd owner's last name, first name, and middle initial 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, 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. GPS coordinates help 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 check in the private block. 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 tests to run.

12. Tests to Run: Identify the test type to be run (*Elisa, fecal culture, PCR, etc.*)
13. Sample Collection:  
Sample No.: Identifies the sample with animal identification.  
Record all Identification Number(s). Record all Eartag(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 values*) 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 chain reaction quantitative results in the first column and the interpretation in the second column. Blank spaces are for additional tests that are requested.

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

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