



Animal and
Plant Health
Inspection
Service

Veterinary
Services

GENERAL GOAT MANAGEMENT QUESTIONNAIRE 2019



National Animal Health
Monitoring System

2150 Centre Ave.,
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Form Approved
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NAHMS 451
Project Code 930

Please make corrections to name, address and zip code, if necessary.

BEGINNING TIME [MILITARY]

We would like to ask you some questions about your goat operation. To understand important issues in the goat industry, we need to obtain information about the health status of your goats and any health problems they may have had, as well as about productivity and management.

*You may find it easier to provide accurate data if you use records to answer some of the questions. Your participation is **voluntary** and not required by law. However, your responses are needed to make regional and national estimates as precise as possible.*

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**NAHMS-451
JUN 2019**

SECTION A — INVENTORY

1. Were **five or more** adult goats, regardless of ownership, on this operation on July 1, 2019? An operation includes all sites with goats under the same management.

₁ Yes-**CONTINUE**

₃ No-**SKIP to SECTION J**

2. How many goats and kids on this operation on July 1, 2019, were in the following age groups:

- a. Less than 1 year old None
- b. 1-2 years old None
- c. 3-4 years old None
- d. 5 years or older None
- e. Total

**Number of
Goats**

| |
|--|
| |
| |
| |
| |
| |

3. Report the total number of goats in 2e by **primary use**.

- Report based on **primary use** regardless of breed.

- a. Angora/fiber None
- b. Milk None
- c. Meat None
- d. Other (specify in Item 4) None
- e. Total [**Must equal Item 2e**] None

Goats

| |
|--|
| |
| |
| |
| |
| |

4. [**If Item 3d=0 (no "Other" goats), SKIP to Item 5]**

How many of these [**Item 3d**] other goats and kids had the following **primary uses**?

- For young goats or kids, report the use for which they are intended.
- Include each animal only once.

- a. Seed stock/ breed stock None
- b. Showing, competition, 4-H, or club. None
- c. Brush or weed control/ fire suppression. None
- d. Pack goats. None
- e. Pet or companion goats. None
- f. Other (specify: _____). None

Other Goats

| |
|--|
| |
| |
| |
| |
| |
| |

5. Of the total goats and kids [**Items 3e**], how many were:

[Enter 0's if "none" is checked for the primary use above.]

| | Angora/ Fiber Goats | Milk Goats | Meat Goats | Other Goats |
|---|------------------------|---------------|---------------|----------------|
| a. Goats and kids intended to remain on the operation (such as for breeding, milking, pets etc): | | | | |
| i. Does 1 year and older? | | | | |
| ii. Bucks 1 year and older? | | | | |
| iii. Replacement kids under 1 year old? | | | | |
| b. Goats and kids intended for market (including wethers) or otherwise sold/given away: | | | | |
| i. Market goats 1 year old and older (not used for breeding)? | | | | |
| ii. Market kids under 1 year old? | | | | |
| c. Total [Totals should equal Items 3a-d] | | | | |

6. Now I have some questions about the breeds of goats and kids on this operation. Of the total goats and kids
[Item 3e],

How many goats were (either number or percentage of animals):

- Include each animal only once.

| | Head | OR | Percent |
|--|---------------------------------|----|-------------|
| a. Alpine? <input type="checkbox"/> None | | | % |
| b. Angora? <input type="checkbox"/> None | | | % |
| c. Boer? <input type="checkbox"/> None | | | % |
| d. Cashmere? <input type="checkbox"/> None | | | % |
| e. Fainting goats (Myotonic, Tennessee)? <input type="checkbox"/> None | | | % |
| f. Kiko? <input type="checkbox"/> None | | | % |
| g. LaMancha? <input type="checkbox"/> None | | | % |
| h. Nigerian dwarf? <input type="checkbox"/> None | | | % |
| i. Nubian? <input type="checkbox"/> None | | | % |
| j. Oberhasli? <input type="checkbox"/> None | | | % |
| k. Pygmy? <input type="checkbox"/> None | | | % |
| l. Pygora? (specify: _____) <input type="checkbox"/> None | | | % |
| m. Saanen? <input type="checkbox"/> None | | | % |
| n. Sable? <input type="checkbox"/> None | | | % |
| o. Savannah? <input type="checkbox"/> None | | | % |
| p. Spanish? <input type="checkbox"/> None | | | % |
| q. Toggenburg? <input type="checkbox"/> None | | | % |
| r. Crossbred/experimental (more than one breed)? (specify: _____) <input type="checkbox"/> None | | | % |
| s. Other? (specify: _____) <input type="checkbox"/> None | | | % |
| Total. | [Must equal Item 3e] | | 100% |

SECTION B—GENERAL MANAGEMENT

Year (YYYY)

1. In what year did the primary operator first begin owning or managing goats?

2. How many goats do you expect to have in 5 years, compared to your July 1, 2019, inventory?
[Check one]

- ₁ None- **CONTINUE**
- ₂ Fewer- **SKIP to Item 4**
- ₃ About the same- **SKIP to Item 4**
- ₄ More- **SKIP to Item 4**

3. What is your main reason for expecting to have no goats in 5 years?
[Check one]

- ₁ Marketing of kids or products
- ₂ Internal parasites
- ₃ Other disease (specify : _____)
- ₄ Predator loss
- ₅ Personal or family situation (e.g., retirement, lack of successor)
- ₆ Government regulations (specify : _____)
- ₇ Other reason (specify : _____)

4. Do you belong to a:

- a. National goat or breed association? ₁ Yes ₃ No
- b. State or local goat or breed association? ₁ Yes ₃ No

5. From July 1, 2018, to June 30, 2019, what was your primary system for maintaining goat and kid production records?

[Check one]

- ₁ A livestock or goat management software program (Specify program _____)
- ₂ Any other spreadsheet or word document
- ₃ Handwritten records
- ₄ Any other method (specify: _____)
- ₅ Did not maintain goat and kid production records

6. For how many months from July 1, 2018, to June 30, 2019 did you manage the majority of your goats on the following? **[If moved indoors at night, answer for daylight hours.]**

- a. Open range (unfenced acreage with herder)
- b. Fenced range (uncultivated fenced acreage)
- c. Fenced farm (cultivated pasture or browse)
- d. Outdoor dry lot (pen with dirt, concrete or other surface not used for grazing)
- e. Indoors (enclosed building)

| Months | |
|--------|--|
| | |
| | |
| | |
| | |
| | |

[Sum of Items 6a-6e must be equal to 12 months]

7. For how many months from July 1, 2018, through June 30, 2018 were any of this operation's goats or kids placed on:

- a. State or Federal public land?
- b. Other land which is not owned, rented, leased, or borrowed by this operation?

| Months | |
|--------|--|
| | |
| | |

[If both Items 7a and 7b equal 0, SKIP to Item 9.]

8. When placed on public or other land that is not owned, rented, leased, or borrowed by this operation, were any of this operation's goats commingled with sheep or goats from other operations? Yes No

9. Do goats have access to any surface water (e.g., ponds, irrigation ditches, streams/creeks)? .. Yes No

10. During **April through June 2019**, what percentage of the time did the majority of goats on this operation spend on:

- a. Browsing (feeding on leaves, soft shoots, or fruits of high-growing, generally woody, plants such as shrubs)?
- b. Grazing (feeding on grass or other low vegetation)?
- c. Neither (i.e., dry lot)?
- Total**

| Percent | |
|--------------|-------------|
| | % |
| | % |
| | % |
| Total | 100% |

11. From July 1, 2018, to June, 30, 2019, were the following feed sources or supplements used for **any** goats or kids on this operation?

- a. Cut hay (grass or legume) ₁ Yes ₃ No
- b. Commercial complete feed (e.g., “goat chow”) ₁ Yes ₃ No
- c. Concentrate/grain rations – excluding commercial complete feed (e.g., corn, milo, barley, wheat, oats, rye) ₁ Yes ₃ No
- d. High protein feed – excluding commercial complete feed (e.g., cottonseed meal, soybean meal, fish meal, or other specialty protein) ₁ Yes ₃ No
- e. Crop residue/by-product feeds – excluding commercial complete feed (e.g., fat, soy hulls, wheat middlings) ₁ Yes ₃ No
- f. Salt or mineral blocks..... ₁ Yes ₃ No
- g. Other (specify: _____) ₁ Yes ₃ No

SECTION C—BREEDING MANAGEMENT

1. Did this operation breed any goats from July 1, 2018, to June, 30, 2019?
- ₁ Yes-**CONTINUE**
- ₃ No-**SKIP to SECTION D**
2. Were any bucks, regardless of ownership, used for natural breeding on this operation the last time does were bred?
- ₁ Yes
- ₃ No
3. From July 1, 2018, to June, 30, 2019, did this operation have a defined breeding season for its does? (i.e. bucks are kept with a group of does for no longer than 4 months).
- ₁ Yes-**CONTINUE**
- ₃ No-**SKIP to Item 5**
4. In general, does this operation breed the majority of does to kid:
- [Check one]**
- ₁ Less frequently than once a year?
- ₂ Once a year?
- ₃ More frequently than once a year (e.g. three times in two years)?
5. Did this operation synchronize estrus (manipulate breeding) from July 1, 2018, to June 30, 2019?
- ₁ Yes-**CONTINUE**
- ₃ No-**SKIP to Item 7**
6. Did this operation synchronize estrus in its does for:
- a. More uniformly sized or aged kid crop? ₁ Yes ₃ No
- b. Condensed kidding to optimize labor? ₁ Yes ₃ No
- c. More efficient use of facilities? ₁ Yes ₃ No
- d. Market timing? ₁ Yes ₃ No
- e. More efficient use of bucks? ₁ Yes ₃ No
- f. Artificial insemination (AI) ? ₁ Yes ₃ No
- g. Embryo transfer (ET)? ₁ Yes ₃ No
- h. Other? (specify: _____) ₁ Yes ₃ No

7. Did this operation use any of the following reproductive practices from July 1, 2018, to June 30, 2019:
- a. Does fed extra energy ration prior to breeding season (flushing)? ₁ Yes ₃ No
 - b. Hormones for estrus synchronization? ₁ Yes ₃ No
 - c. Teaser buck? ₁ Yes ₃ No
 - d. Genetic selection for ability to breed out of season? ₁ Yes ₃ No
 - e. Regulation of light for out-of-season breeding? ₁ Yes ₃ No
 - f. Ultrasound (pregnancy diagnosis, fetal counting)? ₁ Yes ₃ No
8. When selecting bucks or does for breeding, do you use performance traits or a performance testing program for genetic selection to improve the genetics of your herd? ₁ Yes ₃ No
9. Did you select bucks or does for breeding based on their resistance to internal parasites? ₁ Yes ₃ No
10. For does bred between July 1, 2018, to June 30, 2019, was the individual doe breeding history recorded? ₁ Yes ₃ No

SECTION D—KID CROP AND MANAGEMENT

1. Were any kids born on this operation from July 1, 2018, to June, 30, 2019?

₁ Yes-**CONTINUE**

₃ No-**SKIP to SECTION E**

The next questions refer to the last completed breeding season and following kid crop. This is the most recent kid crop from which all kids have been born.

2. For the most recent kid crop, how many does were bred by the following methods:

- For does bred by more than one method, give method used first.

- a. Naturally by this operation's bucks? None
- b. Naturally by another operation's bucks? None
- c. By artificial insemination (AI)? None
- d. By embryo transfer? None
- e. Total number of does bred **[Add Items 2a, 2b, 2c, and 2d]**

| Does | |
|------|--|
| | |
| | |
| | |
| | |
| | |

3. How many of these **[Item 2e]** does bred for the most recent kid crop:

- a. Gave birth (kid born dead or alive)? None
- i. Had multiples (eg. twins/triplets/etc.)? None
- b. Aborted (known abortion)? None
- i. Number of does that aborted which were first-kidding does? None
- c. Never became pregnant (or unknown abortion)? None
- d. Died or were removed prior to kidding? None
- e. Total **[Should equal Item 2e; excludes ai and bi]**

| Does | |
|------|--|
| | |
| | |
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| | |

4. For the most recent kid crop, how many kids were:

- a. Born alive? None
- b. Born dead? None
- c. Total kids born **[Add Item 4a and Item 4b]**

| Kids | |
|------|--|
| | |
| | |
| | |

5. **[If Item 4a=0, SKIP to Item 6]**

Of those **[Item 4a]** kids born alive, how many:

- a. Were sold prior to weaning? None
- b. Are not yet weaned? None
- c. Have been weaned and have been or will be sold? None
- d. Have been weaned and are or will be replacements? None
- e. Died before weaning? None
- f. Died after weaning? None
- g. Have unknown weaning status? None
- h. Total **[Must equal Item 4a]**

Kids

| |
|--|
| |
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6. What percentage of kids born (dead or alive), **[Item 4c]** were born in the following environments:

- a. Individual kidding pen (indoors or outside)? None
- b. Multiple doe indoor pen (without individual pens)? None
- c. Multiple doe outdoor kidding area that allows increased observation and/or shelter? None
- d. Other multiple doe fenced pasture? None
- e. Open range? None
- f. Multiple doe dry lot (pen with dirt, concrete, or other surface not used for grazing)? None
- g. Other? (specify: _____) None
- Total**

Percent

| | |
|--|-------------|
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |
| | 100% |

Kid Information for July 1, 2018, through June 30, 2019

7. From July 1, 2018, to June 30, 2019, how many kids were:

| | | | |
|----|---|-------------------------------|-------------|
| a. | | | |
| b. | Born alive? | <input type="checkbox"/> None | Kids |
| c. | | | |
| d. | Born dead? | <input type="checkbox"/> None | |
| e. | | | |
| f. | Total kids born [Add Items 7a and Item 7b] | | |

8. Now I'm going to ask about the **[Item 7c]** total kids born (dead or alive) from July 1, 2018, to June 30, 2019. How many or what percentage were born during:

| | | |
|----|-----------------------|-------------------------------|
| a. | July 2018? | <input type="checkbox"/> None |
| b. | August 2018? | <input type="checkbox"/> None |
| c. | September 2018? | <input type="checkbox"/> None |
| d. | October 2018? | <input type="checkbox"/> None |
| e. | November 2018? | <input type="checkbox"/> None |
| f. | December 2018? | <input type="checkbox"/> None |
| g. | January 2019? | <input type="checkbox"/> None |
| h. | February 2019? | <input type="checkbox"/> None |
| i. | March 2019? | <input type="checkbox"/> None |
| j. | April 2019? | <input type="checkbox"/> None |
| k. | May 2019? | <input type="checkbox"/> None |
| l. | June 2019? | <input type="checkbox"/> None |

| Head | OR | Percent |
|------|----|---------|
| | | |
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9. What percentage of these births had someone present to help if needed?

| | |
|--|----------------|
| | Percent |
| | |

10. For these births, were the following recorded?

| | | | | |
|----|-----------------------------------|---|--|---|
| a. | Date of kidding | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | |
| b. | Number of kids born per doe. | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | |
| c. | Number of abortions | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₄ N/A |

11. Which of the following best describes how placentas (afterbirths) were usually disposed of from July 1, 2018, to June 30, 2019?

[Check one]

- ₁ Left in the field/birthing area and removed later
- ₂ Left in the field/birthing area and **NOT** removed
- ₃ Buried
- ₄ Burned/incinerated
- ₅ Composted
- ₆ Disposed of in landfill/dump
- ₇ Other (specify: _____)

12. From July 1, 2018, to June, 30, 2019, were the majority of first-time kidding does physically separated from older does prior to giving birth?

- ₁ Yes
- ₃ No
- ₄ N/A

[If "N/A" is checked, skip to Item 14]

13. For first-time kidding does, after kidding were doe and kid pairs usually:

- Answer for the majority of does

[Check one]

Days

- ₁ Kept separate from other goats? — If kept separate, for how many days after kidding?
- ₂ Kept with other doe/kid pairs?
- ₃ Not separated/always with herd?
- ₄ Other? (specify: _____)

14. For older does (second or more kidding), after kidding were doe and kid pairs usually:

- Answer for the majority of does

[Check one]

Days

- ₁ Kept separate from other goats? — If kept separate, for how many days after kidding?
- ₂ Kept with other doe/kid pairs?
- ₃ Not separated/always with herd?
- ₄ Other? (specify: _____)

15. From July 1, 2018, to June 30, 2019, what was the average age (in days) of kids when they first had access to:

- Answer for the majority of kids

- a. Water?
[Enter '0' if housed with doe and enter '1' if offered on the day of birth]
- b. Creep feed (Starter grain or other concentrates)?
[Enter '0' if not offered and enter '1' if offered on the day of birth]
- c. Hay or other roughages?
[Enter '0' if housed with doe and enter '1' if offered on the day of birth]

| | |
|-------------|--|
| Days | |
| | |
| | |
| | |

16. From July 1, 2018, to June 30, 2019, what was the average age (in weeks) when kids were weaned?

- Weaning is when kids no longer receive milk or milk replacer
- Include kids that are weaned upon leaving the operation

- a. Doe kids
- b. Buck kids

| | |
|--------------|--|
| Weeks | |
| | |
| | |

17. For these weaned kids, were the following records kept?

- a. Number of kids weaned? ₁ Yes ₃ No
- b. Individual weaning weights? ₁ Yes ₃ No

18. Were any weaned kids sold from July 1, 2018, to June 30, 2019?

- ₁ Yes-**CONTINUE**
- ₃ No-**SKIP to Item 21**

19. At what age were weaned kids usually sold?

| |
|--------------|
| Weeks |
| |

20. At what weight were weaned kids usually sold?

| |
|---------------|
| Pounds |
| |

21. Do you check for horn buds on goat kids prior to disbudding?

- ₁ Yes ₃ No ₄ N/A

22. Of the kids born alive [Item 7a] from July 1, 2018, to June 30, 2019, how many or what percent:

a. Developed or are expected to develop horns? None

[If none, skip to item 26]

i. Of these [Item 22a] kids that developed or are expected to have horns, how many were or will be disbudded on this operation?
 • Exclude kids disbudded elsewhere. None

[If none, skip to item 26]

ii. What is the average age of these [Item 22ai] kids when they are disbudded on this operation?

[Enter one response in days OR weeks]

| | | |
|-------------|-----------|----------------|
| Head | OR | Percent |
| | | |

| | | |
|-------------|-----------|--------------|
| Days | OR | Weeks |
| | | |

23. Which of the following best describes the primary method of disbudding used on this operation for kids?
[Check one]

- ₁ Electric dehorner/debudder, hot iron
- ₂ Caustic paste
- ₃ Other (specify: _____)

24. When kids were disbudded, were analgesics or anesthetics routinely used?

- ₁ Yes
- ₃ No

25. Who typically performs the disbudding procedure?

- ₁ Owner
- ₂ Herd Manager
- ₃ Veterinarian
- ₄ Other (specify: _____)

26. Of the buck kids born on this operation from July 1, 2018, to June 30, 2019, how many head or what percentage were or will be castrated?
 None

| | | |
|-------------|-----------|----------------|
| Head | OR | Percent |
| | | |

[If Item 26 = 0, SKIP to SECTION E.]

27. What is the average age of these [Item 26] kids when they are castrated on this operation?

[Enter one response in days, weeks, or months]

| | | |
|----------------|-----------------|---------------|
| Days OR | Weeks OR | Months |
| | | |

28. Which of the following best describes the primary method of castration used on this operation?

[Check one]

- ₁ Remove testicles with a blade
- ₂ Clamp/burdizzo (e.g., crush cords)
- ₃ Rubber band (elastator band)
- ₄ Other (specify: _____)

SECTION E—HEALTH MANAGEMENT

Now, I'm going to ask you some questions about goat health management.

1. Have any of your goats had signs of sore mouth (such as scabs around the mouth, feet, or udder not known to be caused by trauma or other known disease) from July 1, 2018, to June 30, 2019?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 3**

2. From July 1, 2018, to June 30, 2019, how often did you use the following practices when handling goats with scabs around the mouth, feet, or udder?

| | Never | Sometimes | Always |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| a. Wore gloves when handling goats with scabs | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| b. Washed hands with soap and water after touching goats with scabs . | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| c. Covered your cuts and scrapes when handling goats with scabs | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| d. Obtained veterinary consultation when goats had scabs | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |

3. Who would you contact if adult goats had neurologic signs (e.g., circling, tremors, lip smacking, loss of coordination, rubbing against fences)?

- a. Private or university veterinarian ₁ Yes ₃ No
- b. State veterinary office ₁ Yes ₃ No
- c. USDA veterinary office ₁ Yes ₃ No
- d. Other goat producers ₁ Yes ₃ No
- e. Other (specify: _____) ₁ Yes ₃ No

4. Were any of your goats tested for brucellosis during the previous 3 years?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 8**

5. For what purposes were the goats tested for brucellosis?

- a. Movement requirement ₁ Yes ₃ No
- b. Show or exhibition requirement ₁ Yes ₃ No
- c. Veterinarian (nonregulatory, private practitioner) recommendation. ₁ Yes ₃ No
- d. State requirement ₁ Yes ₃ No
- e. Concern for milk safety ₁ Yes ₃ No
- f. Other (specify: _____) ₁ Yes ₃ No

6. When tested for brucellosis, which of the following types of tests were used?

- a. Blood test ₁ Yes ₃ No ₂ Don't know
- b. Other (specify: _____) ₁ Yes ₃ No ₂ Don't know

7. Is your herd certified brucellosis-free? ₁ Yes ₃ No

8. Were any of your goats tested for tuberculosis (TB) during the previous 3 years?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 11**

9. For what purposes were the goats tested for TB?

a. Movement requirement ₁ Yes ₃ No

b. Show or exhibition requirement ₁ Yes ₃ No

c. Veterinarian (nonregulatory, private practitioner) recommendation ₁ Yes ₃ No

d. State requirement ₁ Yes ₃ No

e. Other (specify: _____) ₁ Yes ₃ No

10. Is your herd accredited TB-free? ₁ Yes ₃ No

11. 111. From July 1, 2018, to June 30, 2019, how often were the following recorded?

| | Never | Sometimes | Always | N/A |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| a. Individual animal health and treatment (e.g., vaccination, deworming practices) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| b. Laboratory test results | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| c. Names of antibiotics used | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| d. Dates of antibiotic treatments | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| e. Antibiotic withdrawal time | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |

12. From July 1, 2018, to June 30, 2019, how did you usually determine the withdrawal period for a given antibiotic?

- The withdrawal period specifies the number of days that must pass after the last antibiotic treatment was given before any meat or milk can enter the food supply.

[Check one]

₁ No antibiotics used

₂ No withdrawal period considered

₃ Withdrawal period determined by a veterinarian

₄ Based on the antibiotic label directions

₅ Other producers

₆ Internet search

₇ Other (specify: _____)

13. From July 1, 2018, through June 30, 2019, did this operation consult a veterinarian for any reason related to goat health, productivity, or management?

₁ Yes-**CONTINUE**

₃ No-**SKIP TO ITEM 15**

14. Was a veterinarian consulted for any of the following:

- a. Regular or routine visits (e.g. preg checks, herd health visits, health certificate)? ₁ Yes ₃ No
- b. Emergency visits (e.g. birthing difficulty, sick goats, lameness)? ₁ Yes ₃ No
- c. Consulted by phone (including text) or email? ₁ Yes ₃ No
- d. For Veterinary Feed Directives or medicated water prescriptions? ₁ Yes ₃ No
- e. I am a veterinarian ₁ Yes ₃ No

15. **[If Item 13 = “Yes” (did consult a veterinarian), SKIP to Item 16]**

If no veterinarian was used from July 1, 2018, through June 30, 2019, which of the following **best** describes why not?

[Check one]

- ₁ Veterinarian available in the local area but not knowledgeable about goats
- ₂ No veterinarian available in the local area
- ₃ Too expensive
- ₄ No veterinarian needed on this operation
- ₅ Other (specify: _____)

16. How familiar are you with the meaning of a veterinarian-client-patient relationship (VCPR)?

[Check one]

- ₁ Never heard of it
- ₂ Heard the name but do not know what it means
- ₃ Have a least a basic understanding of what it means

[Show Reference Card A to the producer]

17. How would you describe your VCPR with your veterinarian (for your goats)?

[Check one]

- ₁ A written document signed by my veterinarian and me
- ₂ A verbal agreement between my veterinarian and me
- ₃ My veterinarian has not formally mentioned a VCPR for my goats, but I consider that I have one based on his/her relationship with my operation
- ₄ No VCPR for goats or No Vet for goats

SECTION F—BIOSECURITY

1. From July 1, 2018, to June 30, 2019, did any of the following visitors come onto your operation? For each type of visitor, also indicate whether or not they touched goats or walked through areas where goats are kept.

| | Did the following visitors come onto your operation from July 1, 2018, to June 30, 2019? | | [IF YES], did the visitors typically touch goats or walk through areas goats are kept on your operation? | |
|--|---|--|---|--|
| a. Private or company veterinarian | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| b. Federal/State veterinarian or animal health worker | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| c. Extension agent or university veterinarian . . . | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| d. Nutritionist or feed company consultant | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| e. Agricultural tour visitors (school groups, university students, agritourism, etc.) | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| f. Customer (private individual) purchasing goats, milk, fiber, meat, cheese, or other goat products | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| g. Goat wholesaler, buyer, or dealer | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| h. Renderer | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| i. Milk truck driver | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| j. Mobile slaughter team members | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| k. Shearers | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| l. Other agriculture-related visitors (volunteers, feed delivery and service personnel) | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| m. Family, friends and / or neighbors | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |
| n. Other visitors (specify: _____) . | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes | <input type="checkbox"/> ₃ No |

2. Did any of the visitors to this operation from July 1, 2018, to June 30, 2019 have access to areas or facilities of the operation that house or contain animals, feed, manure, or farm equipment?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 4**

3. How often did you require the following measures for these visitors?

| | Never | Sometimes | Always |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| a. Change into clean clothes or coveralls | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| b. Use a footbath before entry | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| c. Change into clean boots or use shoe covers | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| d. Scrub shoes before or immediately after entry into goat production area | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| e. Wash hands before handling goats | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| f. No contact with other livestock for at least 24 hours before visiting your goats | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |
| g. Park away from goat area | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ |

4. From July 1, 2018, to June 30, 2019, did any paid or unpaid workers have goats or other livestock at their home off this operation? ₁ Yes ₃ No ₄ N/A

5. From July 1, 2018, to June 30, 2019, were any of the following domestic animals on this operation at any time, or on adjacent operations where fence-line contact was possible?

→ ANSWER BOTH COLUMNS ←

| | On this operation | On adjacent property |
|--|--|--|
| a. Goats | | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| b. Domestic sheep | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| c. Cattle | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| d. Horses, donkeys | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| e. Llamas, alpacas | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| f. Pigs | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| g. Poultry (chickens, turkeys, etc.) | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| h. Bison | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| i. Captive deer, elk, or other exotic hoof stock | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| j. Dogs | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |

6. From July 1, 2018, to June 30, 2019, were the following wild animals and/or signs of wild animals (scat, tracks etc.) observed on this operation or in adjacent areas?

→ ANSWER BOTH COLUMNS ←

| | On This Operation | In adjacent areas |
|--|--|--|
| a. Wild goats | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| b. Bighorn sheep | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| c. Feral Pigs. | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| d. Deer, elk, or other exotic hoof stock. | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| e. Raccoons, skunks, or opossums | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| f. Predators (e.g. coyotes, bears, mountain lions, wolves) | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |

7. From July 1, 2018, to June 30, 2019, which of the following types of cats were present on this operation?

- a. Outdoor or indoor/outdoor domestic cats ₁ Yes ₃ No
- b. Feral or stray cats ₁ Yes ₃ No
- c. Wild or exotic cats (e.g., bobcats) ₁ Yes ₃ No
- d. Litters of kittens ₁ Yes ₃ No

8. From July 1, 2018, to June 30, 2019, were the contents of a cat litter box discarded into goat-raising areas? ₁ Yes ₃ No

9. From July 1, 2018, to June 30, 2019, were any of the following methods used specifically to control rats and mice?

- a. Traps, baits, and/or poison ₁ Yes ₃ No
- b. Professional exterminator ₁ Yes ₃ No
- c. Dogs or cats. ₁ Yes ₃ No
- d. Other (specify: _____) ₁ Yes ₃ No

SECTION G—MOVEMENT AND MARKETING

1. From July 1, 2018, to June 30, 2019, were any goats or kids permanently added to this operation, excluding kids born on your operation?

₁ Yes-**CONTINUE**

Year (YYYY)

₃ No- In what year were goats or kids last added to this operation? -**SKIP to Item 14**

2. Did you always require the following prior to arrival, or before commingling, for these newly added goats before introducing them to the rest of your herd? [**Answer both columns for every practice.**]

→ ANSWER BOTH COLUMNS ←

| | Required prior to arriving on the operation | Done on the operation before commingling with rest of herd |
|---|--|--|
| a. Veterinarian examinations | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| b. Any vaccinations. | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| c. Foot trim | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| d. Medicated footbath | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| e. Internal parasite fecal exam | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| f. Internal parasite treatment (deworming). | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| g. External parasite treatment. | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| h. Inspect goats for abscesses and/or scars from previous abscesses | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| i. Preventive antibiotic treatment (oral bolus or injectable) | | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |
| j. Other inspections or treatments (specify: _____) | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No | <input type="checkbox"/> ₁ Yes <input type="checkbox"/> ₃ No |

3. From July 1, 2018, to June 30, 2019, did you quarantine any of the newly added goats?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 4**

- a. How many days, on average, were any pregnant goats quarantined? _{N/A}
- b. How many days, on average, were any non-pregnant goats quarantined? _{N/A}

| |
|-------------|
| Days |
| |
| |

Kids

4. How many kids were added to this operation, excluding kids born on the operation, from July 1, 2018, to June 30, 2019?
[If none, SKIP to Item 7]

None

5. How many of these **[Item 4]** kids came from the following sources?

of Kids Added Number of Shipments

- a. b. Goat wholesaler or dealer? None
- c. d. Directly from another premises with primarily dairy goats? None
- e. f. Directly from another premises with primarily meat or other goats? .. None
- g. h. Livestock market or Auction (not online)? None
- i. Online sales (craigslist, facebook marketplace, Ebay, online auctions, etc.)? .. None
- j. k. Farm store or feed store? None
- l. m. Flea market, farmer's market, or swap meet? None
- n. o. Fair or show? None
- p. q. Other? (specify: _____) None

| # of Kids Added | Number of Shipments |
|-----------------|---------------------|
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Unweaned Kids

6. Of the **[Item 4]** kids added, how many were not yet weaned?

7. From July 1, 2018, to June 30, 2019, were any adult goats added to this operation?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 14**

Does

8. How many does were added to this operation, from July 1, 2018, to June 30, 2019?
[If none, SKIP to Item 11]

9. How many of these **[Item 8]** does came from the following sources?

of Does Added Number of Shipments

- a. b. Goat wholesaler or dealer? None
- c. d. Directly from another premises with primarily dairy goats? None
- e. f. Directly from another premises with primarily meat or other goats? .. None
- g. h. Livestock market or Auction (not online)? None
- i. j. Online sales (craigslist, facebook marketplace, Ebay, online auctions, etc.)? None
- k. l. Farm store or feed store? None
- m. n. Flea market, farmer's market, or swap meet? None
- o. p. Fair or show? None
- q. r. Other? (specify: _____) None

| # of Does Added | Number of Shipments |
|-----------------|---------------------|
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Pregnant Does

10. Of the **[Item 8]** does added, how many were pregnant?

None

Adult Bucks

11. How many **adult buck** goats were added from July 1, 2018, to June 30, 2019?

Adult Wethers

12. How many **adult wether** goats were added from July 1, 2018, to June 30, 2019? . . .

[If Items 11 and 12 both =0, SKIP to Item 14]

13. How many of these adult bucks or wethers came from the following sources?

- a. Goat wholesaler or dealer? None
- b. Directly from another premises with primarily dairy goats? None
- c. Directly from another premises with primarily meat or other goats? . None
- d. Livestock market or Auction (not online)? None
- e. Online sales (craigslist, facebook marketplace, Ebay online auctions, etc.)? None
- f. Farm store or feed store? None
- g. Flea market, farmer's market, or swap meet? None
- h. Fair or show? None
- i. Other? (specify: _____) None

| Bucks/ Wethers | Number of Shipments |
|---------------------------|--------------------------------|
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14. From July 1, 2018, to June 30, 2019, did any goats or kids leave this operation, attend an event (e.g., fair, show, sale, rodeo, or visit to another operation), and then return to this operation?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 16**

15. From July 1, 2018, to June 30, 2019, when goats or kids temporarily left and returned, did you **isolate** them (prevent nose-to-nose contact with other goats from this operation and prevent sharing of feed, drinking water, and equipment) for any period of time prior to re-introduction to the herd?

₁ Never isolate-**SKIP to Item 16**

₂ Only isolate for a specific reason such as exposure to disease-**SKIP to Item 16**

₃ Routinely isolate after returning to operation-**CONTINUE**

Days

a. If goats or kids were routinely isolated after returning to the operation, what was the **minimum** number of days these returning goats or kids were isolated?

16. From July 1, 2018, to June 30, 2019, were any live goats or kids sold or otherwise permanently removed from this operation?
- Exclude goats or kids that died or were home slaughtered for your own consumption.

₁ Yes-**CONTINUE**

₃ No-**SKIP to SECTION H**

17. Of the permanently removed goats and kids, how many were moved to the following **final** destinations:

| | | Goats |
|----|---------------------------------|-------------------------------|
| a. | In state? | <input type="checkbox"/> None |
| b. | Out-of-state? | <input type="checkbox"/> None |
| c. | Don't know? | <input type="checkbox"/> None |
| d. | Total [Add Items 17a-17c] | |

18. How many live goats or kids were permanently removed from this operation from July 1, 2018, to June 30, 2019?

- Exclude live goats or kids that died or were home slaughtered for your own consumption.

| | | Goats |
|----|--|-------------------------------|
| a. | Goats (1 year old and older) | <input type="checkbox"/> None |
| b. | Kids (under 1 year old) | <input type="checkbox"/> None |
| c. | Total goats and kids removed from this operation [Add Items 18a-18b. Total should equal Item 17d.] | |

19. How many of these live goats or kids were permanently removed through the following channels:

| | | Adult Goats | Kids |
|----|--|-------------|------|
| a. | Direct sales to consumer or ethnic market? | | |
| | i. Of these direct sales , how many were slaughtered on the operation? ... | | |
| b. | Direct sales to slaughter plant/packer? | | |
| c. | Taken to slaughter plant with retained ownership? | | |
| d. | Direct sales to another goat producer for backgrounding (feeding for slaughter)? | | |
| e. | Direct sales to another goat producer (include 4-H/show sales)? | | |
| f. | Auction/sale barn? | | |
| g. | Buyer/dealer for resale? | | |
| h. | Other? (specify: _____) | | |
| i. | Total [Add Items 19a and 19b-19h. Totals should equal Items 18a and 18b.] ... | | |

20. Of the permanently removed adult goats, how many were considered to be:

Goats

- a. Culled Breeding does?
- b. Culled Breeding bucks?
- c. Culled Other goats?
- d. Total adult goats removed from operation

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[If Item 20d=0, SKIP to SECTION H]

21. [If Item 20a (breeding does) = 0, SKIP to Item 23]

How many of the culled breeding does [Item 20a] were removed due to the following issues?

- Include each animal only once.

Does

- a. Old age/ teeth problems
- b. Illness
 - i. Mastitis (including hard bag syndrome)?
 - ii. Thin or unthrifty
 - iii. Neurologic signs (loss of coordination, staggering, swaying, falling down, high stepping of forelegs, or stiff rear legs, lip smacking, etc.)?
 - iv. Internal parasites, high fecal egg count, or based on FAMACHA score?
 - v. Pregnancy Toxemia
 - vi. Other illness? (specify: _____)
- c. Low milk production
- d. Poor genetics (conformational faults, small young, etc.)?
- e. Poor mothering?
- f. Failure to kid (open or aborted) or other reproductive problems?
- g. High somatic cell count?
- h. Economic issues (e.g., drought, herd reduction, market conditions)?
- i. Other? (specify: _____)

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Age

22. What was the average age in years of these culled does?

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23. [If Item 20b (breeding bucks)=0, SKIP to Item 25]

How many of the culled breeding bucks [Item 20b] were removed due to the following issues?

- Include each animal only once.

| | | Bucks |
|----|--|-------|
| a. | Old age / teeth problems | |
| b. | Illness | |
| | i. Thin or unthrifty | |
| | ii. Neurologic signs (loss of coordination, staggering, swaying, falling down, high stepping of forelegs, or stiff rear legs, lip smacking, etc.)? | |
| | iii. Internal parasites, high fecal egg count, or based on FAMACHA score? | |
| | iv. Other illness? (specify: _____) | |
| c. | Low productivity | |
| d. | Poor genetics (conformational faults, small young, etc.)? | |
| e. | Buck breeding performance? | |
| f. | Economic issues (e.g., drought, herd reduction, market conditions)? | |
| g. | Other? (specify: _____) | |

24. What was the average age in years of these culled-bucks?

Age

25. Of the adult goats that were removed from July 1, 2018, to June 30, 2019, how many or what percent had a herd identification when they left this operation? (e.g., operation name, operation logo, or a number unique to the operation on an ear tag, or other device)

Head

OR

Percent

SECTION H—IDENTIFICATION

1. We will now ask about use of various types of ID, such as ear tag, tattoo, collar, ear notch, leg band, brand, microchip, or other identification.

Do any of the goats currently on this operation have an ear tag, tattoo, collar, ear notch, leg band, brand, microchip, or other identification device that identifies them?

₁ Yes-**CONTINUE**

₃ No-**SKIP to SECTION I**

2. Which of the following methods are used to identify goats on your operation? Record the code that best describes what information was included on the tag.

| ID Code List for Item 2. | | | |
|--------------------------|------------|--------------------------|--------------------|
| 1= Individual goat ID | 2= Herd ID | 3= Both goat and herd ID | 4=ID type not used |

ID Type

Code

- a. Tattoo
- b. Collar or leg band
- c. Ear notch
- d. Hot-iron or freeze brand
- e. Paint brand
- f. Electronic ID or microchip
- g. Ear Tag
 - i. Metal Scrapie program ear tag
 - ii. Plastic Scrapie program ear tag.
 - iii. Other official ear tag with a USDA shield
 - iv. Other plastic ear tag.
- h. Other ID (specify: _____)

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3. Has this operation been assigned a unique herd ID as a part of the National Scrapie Eradication Program (Scrapie PIN/premises identification number)?

₁ Yes

₃ No

₂ Don't know

SECTION I—FIBER PRODUCTION

1. Were any of your goats or kids shorn, clipped, or combed for fiber from July 1, 2018, to June 30, 2019?

₁ Yes-**CONTINUE**

₃ No-**SKIP to SECTION J**

2. Please report, by type of fiber, the number of goats and kids clipped and the total pounds clipped from July 1, 2018, to June 30, 2019. Report goats and kids only once, even if clipped multiple times.

| | # of Goats | Pounds Clipped |
|---|-------------------|-----------------------|
| a. Cashmere | | |
| b. Mohair (angora goat) | | |
| c. Pygora | | |
| d. Other (specify: _____) | | |
| e. Total [Add Items 2a-2d] | | |

3. Did you sell or trade any fiber from July 1, 2018, to June 30, 2019?

₁ Yes-**CONTINUE**

₃ No-**SKIP to Item 5**

a. How many pounds of the total fiber produced [**Item 2e**] were sold or traded from July 1, 2018, to June 30, 2019? **Pounds**

4. What percentage of fiber (including fiber products) sold or traded from July 1, 2018, to June 30, 2019, was marketed by the following methods:

| | Percent |
|--|----------------|
| a. Direct sales to consumers in person? | % |
| b. Direct sales to consumers via internet? | % |
| c. Direct to commercial warehouses? | % |
| d. Direct sales to mill buyer? | % |
| e. Cooperative pools? | % |
| f. Other (specify: _____)? | % |
| Total | 100% |

5. From July 1, 2018, to June 30, 2019, were goats or kids shorn, clipped, or combed by:
- a. Employees of the operation, including the owner? ₁ Yes ₃ No
 - b. Contracted crew? ₁ Yes ₃ No
 - c. Hired individual? ₁ Yes ₃ No
 - d. Other? (specify: _____) ₁ Yes ₃ No

6. From July 1, 2018, to June 30, 2019, which of the following describes the usual treatment of clippers, shears, or combs between goats?

[Check one]

- ₁ Cleaned and disinfected
- ₂ Cleaned only
- ₃ No cleaning or disinfecting
- ₄ Don't know
- ₄ Other (specify: _____)

SECTION J—OFFICE USE

1. For operations that complete this questionnaire request signature on CONSENT FORM to be contacted for participation in Phase 2 of the study.
2. If CONSENT FORM is signed, provide comments below to describe the respondent location and any other comments that will be helpful for future contact.
3. Has the respondent heard of the NAHMS **Goat study** prior to contact by NASS for this survey?
₁ Yes
₃ No
4. Interview response code:
₁ Complete, Consent Form signed-**SKIP to Item 7**
₂ Complete, Consent Form refused-**CONTINUE**
₃ Zero goats on hand July 1, 2019-**SKIP to Item 7**
₄ Out of business-**SKIP to Item 7**
₅ Refused General Goat Management Questionnaire-**CONTINUE**
₆ Out of scope (including having more than 0 total goats, but fewer than 5 adult goats on July 1, 2019) -**SKIP to Item 7**
₇ Office hold-**SKIP to Item 7**
₈ Inaccessible-**SKIP to Item 7**
5. Check refusal response code:
₁ Does not want to commit time to the project
₂ Does not want involvement with government veterinarian or has had previous bad experience with veterinarian
₃ Does not have necessary records available
₄ Has participated in too many surveys
₅ Does not want outside people on the goat operation
₆ A bad time of year (planting, harvesting, second job, etc.)
₇ Currently has or recently had disease problem with herd
₈ Believes that surveys and reports hurt the farmer more than help
₉ Could not get owner's permission
₁₀ No reason given or other miscellaneous reason
6. Did the respondent use records to assist in answering this survey?
₁ Yes
₃ No

7. Comments:

xxxx

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ENDING TIME [MILITARY]

| Response | | Respondent | | Mode | | Enum. | Eval. | Office Use for POID | |
|-------------------|------|-------------|----------|----------------|------|-------|-------|---------------------|-----|
| 1-Comp | 9901 | 1-Op/Mgr | 9902 | 1-Mail | 9903 | 098 | 100 | 789 | |
| 2-R | | 2-Sp | | 2-Tel | | | | ----- | |
| 3- Inac | | 3-Acct/Bkpr | | 3-Face-to-Face | | | | | |
| 4- Office Hold | | 4-Partner | | 4-CATI | | | | | |
| 5-R – Est | | 9-Oth | | 5-Web | | | | | |
| 6- Inac – Est | | | | 6-e-mail | | | | | |
| 7- Off Hold – Est | | | | 7-Fax | | | | 407 | 408 |
| 8-Known Zero | | | | 8-CAPI | | | | | |
| | | | 19-Other | | | | | | |
| S/E Name | | | | | | | | | |

Respondent Name:___Phone:_____

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Reference Card A

The following is the FDA definition of a “valid veterinarian-client-patient relationship” (VCPR). States can have their own definition of a VCPR as well.

1. A veterinarian has assumed the responsibility for making medical judgments regarding the health of (an) animal(s) and the need for medical treatment, and the client (the owner of the animal or animals or other caretaker) has agreed to follow the instructions of the veterinarian;
2. There is sufficient knowledge of the animal(s) by the veterinarian to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s), and;
3. The practicing veterinarian is readily available for followup in case of adverse reactions or failure of the regimen of therapy. Such a relationship can exist only when the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of examination of the animal(s), and/or by medically appropriate and timely visits to the premises where the animal(s) are kept.