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 0579-0101. The time required to complete this information collection is estimated to average 5.5 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.

OMB APPROVED 0579-0101 EXP DATE XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES				SCRAPIE EPIDEMIOLOGY REPORT			
Flock ID Owner Name, Address, and Email Address		ail Address		Flock Location if Different			
Premises ID							
Telephone							
Inspector				Inspector ID		County	
Inspection Date Quarantine Number				Latitude		Longitude	
Type of Operation (c	heck all the	at apply and circle primary acti	vity)	IN	VENTORY	SHEEP	GOATS
Breeder (seed stock)				Adult males	(≥12 mos)		
Comme	ercial (bree	eder)		Adult female	es (≥12 mos)		
Feeder				Males (<12	mos)		
Dairy				Females (<			
Other _ Veterinary Practition				Wethers (<1	/ 12 mos)		
Species		nant Breed(s)		Wethers (≥	12 mos)		
				TOTAL			
Number of sheep or goats currently in the flock with clinical signs suggestive of scrapie: sheep: goats: Clinical signs suggestive of scrapie observed by the producer or inspector (check all that apply):							
() No clinical signs of scrapie () Excitable, aggressive, or other abnormal behavior () Incoordination () Nibbling and licking movements () Weight loss () Convulsions () Intense itching/rubbing with wool loss () Skin abrasions, from rubbing () Involuntary muscle tremors () Other (describe):							
Approximate date when the first clinical signs suggestive of scrapie were seen:							
4. Total number of s	sheep and/	or goats that have shown clinic	cal signs sugge	stive of scrapie	in the past 5 years	:	
5. Number of adult of	deaths fron	n all causes over the last year:		_•			
6. Number of rams with official genotype results:; number with unofficial genotype results: (Attach copies of genotype records, if available.)							
7. Number of ewes with official genotype results:; number with unofficial genotype results: (Attach copies of genotype records, if available.)							
8. Check the type of	f records ke	ept:					
 () Record of official ID applied () Sex () Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, dairy, or fiber) () Date of birth or estimated month and year of birth () Contemporary lambing groups () Animal sire and dam Information () Sales information – ID, buyer, date sold () Purchase information – ID, seller, date purchased () Other (describe): 							

9. I	Description	of lambing/kidding facilities:				
10.		is the lambing/kidding area cleaned and disinfected and describe process? If dates of cleaning and disinfection were recorded, attach				
	copy of dis	infection records.				
11	Ara sanar	ate contemporary lambing/kidding groups used?				
11.	Ale sepaid	YES (indicate in inventory which animals are in each group and attach				
		supporting documentation)				
		cappering account,				
		□ NO				
12.	Method of	disposal of placentas:				
13.	Method of	disposal of dead sheep/goats:				
14.	Use an at	tachment to document the following information on each laboratory confirmed case and/or clinically suspicious animal currently in the				
	flock. Ad	ditionally, complete as much information as possible on any clinical suspects that have resided in the flock over the last 5 years.				
	•	Official ID and any secondary identification or marks				
	•	Sex				
	•	Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, milk, or fiber)				
	•	Born on farm or purchased				
	•	Date of birth or estimated month and year of birth				
	•	If purchased, purchase date, flock ID of seller, seller name and address, and a description of the documentation of the purchase.				
	•	Genotype, if known (attach documentation)				
	•	Date clinical signs noted				
	•	Confirmed case or clinical suspect				
	•	If confirmed case, date laboratory confirmed; if suspect clinical signs observed If female: lambing date(s), lambing location(s) and all available information on offspring (current location, sales records, birth date, sex,				
	•	official or other ID, identifying marks or characteristics, sire, sire's genotype if known, etc),				
	•	Any additional comments on the animal's history				
15.		tachment to document the following information on the offspring of all female scrapie confirmed cases and the animal's disposition.				
	•	Official ID, and any secondary identification or marks				
	•	Sex				
	•	Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, milk, or fiber)				
	•	Date of birth or estimated month and year of birth				
	•	Genotype, if known (attach documentation)				
	•	Official ID of dam and sire				
	•	Genotype of sire, if known (attach documentation)				
	•	Disposition (i.e. living on farm, sold, dead or euthanized), and if transferred name and address of new owner				
40	11 1	Any additional comments on the animal's history.				
16.		tachment to document the following information on all purchased sheep/goats acquired at least 2 yrs before the first positive animal was				
	diagnosed and up to 5 years before the positive animal was born or acquired unless a source flock has been identified. If a source flock has been identified (i.e., the infected animal was purchased and under 72 months of age), you can limit this information to the animals acquired from the					
	source flo					
	•	Official ID and any secondary identification or marks				
	•	Sex				
	•	Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, milk, or fiber)				
	•	Date of birth or estimated month and year of birth				

Genotype, if known (attach documentation)
 Date of purchase, flock ID of seller, seller name and address, and a description of the documentation of the purchase
 Any additional information on the purchase history

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- 17. Use an attachment to document the following information on all sheep/goats sold or otherwise disposed of since the positive animal(s) was born or acquired (Do not include lambs less than 12 months of age sold directly to slaughter).
 - Official ID and any secondary identification or marks

 - Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, milk, or fiber)
 - Date of birth or estimated month and year of birth
 - Genotype, if known (attach documentation)
 - Date of sale, flock ID of buyer, buyer name and address, and a description of the documentation of the sale
 - Any additional information on the sale history
- 18. Use an attachment to document the following information on the current flock inventory.
 - Official ID and any secondary identification or marks

 - Species and breed (or cross), or if breed is unknown, face color (sheep) or type (goats, i.e. meat, milk, or fiber)
 - Born on farm or purchased
 - Date of birth or estimated month and year of birth
 - If purchased, purchase date, flock ID of seller, seller name and address, and a description of the documentation of the purchase.
 - Genotype, if known (attach documentation)
 - For females, pregnancy status open, exposed to ram, late gestation and genotype of sire, if known

Investigator Signature	Title	Date

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