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| According to the Paperwork Reduction Act of 1995, no persons are 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 0579-0420. The time required to complete this information collection is estimated to average 3 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. | **OMB Approved**0579-0420EXP: XX/XXXX |
| **UNITED STATES DEPARTMENT OF AGRICULTURE****ANIMAL AND PLANT HEALTH INSPECTION SERVICE****VETERINARY SERVICES****NATIONAL ANIMAL HEALTH MONITORING SYSTEM****2150 CENTRE AVE, BLDG B****FORT COLLINS, CO 80526** | **NAHMS Bison 2022 Post-Deworming Fecal Parasite Kit B Collection Record** |

Twelve to 30 days after deworming, collect a post-deworming fecal sample from the same animals that were sampled in Kit A. You will need to ship these samples within 24 hours of collection. Collect and ship samples Sunday through Wednesday.

Step-by-Step Guide to Sample Collection

Please follow the detailed instructions provided below for collection and submission of samples for this study.

1. Freeze ice packs 24 hours ahead of time.
2. Turn a Whirl-Pak® bag inside out over your hand.
3. Pick up a small handful (golf ball size) of fresh fecal material (not old pre-deworming samples) from the top of the pile to prevent contamination from the ground. One fecal ball is adequate. Include diarrhea samples.
4. Collect the samples from the same specific bison or group of bison as you did in kit A. For example, sample 1 on the pre-deworming Fecal Parasite Kit A Form should match sample 1 on the Post-Deworming Fecal Parasite Kit B Form.
5. Turn the bag right side out with your other hand and squeeze extra air out of the bag. Roll the bag twice and twist closed to prevent leakage.
6. Place a preprinted label on the sample bag. Do not use the label to seal the bag. Write the Bison Unique ID and Farm ID on each label. Write the Bison Unique ID in the corresponding row for Bison sample # on the table in Post-Deworming Fecal Parasite Kit B Form.
7. Cool samples down as soon as possible. Refrigerate until they are shipped. **Do not freeze the samples.**
8. The Post-Deworming Fecal Parasite Kit B Form is printed on 2-part carbonless paper. Please write firmly with a ballpoint pen and make sure the information appears clearly on both copies.
	1. White— Place in box with samples.
	2. Yellow copy—Keep for your records

Completing the table in the Post-Deworming Fecal Parasite Kit B Form (attached)

1. FARM ID: This ID will be filled out for you and test results will refer to this unique ID number.
2. Kit ID: This number is printed on Box FP Kit B and on the labels for the sample bags.
3. Complete each column in the Post-Deworming Fecal Parasite Kit B Form for each bison sampled. If you don’t know the answer, write DK. If you decline to answer, please draw a line through the cell so that we know you didn’t just forget to answer that question. As with Kit A, if you cannot identify specific animal samples, please describe the group of animals that the sample is from in the collection form row for that group.
4. Place the white copy of the collection form on top of the Styrofoam lid and seal the box with packing tape.
5. Keep the yellow copy of the collection form for your records.
6. **Ship samples with frozen ice packs** **no more than 24 hours** after collecting the samples. **Ship Sunday through Wednesday**. Do not collect samples on Thursday-Saturday.
7. Use the enclosed preprinted, prepaid FedEx label addressed to SDSU.

Contact FedEx to locate a convenient drop-off location that accepts priority overnight packages.

1–800–gofedex (1–800–463–3339) or www.fedex.com

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| Sample # | Bison unique ID\* | Age(months OR years) | Gender(see codes below) | Condition of fecal sample1=Normal 2=Soft/cowpie-like3=Watery, 4=bloody5=Other (describe) | Conditions in last 30 Days1=Diarrhea2=Weight loss3=Poor hair coat4=Other (describe) | Grazing History1=Previous 30 days, grazing at all times2=Previous 30 days, grazing periodically3=No grazing in previous 30 days, but grazing in prior 12 months4=No grazing in previous 12 months  | Grazing LivestockIn the previous 12 months, did the bison graze with the following types of animals? Select all that apply:1= Cattle2= Goats3=Sheep 4=Horses/Equids5=Other, specify | Pasture HistoryIn the previous 12 months: 1= 0 days on pasture2= grazed continuously on a single pasture3= rotated through 2 pastures4= rotated through 3 or more pastures |
| 1 |  |  \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 2 |  | \_\_\_ mo or \_\_\_ yr |  |  |  |  |  |  |
| 3 |  |  \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 4 |  | \_\_\_ moor  \_\_\_ yr |  |  |  |  |  |  |
| 5 |  | \_\_\_ moor \_\_\_ yr |  |  |  |  |  |  |
| 6 |  | \_\_\_ mo or \_\_\_ yr |  |  |  |  |  |  |
| 7 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 8 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 9 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 10 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| Sample # | Bison unique ID\* | Age(months OR years) | Gender(see codes below) | Condition of fecal sample1=Normal 2=Soft/cowpie-like3=Watery, 4=bloody5=Other (describe) | Conditions in last 30 Days1=Diarrhea2=Weight loss3=Poor hair coat4=Other (describe) | Grazing History1=Previous 30 days, grazing at all times2=Previous 30 days, grazing periodically3=No grazing in previous 30 days, but grazing in prior 12 months4=No grazing in previous 12 months | Grazing LivestockIn the previous 12 months, did the bison graze with the following types of animals? Select all that apply:1= Cattle2= Goats3=Sheep4=Horses/Equids5=Other, specify | Pasture HistoryIn the previous 12 months: 1= 0 days on pasture2= grazed continuously on a single pasture3= rotated through 2 pastures4= rotated through 3 or more pastures |
| 11 |  |  \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 12 |  | \_\_\_ mo or \_\_\_ yr |  |  |  |  |  |  |
| 13 |  |  \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 14 |  | \_\_\_ moor  \_\_\_ yr |  |  |  |  |  |  |
| 15 |  | \_\_\_ moor \_\_\_ yr |  |  |  |  |  |  |
| 16 |  | \_\_\_ mo or \_\_\_ yr |  |  |  |  |  |  |
| 17 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 18 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 19 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |
| 20 |  | \_\_\_ mo or\_\_\_ yr |  |  |  |  |  |  |

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| 21 |  |  \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 22 |  | \_\_\_ mo  \_\_\_ yr |  |  |  |  |  |  |
| 23 |  |  \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 24 |  | \_\_\_ mo  \_\_\_ yr |  |  |  |  |  |  |
| 25 |  | \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 26 |  | \_\_\_ mo  \_\_\_ yr |  |  |  |  |  |  |
| 27 |  | \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 28 |  | \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 29 |  | \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |
| 30 |  | \_\_\_ mo \_\_\_ yr |  |  |  |  |  |  |