

Item	Description/Comments/List of Values (LOV)
Collected by:	Person who collected samples for submission. Could be accredited veterinarian or pathologist at diagnostic lab. If unknown who collected samples, enter name of submitter, person whose name is in block 1 of the VS 10-4.
Designated Scrapie Epidemiologist	State or Federal DSE. If DSE is unknown at the time of collection, enter UNKNOWN for all required fields in this block. Information can be entered/edited when submission is created in VSLS.
Reason for Test	LOV: Exposed, High-risk trace to flock, Infected or Source RSSS positive, Imported, Missing exposed ewe, Infected or source Not RSSS, Other, Owner Request, Positive, Flock Recertification, Retest, Surveillance, Suspected, Non clinical
Flock Status	LOV: SFCP, Exposed, Infected, Source, Investigation, Other
Animal Status	Necropsy or Live
# of Animals in Flock	While not a required field, adds helpful information about the flock.
Total # of Samples	Number of samples in this submission
Tested All Eligible Animals: Yes or No	Response is based on activity or investigation. For example, if you plan to test all the animals in Pen 1 today and all the animals in Pen 2 next week, you would respond "No." In most cases, select "Yes."
Contacts	Contact information for individual other than owner or person submitting the animal (veterinarian)
Remarks	Include any additional relevant information.
Breed	Refer to breed/breed code lists
Face color: Sheep	LOV: Black, White, Mottled, Red, Hair sheep, Gray or mouse brown, Other--specify in remarks, or Not Specified
Type: Goats	LOV: Dairy, Fiber, Meat, or Multipurpose
Addition Type	Natural addition or purchased
Sex	LOV: Male, Female, Male Castrated and Not Specified
Age	Write down actual (recorded) age or estimated in months or years
Designation	Positive, Suspect, Exposed, Missing ewe, no designation – less specific signs, no designation – non-clinical
Comments	Clinical signs, history, or any other relevant information