Print Date		Livestock Disease Investigation Form			
Print Time		Livestock Disease Investigation Form			
Language	English				

Case ID:	Field Accession ID:
Diagnoses	
Case Status	Report Type
Case Classification	Outbreak ID
Session ID	_
Reported By	Investigator Name
Initial Report Date	Assigned Date
Entered By	Investigation Date
Date Entered	
Farm Details	
Farm Name:	_
Farm ID:	_
Farm owner:	_
Phone:	Address of holding:
Fax:	
E-mail:	Latitude/Longitude//
Ownership Structure	

Herd/Species Info

Herd	Species	Total	Dead	Sick	Note (Include breed)	Start Of Signs

Epidemiological Information	Epiden	niolo	gical	Inform	nation
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Spec	ies ep	idemiol	logical	and	clinical	investig	jation
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Control measures	put in	place in	response to	the outbreak
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Clinical Diagnoses

	Diagnosis	Code	Date
Tentative Diagnosis - 1			
Tentative Diagnosis - 2			
Tentative Diagnosis - 3			
Final Diagnosis			

Vaccination Info

Diagnosis Name	Date	Species	Vaccinated #	Туре	Route	Lot #	Manufaturer	Comments

Sample Receiving/Registration

Sample Type	Field Sample ID	Animal ID	Species	Collection Date	Accession Date	Sample Condition	Comment	Collected By Insitute	Collected By Officer	Sent to Organization

Additional Test Requested and Sample Notes

Animals

Herd ID	Animal ID	Species	Age	Sex	Clinical Signs	Status

Penside Tests

Test Name	Field Sample ID	Sample Type	Species	Result