

Print Date		Livestock Disease Investigation Form
Print Time		
Language	English	

Case ID:

Field Accession ID:

Diagnosis			
Case Status		Report Type	
Case Classification		Outbreak ID	
Session ID			
Reported/Investigated by		Officer Name	
Initial Report Date		Quarantine Start Date	
Entered By		Quarantine End Date	
Date Entered			

Facility Details

Ship Name			
Facility/Farm ID			
Owner Details			
Phone:		Address of holding:	
Customs Declaration Form#			
Import Permit#		Latitude/Longitude	_____/____
Ownership Structure			

Herd/Species Info

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

Epidemiological Information

Species	Number of animals	When	Source
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Tracing

Is there a possibility of contact with wild animals?

If yes, species

Has the disease appeared in the neighborhood before?

Has the disease appeared before on same farm?

Has the disease spreaded to other animal farms located near the outbreak?

Species	Number of animals	When	Destination
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Dead animal disposal method

Suspected source of the outbreak(s) or origin of infection

Control measures put in place in response to the outbreak

Quarantine

Number destroyed

Number slaughtered

Movement control

Vaccination

Treatment

Clinical Diagnoses

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

Vaccination Info

Diagnosis Name	Date	Species	Vaccinated #	Type	Route	Lot #	Manufacturer	Comments

Sample Receiving/Registration

Sample Type	Field Sample ID	Animal ID	Species	Collection Date	Accession Date	Sample Condition	Comment	Collected By Institute	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

