The Prevention and Control of Infectious and Contagious Diseases in Animals (Form of Vaccination Certificate, Manner of Post Mortem Examination and Disposal of Carcass) Rules, 2010

UNION OF INDIA India

The Prevention and Control of Infectious and Contagious Diseases in Animals (Form of Vaccination Certificate, Manner of Post Mortem Examination and Disposal of Carcass) Rules, 2010

Rule

THE-PREVENTION-AND-CONTROL-OF-INFECTIOUS-AND-CONTAGIO of 2010

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The Prevention and Control of Infectious and Contagious Diseases in Animals (Form of Vaccination Certificate, Manner of Post Mortem Examination and Disposal of Carcass) Rules, 2010Published vide Notification New Delhi, the 14th December, 2010Ministry of Agriculture(Department of Animal Husbandry, Dairying and Fisheries)G.S.R. 974(E). - In exercise of the powers conferred by section 42 of the Prevention and Control of Infectious and Contagious Diseases in Animals Act, 2009 (27 of 2009), the Central Government hereby makes the following rules, namely:-

1. Short title and commencement.

(1) These rules may be called the Prevention and Control of Infectious and Contagious Diseases in Animals (Form of Vaccination Certificate, Manner or Post Mortem Examination and Disposal of Carcass) Rules, 2010.(2) They shall come into force on the date of their publication in the Official Gazette.

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2. Definitions.

(1)In these rules unless the context otherwise required;(a)'Act' means the Prevention and Control of Infectious and Contagious Diseases in Animals Act, 2009 (27 of 2009);(b)'Form' means Form appended to these rules;(c)'section' means a section of the Act.(2)Words and expressions used in these rules and not defined but defined in the Act shall have the same meaning as respectively assigned to them in the Act.

3. Form of vaccination certificate.

(1)The Director shall notify the institutions for agencies and persons competent to vaccinate the animals and issue vaccination certificate under section 9 of the Act in the controlled ares, free area or infected area.(2)The persons notified by the Director under sub-rule (1) for issuing vaccination certificate shall issue a vaccination certificate to the owner of the animal as early as possible but not exceeding three weeks from the date of vaccination and shall maintain proper record of vaccination.(3)The vaccination certificate for animals other than poultry shall be specified in Form A.(4)The vaccination certificate for poultry shall be as specified in Form B.(5)The vaccination certificate shall be bi-lingual of which one language shall be vernacular.

4. Manner of conducting examination and post mortem.

(1)The veterinarian or the veterinary officer shall-(a)arrange the examination and post mortem in proper lighting condition and at a secluded place either at the owner's premises or the nearest location, as considered appropriate by the competent officer.(b)arrange collection of appropriate samples for confirmation of the scheduled notified disease and dispatch the samples to appropriate laboratories.(c)arrange disposal of carcass as specified in rule 5 of these rules.(d)arrange disinfection of the premises and the place where post mortem examination was conducted.(e)provide a copy of the post mortem report to the owner of the animal in Form C, and inform the Director if in the opinion of the Veterinarian or the Veterinary Officer, the death is caused by a scheduled notified disease.(2)No post mortem shall be conducted when the cause of death is to be Anthrax.

5. Disposal of the carcass of an animal infected with a scheduled notified disease.

(1)The carcass of an animal that has died of a scheduled notified disease, or the carcass of the animal euthanized under section 25, the owner of the animal shall dispose off the carcass either by burial, incineration or rendering.(2)The veterinarian shall supervise the burial or incineration, which shall be performed preferably at the premises of the owner of the animal or the nearest location, as considered appropriate by the competent officer.(3)The competent officer, if required, shall arrange transportation of the carcass of the infected animal in a secured vehicle to the site of the disposal and the vehicle used for transportation of the dead animal shall be properly cleaned and disinfected by the vehicle owner.(4)The veterinarian or the Veterinary Officer shall ensure that the disposal of

carcass is by any one of the following methods namely:-(a)Burial. - (i) the size of the pit for the burial shall be bigger than the size of the animal that allows all parts of the animal carcass to be buried in the burial pit and at least one metre of covering soil shall be used to cap the pit.(ii)a layer of five-centimetre lime shall be put at the bottom of the burial pit and again over the carcass before filling the soil.(iii)the pit for burial shall be at least twenty metres away from water course and two hundred and fifty metres away from well, bore-well or water spring used as a source of drinking water.(iv)the pit for burial shall not be in a seasonal water-logged or flood prone area.(v)for mass burial, the site shall be at least two hundred fifty metres away from human habitat.(b)Incineration. - (i) incineration shall be practiced only on-site by agencies and institutes that have adequate trained manpower in operating the rendering plant.(ii)the site identified for incineration shall be at least two hundred fifty metres away from human habitat.(c)Rendering. - (i) rendering shall be practiced only on-site by agencies and institutes that have adequate trained manpower in operating the rendering plant.(ii)the agency or the institute using rendering as a method of infected animal carcass disposal shall maintain proper records of each rendering cycle.(iii)the rendered product shall not be used as ingredient of animal feed.

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L)escri	ntion	Ω t	the	animal
Descri	puon	$\mathbf{o}_{\mathbf{I}}$	uic	amma

Sr	pecies (name of the spe	ecies)	Sex ((male	/female)

Identification details (ear-tag number/tattoo or other form of

markings)

Name of the owner (full name of the owner of the animal)

Address of the owner (full address of the animal owner)

Owner's contact phone

number

Details of vaccination

Name of the vaccine	(vaccine, name)	Vaccine production date	(date of production of the used vaccine batch)
Type of vaccine	(live, inactivated, adjuvant type)	Vaccine expiry date	(expiry date of the vaccine batch used)
Vaccine batch No.	(batch no. of the vaccine)	Vaccinated by	(name of the agency)
		Vaccinated by	(name of the vaccinator)

Name of the (vaccine manufacturer's

manufacturer name)

Vaccination certificate

issue details

Date of issue Place of issue

SignatureName and designationRegistration number with StateVeterinary Council/Veterinary Council of IndiaOfficial SealForm BDepartment of Animal HusbandryGovernment ofVaccination Certificate For PoultryCertificate No. (unique vaccination certificate number)Valid from (date of vaccination) to (date till valid)This is to certify that the Poultry or the following description have been vaccinated against (name of the disease or diseases) on (date of vaccination) by using a vaccine the details of which arc given below:

Details of vaccinated

poultry

Poultry species (chicken, duck, quail etc.) Poultry type layers, broilers, breeder etc.)

Marking details for

No. of birds vaccinated (number immunized) identification of vaccination (painting, wing leg band etc.)

Name of the (full name of the owner of the ownerAddress of the animal)(full address of the

owner animal owner)

Owner's contactPhone

number

Commercial poultry establishment (yes/no) Backyard poultry (yes/no)

Details of vaccination

Name of the vaccine (vaccine name)

Vaccine (date of production of the production date used vaccine batch)

Vaccine expiry (expiry date of the vaccine

Type of vaccine adjuvant type) date batch used)

Vaccine batch No. (batch no. of vaccine) Vaccinated by (name of the agency)

Name of the manufacturer's manufacturer vaccinated by manufacturer (vaccine manufacturer's name) (name of the vaccinator)

Vaccination certificate

issue details
Date of issue

Place of issue

SignatureName and designationRegistration number with StateVeterinary Council/Veterinary Council of IndiaOfficial SealForm CDepartment of Animal HusbandryGovernment of.......Post

Prevention and Control of Infectious and Contagious Diseases in Animals (Form of Vaccination Certificate, Manner of Post Mortem Examination and Disposal of Carcas Mortem Examination Report For Animals Other Than Poultry (2)(3)(4) PM conducted at PM report No. (location) PM date PM time Ref. by Ref. date 1. Animal details **Species Breed** Age (years) Sex Identification No./Mark Any other Colour History of illness and treatment Date of death Time of death 2. Animal owner details Name Address Contact number 3. External examination Rigor mortis **External orifices** Condition of the carcass Udder Visible Mucous Hair coat membranes Bones and joints Wound/turmor (location and dimension) Other observations 4. Internal examination Thoracic Cavity Ribs Cartilage Pleura Diaphragm Larynx Trachea Bronchi Lungs Lymph nodes Pericardium

Endocardium Myocardium

Aorta

Oesophagus
Other observations
Abdominal cavity
Peritoneum
Fluid (colour, quantity and consistency)
Lymph nodes Rumen/Stomach/
ReticulumOmasumAbomasumSmall intestineLarge
intestineMesenteryPortal veinsLiver
Gall bladderPancreas
Kidney & AdrenalsUreters
Urinary BladderSpleen
Other observations
Pelvic cavity
Testicle
Epididymis
Spermatic cord
Scrotum
Prostrate
Penis
Vulva
Cervix
Vagina
Uterus
Ovary
Other observations
a. Head and Neck
Scalp
Skull bones
Meninges
Brain
Spinal cordCervical vertebraThyroids/Parathyroids
Other observations
5. Specimen collection details Specimen type, Preservative sused Tests
requiredLaboratory address
6.Special observation or abnormalities

Auricles Ventricle 7. Opinion as to the probable cause of death

8. Post Mortem Report Issue Details

Date of issue

Place of issue

SignatureName and designationRegistration number with State Veterinary Council/Veterinary Council of IndiaOfficial SealForm DDepartment of Animal HusbandryGovernment of...........Post Mortem Examination Report For Poultry

PM report No. PM conducted at (location of death/other)

Date of death

PM date

Ref. by

Time of death

PM time

Ref. date

1. Details of poultry

Specied Breed Age Sex

Total flock number Number died

Number of dead birds on which PM was conducted

Identification mark/Number if any

History of illness and treatment

2. Owner details

Name

Address

- 3. Nutritional details
- 4. Post Mortem details
- (a) External appearance
- (b) Subcutaneous tissue and musculature
- (c) General observations after opening the carcass
- (d) Respiratory system
- (e) Cardiovascular system
- (f) Digestive system
- (g) Urinary system
- (h) Genital system
- (i) Immune system
- (j) Nervous system
- (k) Miscellaneous observations
- 5. Opinion as to the probable cause of death
- 6. Specimen collection details

Specimen type

Tests required

Laboratory address

7. PM report issue details

PM report reference No.

Date of issue

Place of issue

SignatureName and designationRegistration number with State Veterinary Council/Veterinary Council of IndiaOfficial Seal