

# shorter\_bedding and mastitis risk

**Date completed**

yyyy-mm-dd

hh:mm

**1. Farm Name**

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**2. Farm owner**

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**Mobile number of owner**

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**3. Farm manager (if not owner)**

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**Mobile number of manager**

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**4. Farm Address: Street/road number**

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**Farm address: City**

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**Farm address: State**

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**Farm address: Zipcode**

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**Farm address: Email**

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**5. Herd Vet: Name**

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**Herd vet: Email**

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**Herd vet: Phone**

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**6.a) How big of a problem is mastitis in general on your farm?**

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**6.b) Do you have any cows in your herd that you aren't actively TREATING, but that you're currently managing for chronic mastitis?**

*If yes, please describe. If answer to 6b was "Yes," complete 6c through 6.f.iv. If "No," skip to 6h.*

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**6.c) How do you identify these cows that may have chronic mastitis?**

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**6.d) How many cows are you currently managing with chronic mastitis, as a percent of your milking herd?**

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**6.e) Do you ever culture these cows?**

*If yes, please describe what pathogens have been identified.*

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**6.f.i) How do you manage these cows with chronic mastitis?**

*Depending on their answer to 6.f.i, the interviewer may need to ask questions 6.f.ii through 6.f.iv or may skip to 6.g.*

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**6.f.ii.) If not specifically addressed in 6.f.i: Are these cows housed differently than the rest of the herd?**

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**6.f.iii.) If not specifically addressed in 6.f.i: Are these cows milked in a different way than the rest of the herd?**

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**6.f.iv.) If not specifically addressed in 6.f.i: Is the milk from these cows handled in a different way than the rest of the herd?**

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**6.g) What do you do on your farm generally to reduce a cow's risk of getting mastitis?**

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**6.h) How do you manage bedding on your farm to reduce a cow's risk of mastitis?**

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**6.i) Is a milk quality premium paid by your milk cooperative a motivator for your milking hygiene and mastitis control practices?**

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**7.a) How do you recognize or identify a cow with a case of CLINICAL mastitis?**

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**7.b.i) How do you recognize or identify a cow with a case of SUBCLINICAL mastitis?**

*Some ways you might identify subclinical mastitis include CMT test, other cowside somatic cell count test, or monthly DHIA somatic cell count scores. Do you use any of these to recognize subclinical mastitis?*

*Some ways you might identify subclinical mastitis include CMT test, other cowside somatic cell count test, or monthly DHIA somatic cell count scores. Do you use any of these to recognize subclinical mastitis?*

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**7.c.i) Do you keep a record of clinical mastitis events on farm? (check one)**

- ☐ Always
- ☐ Sometimes
- ☐ Temporarily until milk is good
- ☐ Never

**7.c.ii) If records are kept, how do you record clinical mastitis events? (check one)**

- ☐ Software (e.g. on-farm record keeping program)
- ☐ Paper
- ☐ Other (describe on written survey)

**7.c.iii) If mastitis treatment records are kept, what details do you record about a clinical mastitis event? (E.g. cow, quarter, date, treatment given, culture result if available, days treated, other) (Describe on written survey)****7.d) Number of people recognizing or identifying a case of mastitis on the farm:**

**7.e) Do you routinely perform bacteriological culture of mastitic milk? (check one)**

- ☐ Never
- ☐ Always
- ☐ Sometimes

**7.f) Do you routinely perform bacteriological culture of high somatic cell count cows? (check one)**

- ☐ Never
- ☐ Always
- ☐ Sometimes

**7.g) Do you routinely perform bacteriological culture of fresh cows? (check one)**

- ☐ Never
- ☐ Always
- ☐ Sometimes
- ☐ Only if there's an issue/cause for concern

**7.h) Do you routinely perform bacteriological culture of cows before dry-off? (check one)**

- ☐ Never
- ☐ Always
- ☐ Sometimes
- ☐ Only if there's an issue/cause for concern

**7.i) If you culture milk from mastitic cows, where is this done? (check one)**

- ☐ Reference lab (state, university, or private tester such as DHIA)
- ☐ Local vet clinic
- ☐ On-farm culture
- ☐ Never culture milk from mastitic cows
- ☐ Other (describe on written survey)

**8.a) Milking schedule for the majority of the herd (check one)**

- ☐ 2X
- ☐ 3X
- ☐ Other (describe on written survey)

**8.b.i) Milking system (check one)**

- ☐ Robot (Automated milking system)
- ☐ Parlor
- ☐ Tie stall

**8.b.ii) If milked in a parlor, what kind? (check one, if combination of multiple types describe in "Other")**

- ☐ Rotary
- ☐ Parallel
- ☐ Herringbone
- ☐ Swing
- ☐ Other (describe on written survey)

**8.b.iii) If milked in a parlor, are milking units routinely washed/sprayed off between uses? (check one)**

- ☐ Yes, routinely between milking individual cows
- ☐ Yes, routinely between milking individual pens or groups
- ☐ Occasionally, if the milking unit gets very dirty (e.g. splattered with manure)
- ☐ No, only at the completion of milking

**8.b.vi) If milked in a parlor, do you SPRAY the deck during milking? (check one)**

- ☐ After every turn of cows that comes through each side
- ☐ As needed throughout milking if it gets very dirty
- ☐ Only at the completion of milking
- ☐ Never spray the deck, even after milking

**8.b.v) If you SPRAY the deck during milking, do you ever do it when cows are still present, either entering or exiting a side? (check one)**

- ☐ Yes
- ☐ No
- ☐ Occasionally

**8.b.vi) If milked in a parlor, does anyone SCRAPE the deck during milking? (choose one)**

- ☐ After every turn of cows that comes through each side
- ☐ As needed throughout milking if it gets very dirty
- ☐ Only at the completion of milking
- ☐ Never scrape the deck, even after milking

**8.d.i) Do you pre-dip teats with a chemical disinfectant before milking? (check one)**

- ☐ Yes
- ☐ No

**8.d.ii) If yes, type of pre-dip disinfectant solution (check one)**

- ☐ Iodine
- ☐ Chlorhexidine
- ☐ Hydrogen peroxide
- ☐ Other (described on written survey)

**8.d.iii) Please provide the name of the pre-dip product used:**

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**8.e.i) Do you post-dip teats with a chemical disinfectant after milking? (check one)**

- ☐ Yes
- ☐ No

**8.e.ii) If yes, type of post-dip disinfectant solution (check one)**

- ☐ Iodine
- ☐ Chlorhexidine
- ☐ Hydrogen peroxide
- ☐ Other (described on written survey)

**8.e.iii) Please provide the name of the post-dip product used:**

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**8.f) Do milkers routinely fore strip teats as a part of udder prep (also called "starting a cow")? (Check one)**

- ☐ Yes
- ☐ No

**8.g.i) Are udders routinely wiped dry with any kind of towel prior to attaching the milking unit? (Check one)**

- ☐ Yes
- ☐ No

**8.g.ii) If yes, do you use paper (disposable) or cloth (reusable) towels? (Check one)**

- ☐ Paper
- ☐ Cloth

**8.g.iii) If yes, how many COWS are wiped with each towel? (check one)**

- ☐ One
- ☐ Two
- ☐ More than two
- ☐ Depends how dirty the udder is

**8.g.iv) If one towel per cow, how many TEATS do you routinely wipe with each towel? (check one)**

- ☐ One
- ☐ More than one
- ☐ Depends how dirty each teat is

**8.g.v) If you use cloth towels, describe how they are laundered (washed) and dried? (check one)**

- ☐ Yes, washed and dried
- ☐ Washed and used damp
- ☐ Other (describe on written survey)

**8.h.i) Do you clip or flame udders one or more times per lactation? (check one)**

- ☐ Yes
- ☐ No

**8.h.ii) If yes, how often on average do you clip or flame a cow's udder each year?**

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**8.i.i) Do you have any cows with docked tails? (check one)**

- ☐ Yes
- ☐ No

**8.i.ii) If yes, what percent of your adult cows would you estimate have docked tails? (% cows)**

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**8.j.i) Do you trim switches on tails? (check one)**

- ☐ Yes
- ☐ No

**8.j.ii) If yes, how frequently do you trim switches each year?**

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**8.k) Do milkers wear gloves (e.g. nitrile gloves) during milking? (check one)**

- ☐ Yes, all milkers, consistently
- ☐ Yes, some milkers, but not all, or inconsistent use
- ☐ No, no one on our farm wears gloves during milking
- ☐ Other (describe on written survey)

**9.a.i) Do you routinely use vaccines for mastitis control (e.g. J-5, J-VAC, or ENDOVAC-Bovi)? (check one)**

- ☐ Yes
- ☐ No

**9.a.ii) If yes, product name?**

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**9.b.i) Do you dry cows off between lactations? (check one)**

- ☐ Yes
- ☐ No

**9.b.ii) If yes, how many days on average are they dry? (number of days)**

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**9.c.i) Do you use any sort of intramammary product at dry-off? (check one)**

- ☐ Yes
- ☐ No

**9.c.ii) If yes, product name?**

---

**9.d.i) Do ever have cases of mastitis in your dry cows? (check one)**

- ☐ Yes
- ☐ No

**9.d.ii) If yes, how many cases on average per year? (# cases/year)**

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**10.a.i) What do you primarily feed your lactating cows during the winter? (check any that apply)**

- ☐ Total mixed ration
- ☐ Component fed
- ☐ Dried forage, not ensiled
- ☐ Ensiled forage
- ☐ Other (describe on written survey)



**10.b.i) Do you work with a nutritionist or other consultant to analyze your ration? (check one)**

- ☐ Yes
- ☐ No

**10.b.ii) If yes, how often?**

---

**10.c.i) Do you feed any supplemental minerals with your ration containing vitamin E and selenium? (check one)**

- ☐ Yes
- ☐ No
- ☐ Unsure
- ☐ Other (describe on written survey)

**10.c.ii) If yes, product name or name of mill if product name not known?**

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**10.d.i) Do you regularly supplement DRY COWS with an injectable vitamin supplement containing selenium and vitamin E, such as MuSe or Multimin?**

- ☐ Yes
- ☐ No
- ☐ As needed, if animal is sick
- ☐ Other (describe on written survey)

**10.d.ii) If yes, product name used:**

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**10.d.iii) If yes, AMOUNT given to each animal:**

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**10.d.vi) If yes, FREQUENCY supplement is given to each animal:**

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**10.e.i) Do you regularly supplement CALVES with an injectable vitamin supplement containing selenium and vitamin E, such as BoSe or Multimin?**

- ☐ Yes
- ☐ No
- ☐ As needed, if animal is sick
- ☐ Other (describe on written survey)

**10.e.ii) If yes, product name used:**

---

**10.e.iii) If yes, AMOUNT given to each animal:**

---

**10.e.vi) If yes, FREQUENCY given to each animal:**

---

**10.f) How do lactating animals get water when they are inside your WINTER housing system? (check one)**

- ☐ Individual water bowls
- ☐ Troughs
- ☐ Other (describe on written survey)

**10.g) What is the source of drinking water in the WINTER for lactating cows? (check one)**

- ☐ Well
- ☐ Municipal
- ☐ Surface
- ☐ Other (describe on written survey)

**10.h.i) Do you ever test the water for lactating cows for levels of bacteria, nitrates, or other trace elements? (check one)**

- ☐ Yes
- ☐ No

**10.h.ii) If yes, how often?**

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**11.a.i) Do employ any fly control measures for lactating cows during the summer months? (check one)**

- ☐ Yes
- ☐ No

**11.a.ii) If yes, what kind? (check any that apply)**

- ☐ Fly tape
- ☐ Predator wasps
- ☐ Fly traps
- ☐ Dust/paint/spray cows with fly repellent
- ☐ Other (describe on written survey)

**11.a.iii) If you use a fly-repellent that is applied directly to cows, please list all the product(s) you use:**

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**11.b) Do you feel like you have an issue with flies inside the barn during the winter months? (check one)**

- ☐ Yes
- ☐ No

**11.c) Where do cows typically have their calves? (check any that apply)**

- ☐ Designated calving pen for ONE cow at a time
- ☐ Designated calving pen with MULTIPLE cows at a time
- ☐ On the same pack with other cows, where she normally lives
- ☐ In her stall
- ☐ Pasture
- ☐ Other (describe on written survey)

**11.d.i) Typically, do calves nurse on their dams before they are removed? (check one)**

- ☐ Yes
- ☐ No

**11.d.ii) If yes, how long on average? (check one)**

- ☐ Few minutes
- ☐ Few hours
- ☐ Few days
- ☐ Other (describe on written survey)

**11.e) Do you feed waste from mastitic cows or high cell count cows to calves? (check one)**

- ☐ Yes, PASTEURIZED waste milk from high cell count cows and mastitic cows
- ☐ Yes, PASTEURIZED but only from high cell count cows
- ☐ Yes, UNPASTEURIZED waste milk from high cell count cows and mastitic cows
- ☐ Yes, UNPASTEURIZED but only from high cell count cows
- ☐ No waste milk from mastitic or high cell count cows is fed to calves
- ☐ Other (describe on written survey)

**11.f) What are pre-weaned calves fed? (check all that apply)**

- ☐ Milk replacer
- ☐ Whole, saleable milk from bulk tank or individual cow
- ☐ Use a nurse cow
- ☐ Unpasteurized waste milk (non-saleable milk) from mastitic or high cell count cows
- ☐ Pasteurized waste milk (non-saleable milk) from mastitic or high cell count cows
- ☐ Other (describe on written survey)

**11.g) If you use a nurse cow to feed calves, do you know the mastitis status of this cow?**

- ☐ Yes, nurse cow is a problem mastitis cow
- ☐ Yes, she does not have mastitis best to my knowledge
- ☐ No, do not know the mastitis status of the nurse cow
- ☐ Other (describe on written survey)

**12.a.i) Where are LACTATING cows housed during the WINTER on your farm? Please indicate every type of housing you use for them in winter. If it's a combination, please estimate the percent of time on average over a 24-hour period they spend in each housing component (RECORD ON WRITTEN SURVEY).**

- ☐ Free stall
- ☐ Tie stall
- ☐ Loose housing: PACK WITH BEDDING
- ☐ Loose housing: DRY LOT/PAD NO BEDDING

**12.a.ii) Where are DRY cows housed during the WINTER on your farm? Please indicate every type of housing you use in winter. If it's a combination, please estimate the percent of time on average over a 24-hour period they spend in each housing component (RECORD % ON WRITTEN SURVEY).**

- ☐ Free stall
- ☐ Tie stall
- ☐ Loose housing: PACK WITH BEDDING
- ☐ Loose housing: DRY LOT/PAD NO BEDDING

**12.b.i) Do lactating and dry cows have access to outside paddock or exercise yard during the winter? (Check one)**

- ☐ Yes
- ☐ No

**12.b.ii) If Yes, on average, what is the number of hours outside per day:**

---

**12.b.iii) Describe their outdoor turn-out space:**

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**12.b.iv) Do you ever clean your outdoor turn-out space?**

- ☐ Yes
- ☐ No
- ☐ Other (describe on written survey)

**12.b.v) If you clean your outdoor turn-out space, how often do you do it?**

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**12.b.vi) Please take a picture of their outdoor turn-out space:**

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**12.c) When was your current winter housing system constructed?**

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**12.d) Describe the quality of the ventilation of your winter housing using the following scale:**

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

**13.a.i) Lactating: Estimated depth of the bedding:**

---

**13.b.i) Lactating: Frequency of scraping manure from back of stall surface:**

---

**13.c.i) Do you have a gutter behind the cows, or just an evenly-graded alleyway?**

- ☐ Gutter
- ☐ No gutter, evenly-graded alleyway
- ☐ Other (describe on written survey)

**13.d.i) Lactating: If you have an evenly-graded alleyway behind the cows, how do you clean it?**

- ☐ Continuous automated scraper
- ☐ Skid steer or other similar equipment
- ☐ Slatted floors
- ☐ Flush system
- ☐ By hand
- ☐ Other (describe on written survey)

**13.e.i) Lactating: If you have a gutter behind the cows, how often do you run the gutter cleaner?**

---

**13.f.i) Lactating: Frequency of adding new bedding material to the stalls:**

---

**13.g.i) Lactating: If you use DEEP BEDDING in a free or tie stall, has the bedding ever been completely dug out and removed, then replaced (e.g. removing the entire back third of bedding from free stalls)? (Check one)**

- ☐ Regularly
- ☐ Infrequently
- ☐ Never
- ☐ Not applicable, don't deep bed in the free or tie stall

**13.h.i) Lactating: If deep bedding removed on a regular schedule, how frequently does this occur?**

---

**13.i.i) Lactating: If deep bedding removed on a regular schedule OR infrequently, when was the date last completed?**

---

**13.j.i) Do you have mattresses in your stalls?**

- ☐ Yes
- ☐ No

**13.a.ii) Dry: Estimated depth of the bedding:**

---

**13.b.ii) Dry: Frequency of scraping manure from back of stall surface:**

---

**13.c.ii) Dry: Do you have a gutter behind the cows, or just an evenly-graded alleyway?**

- ☐ Gutter
- ☐ No gutter, evenly-graded alleyway
- ☐ Other (describe on written survey)

**13.d.ii) Dry: If you have an evenly-graded alleyway behind the cows, how do you clean it?**

- ☐ Continuous automated scraper
- ☐ Skid steer or other similar equipment
- ☐ Slatted floors
- ☐ Flush system
- ☐ By hand
- ☐ Other (describe on written survey)

**13.e.ii) Dry: If you have a gutter behind the cows, how often do you run the gutter cleaner?**

---

**13.f.ii) Dry: Frequency of adding new bedding material to the stalls:**

---

**13.g.ii) Dry: If you use DEEP BEDDING in a free or tie stall, has the bedding ever been completely dug out and removed, then replaced (e.g. removing the entire back third of bedding from free stalls)? (Check one)**

- ☐ Regularly
- ☐ Infrequently
- ☐ Never
- ☐ Not applicable, don't deep bed in the free or tie stall

**13.h.ii) Dry: If deep bedding removed on a regular schedule, how frequently does this occur?**

---

**13.i.ii) Dry: If deep bedding removed on a regular schedule OR infrequently, when was the date last completed?**

---

**13.j.ii) Do you have mattresses in your stalls?**

- ☐ Yes
- ☐ No

**14.a.i) Lactating: How would you describe your loose housing system bedding? (check one)**

- ☐ Bedded pack barn WITHOUT mechanical aeration or surface tilling
- ☐ Bedded pack barn WITH mechanical aeration or surface tilling
- ☐ Bedded pack barn with other (describe on written survey)

**14.b.i) Lactating: Average number of cows on the pack at any given time:**

---

**14.c.i) Lactating: If the pack is aerated or tilled, how deep below the surface is it aerated/tilled?**

---

**14.d.i) Lactating: If the pack is aerated or tilled, how frequently is it aerated/tilled?**

---

**14.e.i) Lactating: How often is the pack completely removed/dug out while cows are still housed on it?**

---

**14.f.i) Lactating: How long, if ever, is the barn empty of pack and not used to house cows in a given year?**

---

**14.g.i) Lactating: Do you monitor the pack for temperature?**

- ☐ Yes
- ☐ No

**14.h.i) Lactating: If you monitor the pack for temperature, how do you do this and how often? (Describe on written survey)**

---

**14.i.i) Lactating: Do you monitor the pack for moisture level?**

☐ Yes

☐ No

**14.j.i) Lactating: If you monitor the pack for moisture level, how do you do this and how often? (Describe on written survey)**

---

**14.k.i) Lactating: Do you monitor the pack for density (how compacted the bedding material is)?**

☐ Yes

☐ No

**14.l.i) Lactating: If you monitor the pack for density, how do you do this and how often? (Describe on written survey)**

---

**14.m.i) Lactating: Any other factors you monitor for the pack? How do you do this and how often? (Describe on written survey)**

---

**14.n.i) Lactating: Can you estimate the amount (mass) of bedding material added to the pack on average throughout the winter, per unit time? (e.g. two 500 lb. round bales added every day, 10 yards wood chips every other week) (Describe on written survey)**

---

**14.o.i) Lactating: Does the rate at which you add material to the pack vary throughout the season? If so, how? (Describe on written survey)**

---

**14.p.i) Lactating: Are cows fed directly ON the pack (i.e., no feeding alley)?**

☐ Yes

☐ No

**14.q.i) Lactating: Can you describe how you initially build your pack after completely removing the previous pack and starting over?**

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**14.r.i) Lactating: If you changed to a bedded pack from another housing style, do you feel that cow hygiene was affected? If so, how?**

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**14.s.i) Lactating: If you changed to a bedded pack from another housing style, do you feel that mastitis incidence was affected? If so, how?**

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**14.t.i) Lactating: Anything else about your pack management and construction you feel we should know that we didn't cover?**

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**14.a.ii) Dry: How would you describe your loose housing system bedding? (check one)**

- ☐ Bedded pack barn WITHOUT mechanical aeration or surface tilling
- ☐ Bedded pack barn WITH mechanical aeration or surface tilling
- ☐ Bedded pack barn with other (describe on written survey)

**14.b.ii) Dry: Average number of cows on the pack at any given time:**

---

**14.c.ii) Dry: If the pack is aerated or tilled, how deep below the surface is it aerated/tilled?**

---

**14.d.ii) Dry: If the pack is aerated or tilled, how frequently is it aerated/tilled?**

---

**14.e.ii) Dry: How often is the pack completely removed/dug out while cows are still housed on it?**

---

**14.f.ii) Dry: How long, if ever, is the barn empty of pack and not used to house cows in a given year?**

---

**14.g.ii) Dry: Do you monitor the pack for temperature?**

- ☐ Yes
- ☐ No

**14.h.ii) Dry: If you monitor the pack for temperature, how do you do this and how often? (Describe on written survey)**

---

**14.i.ii) Dry: Do you monitor the pack for moisture level?**

- ☐ Yes
- ☐ No

**14.j.ii) Dry: If you monitor the pack for moisture level, how do you do this and how often? (Describe on written survey)**

---

**14.k.ii) Dry: Do you monitor the pack for density (how compacted the bedding material is)?**

☐ Yes

☐ No

**14.l.ii) Dry: If you monitor the pack for density, how do you do this and how often? (Describe on written survey)**

---

**14.m.ii) Dry: Any other factors you monitor for the pack? How do you do this and how often? (Describe on written survey)**

---

**14.n.ii) Dry: Can you estimate the amount (mass) of bedding material added to the pack on average throughout the winter, per unit time? (e.g. two 500 lb. round bales added every day, 10 yards wood chips every other week) (Describe on written survey)**

---

**14.o.ii) Dry: Does the rate at which you add material to the pack vary throughout the season? If so, how? (Describe on written survey)**

---

**14.p.ii) Dry: Are cows fed directly on the pack (i.e., no feeding alley)?**

☐ Yes

☐ No

**14.q.ii) Dry: Can you describe how you initially build your pack after completely removing the previous pack and starting over?**

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**14.r.ii) Dry: If you changed to a bedded pack from another housing style, do you feel that cow hygiene was affected? If so, how?**

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**14.s.ii) Dry: If you changed to a bedded pack from another housing style, do you feel that mastitis incidence was affected? If so, how?**

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**14.t.ii) Dry: Anything else about your pack management and construction you feel we should know that we didn't cover?**

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**15.a.i) How long has the current WINTER bedding system been in use for LACTATING cows?**

---

**15.a.ii) How long has the current WINTER bedding system been in use for DRY cows?**

---

**15.b.i) Type of bedding material used for LACTATING cows (Check any that apply)**

- ☐ New sand
- ☐ Reclaimed (recycled) sand
- ☐ Manure solids (Biosolids)
- ☐ Shavings
- ☐ Sawdust
- ☐ Woodchips
- ☐ Straw
- ☐ Hay
- ☐ Other (describe on written survey)

**15.b.ii) Type of bedding material used for DRY cows (Check any that apply)**

- ☐ New sand
- ☐ Reclaimed (recycled) sand
- ☐ Manure solids (Biosolids)
- ☐ Shavings
- ☐ Sawdust
- ☐ Woodchips
- ☐ Straw
- ☐ Hay
- ☐ Other (describe on written survey)

**15.b.iii) If you chose more than one material for LACTATING cows, describe a typical snapshot of the composition of bedding by estimating the percentage made up by each material:**

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**15.b.vi) If you chose more than one material for DRY cows, describe a typical snapshot of the composition of bedding by estimating the percentage made up by each material:**

Click here to upload file. (< 5MB)

**15.c.i) What kind of sand is it that you use? (check one)**

- ☐ Silica sand
- ☐ River sand
- ☐ Don't know

**15.c.ii) If new sand, is it washed before you purchase it? (check one)**

- ☐ Yes
- ☐ No
- ☐ Don't know

**15.c.iii) If using reclaimed sand, how is it recycled/recaptured? (check one)**

- ☐ Passive sand separator lanes
- ☐ Mechanical separator
- ☐ Other (describe on written survey)

**15.c.iv) If using reclaimed sand, time in storage from recapturing the sand to reusing in stalls:**

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**15.c.v) If using sand, how is it stored? (check one)**

- ☐ In the open
- ☐ Under cover

**15.c.vi) If using reclaimed sand, check which of the following is true: (check one)**

- ☐ We use reclaimed sand 12 months per year
- ☐ We use reclaimed sand most of the year, but in the coldest months we will purchase and use new dry clean sand.

**15.d.i) How would you classify the manure solids you use? (check one)**

- ☐ Raw (green)
- ☐ Composted
- ☐ Digested
- ☐ Other (describe)

**15.d.ii) Are the manure solids pressed before use? (check one)**

- ☐ Yes
- ☐ No

**15.d.iii) Are the manure solids mechanically dried (with a dryer) before use? (check one)**

- ☐ Yes
- ☐ No

**15.d.iv) If digested solids, what is the temperature is the methane digester (if known)?**

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**15.d.v) If digested solids, what is the flow rate or material through the digester (if known)?**

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**15.d.vi) If using manure solids, estimate typical time in storage from recapturing the solids to reusing in stalls:**

---

**15.e.i) Do you use straw or hay for bedding? (choose one)**

- ☐ Straw
- ☐ Hay
- ☐ Both
- ☐ Other (describe on written survey)

**15.e.ii) Is the straw/hay purchased or produced on farm? (check one)**

- ☐ Purchased
- ☐ Produced
- ☐ Both
- ☐ Other (describe on written survey)

**15.e.iii) If you bed with hay, dry or ensiled? (check one)**

- ☐ Dry hay (e.g. round bales)
- ☐ Ensiled hay (e.g. wrapped round bales)
- ☐ Both
- ☐ Other (describe on written survey)

**15.e.iv) Storage location of straw and hay used for bedding? (check one)**

- ☐ Stored under cover
- ☐ Stored outside not under cover
- ☐ Both
- ☐ Other (describe on written survey)

**15.f.i) Are the shavings/chips/sawdust you used kiln dried or "fresh?" (check one)**

- ☐ Kiln dried
- ☐ Fresh/raw
- ☐ Both
- ☐ Other (describe on written survey)

**15.f.ii) Storage location of woodchips/shavings/sawdust used for bedding? (check one)**

- ☐ Stored under cover
- ☐ Stored outside not under cover
- ☐ Both
- ☐ Other (describe on written survey)

**15.g.i) Do you use a bedding conditioner (e.g. hydrated lime) in your stalls or on your pack?**

- ☐ Yes
- ☐ No

**15.g.ii) If you use a bedding conditioner, what's the name of the product?**

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**15.g.iii) What's the AMOUNT of conditioner applied (eg ounces per stall, amount per sq ft pack)?**

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**15.g.vi) What's the FREQUENCY of conditioner applied (eg times/week, times/month)?**

---

**15.h) Anything you'd like to tell us about your bedding management practices or materials used that weren't included in the above questions?**

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**16.a) What is/are the breeds of dairy cattle on your farm? (describe all breeds on written survey):**

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**16.b) What is the rolling herd average calculated for your farm? If not on milk test, what is the average milk production per cow, in pounds of milk per cow per year? (Describe on written survey, indicate measure)**

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**16.c.i) What are the number of lactating cows currently on your farm?**

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**16.c.ii) What are the number of dry cows currently on your farm?**

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**16.c.iii) What is the number of youngstock currently on your farm?**

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**16.d) Are these numbers exact (calculated from software or paper records) or approximate (estimated)?**

- ☐ Exact
- ☐ Approximate

**16.e.i) What is the average age of lactating cows in your herd, in years?**

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**16.e.ii) How this answer was generated? (check one)**

- ☐ Milk testing results
- ☐ On-farm software
- ☐ Estimated
- ☐ Other (describe on written survey)

**16.f) How many years has this farm been certified organic?**

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**16.g) How many years have you owned or managed ANY dairy farm?**

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**16.h) How many years have you owned or managed an ORGANIC dairy farm?**

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**16.i) If you have an on-farm electronic record keeping system, what is it? (Check one)**

- ☐ DairyComp 305 (or Scout)
- ☐ DairyPlan
- ☐ DHI-Plus
- ☐ PCDART
- ☐ Does not have an on-farm electronic record keeping system
- ☐ Other (describe on written survey)

**16.j) Do you sell raw milk direct to consumers?**

- ☐ No
- ☐ Yes, limited sales (87.5 or fewer gallons per week) of unpasteurized milk direct to consumers, VT tier 1
- ☐ Yes, registered with VT Agency of Ag for sales as tier 2 producer (> 87.5 gallons per week and allowed to deliver)

**16.k) Are you a registered milk handler processing milk or other dairy products on your farm? (e.g. producing pasteurized fluid milk, cheese, yogurt, ice cream or other dairy products on the same premises)**

- ☐ Yes
- ☐ No
- ☐ Not sure

**16.l) Do you, your family, or your employees consume raw milk from this farm?**

- ☐ Yes
- ☐ No
- ☐ Not sure

**16.m) Are you currently considering leaving dairy farming within the next 2 years?**

- ☐ Yes
- ☐ No
- ☐ Not sure

**16.m.i) If yes, could you describe your plan for leaving dairy farming within the next 2 years?**

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**17.a.i) Can you share your DHIA herd number with us (this should begin with 13)?**

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**17.a.ii) Can you share your RAC (access code) number with us (4 digits)?**

*It can be found by opening herd management software and exploring (File – HerdDownload setup)*

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**17.b) How many times per year do you participate in DHIA testing (eg monthly/12 times per year, less frequently, more frequently, OR don't use DHIA testing service)?**

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**17.c) What is the DHIA lab you test through (DHIA Lab name and state)?**

*Answer may be VT-DHIA, Lancaster DHIA, or Dairy One*

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