



# Submit a pig health record

This form contains all the questions needed to submit a complete pig health record.  
If you need help completing the form, see our guidance page at [www.something.gov.uk/guidance](http://www.something.gov.uk/guidance).

**Name of premises**

**Attending vet**

**Address of premises**

About the visit

**1. Date of consultation**

**2. Nature of consultation**

**3. Main clinical sign**

**3. 1 Details about the main clinical sign**

**4. Other clinical signs (if any)**

**4. 1 Details about any other clinical signs**

**5. Age of majority of the affected pigs**

**6. How long have the Clinical signs been present?**

**7. Total number of pigs in the affected group**

Include healthy, affected and dead pigs

**7. 1 Estimated morbidity rate in the affected group**

%

**7. 2 Estimated associated mortality rate in the affected group**

%

**8. Source of the affected pigs**

**9. Main type of accommodation for the affected pigs**

**10. Main type of feed for the affected pigs**

**11. Is the disease presentation new or ongoing?**

**12. Is the disease incident unusual?**

**12.1 . If unusual, describe what is unusual**

**13. Predominant disease syndrome**

**13.1. Suspected diagnosis**

**14. Interventions taken**