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Memorandum

To: Federally Accredited Veterinarians, State of Arizona

From: Dr. Paul Sciglibaglio, AVIC USDA-VS-NM&AZ

Re: Arizona Accredited Veterinarian Handbook

Congratulations on your decision to become a federally accredited veterinarian!

There are a number of duties and responsibilities associated with the status of a federally accredited veterinarian. These duties are outlined within the standards in Title 9, Code of Federal Regulations, Part 161, and attests to your willingness to work in cooperation with Federal veterinarians and State animal health officials.

Through a cooperative effort between the staff at USDA-VS-New Mexico, New Mexico Livestock Board, New Mexico Department of Agriculture, New Mexico Veterinary Diagnostic Laboratory and the New Mexico Department of Health, this Supplemental Accreditation Handbook has been compiled to provide information to assist you in accomplishing your duties as an accredited veterinarian.

Every effort has been made to provide complete and accurate information; however, an accredited veterinarian should always contact the organization(s) and/or individual(s) listed in the handbook with any questions or concerns that are not answered in the text.

I wish you every success.
Notice

Every effort was made to provide you accurate and up to date information, including contact information. However, often names, phone numbers, policies and procedures, can change. When important changes do take place, the current information can be acquired on the Arizona Department of Agriculture web site:

http://www.azda.gov

Please check for any updates frequently.
CONTACT LIST

VETERINARY:

USDA/APHIS, VS New Mexico/Arizona Area Office  (505) 761-3160
Fax No.  (505) 761-3176

USDA/Food Safety Inspection Service (FSIS)
Denver, District Office  1-800-824-2548
Fax No.  (303) 236-9794

Arizona Department of Agriculture  (602)-542-4293

Arizona Veterinary Diagnostic Lab  (520) 621-2356
Office Hours:  M-F:  8:00 am-5:00 pm   Toll Free:  1-866-897-1166

After Hours Service:  A specimen refrigerator is located on the north side of the laboratory. After hours assistance with unloading an animal carcass is available between 5PM-8PM on weekdays, and 9AM-8PM weekends and holidays. For assistance dropping off large animal cadavers after hours call (520) 909-1411. The necropsy will be performed the next business day. A diagnostician is on call for nights and weekends in case of an emergency.

Arizona Department of Public Health  (602) 542-1025
Fax No.  (602) 364-3445

Arizona Board of Veterinary Medicine  (602)364-1738

OTHER:

Arizona Game and Fish  (602)-942-3000
USDA/APHIS, Wildlife Services  (602) 870-2081
USDA/APHIS, Animal Care, Western Region EPA Region Nine (Arizona)  (866) EPA-WEST (toll free in Region 9)
Arizona Poison and Drug Info Center  1-800-222-1222  (602) 771-2300
Arizona Environment Department  (623) 466-1999
WEBSITES:

USDA, APHIS

http://www.aphis.usda.gov/

USDA, APHIS, VS

http://www.aphis.usda.gov/animal_health/

FSIS

http://www.fsis.usda.gov

Arizona Department of Agriculture

http://www.azda.gov

Arizona Veterinary Diagnostic Lab


Arizona Department of Public Health

http://www.azdhs.gov/phs/index.htm

Arizona Board of Veterinary Medicine

http://www.vetboard.az.gov

Arizona Game and Fish

http://www.azgfd.gov

USDA Wildlife Services

http://www.aphis.usda.gov/wildlife_damage/

USDA Animal Care


USDA Food & Drug Administration – Drug withdrawal times

http://www.accessdata.fda.gov/scripts/animaldrugsatfda/
Livestock Inspections

For Livestock Inspections in Arizona please call the following number to schedule an inspection or to contact a Livestock Inspector:

1 800-294-3405
USDA Reportable Diseases
(per Veterinary Services Memorandum No. 570.8*)

Listed below are VS reportable diseases. These diseases must be reported immediately to the AVIC and the State Animal Health Official to be in compliance with 9 CFR 161.3(f).

Bovine spongiform encephalopathy – cattle (9 CFR 94)
Brucellosis – cattle, bison, swine, and cervidae (9 CFR 78)
Chronic wasting disease – cervidae (9 CFR 55)
Dourine – horses and asses (9 CFR 75.1 – listed in CFR but no text)
Equine infectious anemia – horses, asses, mule, pony, and zebra (9 CFR 75.4)
Equine viral Arteritis (Uniform Methods and Rules APHIS 91-55-075)
Exotic Newcastle disease – poultry (9 CFR 82.1, 9 CFR 94)
Infectious salmon anemia (9 CFR 53)
Pseudorabies – livestock: swine, cattle, sheep, and goats (9 CFR 85)
Scrapie – sheep and goats (9 CFR 79)
Spring viremia of carp (9 CFR 53)
Texas (splenetic) fever – cattle (9 CFR 72)
Tuberculosis – cattle, bison, and captive cervids (9 CFR 77)
Vesicular stomatitis – livestock (9 CFR 121)

And all diagnosed or suspect disease not known to exist in the United States including, but not limited to:

African swine fever (9 CFR 53)
Classical swine fever (9 CFR 53)
Contagious pleuropneumonia (9 CFR 53)
Foot-and-mouth disease (9 CFR 53)
Glanders (9 CFR 71.3)
Highly pathogenic avian influenza (9 CFR 53)
Rinderpest (9 CFR 53)
Scabies – sheep (9 CFR 53)
Screwworm (9 CFR 71.3)
Swine Vesicular Disease (9 CFR 53)
Bovine & Equine Piroplasmosis (9 CFR 71, 9 CFR 71)

An Accredited Veterinarian should also report any clinical signs or syndromes consistent with above listed diseases.

*See Appendix B
In CFR 161.3(f), it states “An accredited veterinarian shall immediately report to the Area Veterinarian in Charge and the State Livestock Health Official all diagnosed or suspected cases of a communicable animal disease for which the Animal and Plant Health Inspection Service (APHIS) has a control or eradication program in 9 CFR chapter I and all diagnosed or suspect cases of any animal disease not known to exist in the United States as provided by Section 71.3(b) of this chapter.”

**USDA - APHIS - VS Reportable Diseases**

The diseases listed below must be reported immediately to the AVIC and the State Animal Health Official to be in compliance with 9 CFR 161.3(f).

- **Bovine spongiform encephalopathy** – cattle (9 CFR 94)
- **Brucellosis** – cattle, bison, swine, and cervidae (9 CFR 78)
- **Chronic wasting disease** – cervidae (9 CFR 55)
- **Dourine** – horses and asses (9 CFR 75.1 - listed in CFR but no text)
- **Equine infectious anemia** – horses, asses, mule, pony, and zebra (9 CFR 75.4)
- **Equine viral Arteritis** (Uniform Methods and Rules APHIS 91-55-075)
- **Exotic Newcastle disease** – poultry (9 CFR 82.1, 9 CFR 94)
- **Infectious salmon anemia** (9 CFR 53)
- **Pseudorabies** – livestock: swine, cattle, sheep, and goats (9 CFR 85)
- **Scrapie** – sheep and goats (9 CFR 79)
- **Spring viremia of carp** (9 CFR 53)
- **Texas (splenetic) fever** – cattle (9 CFR 72)
- **Tuberculosis** – cattle, bison, and captive cervids (9 CFR 77)
- **Vesicular stomatitis** – livestock (9 CFR 121)

Additionally, all diagnosed or suspect disease not known to exist in the United States, but not limited to:

- **African swine fever** (9 CFR 53)
- **Classical swine fever** (9 CFR 53)
- **Contagious pleuropneumonia** (9 CFR 53)
- **Foot-and-mouth disease** (9 CFR 53)
- **Glanders** (9 CFR 71.3)
- **Highly pathogenic avian influenza** (9 CFR 53)
- **Rinderpest** (9 CFR 53)
- **Scabies** – sheep (9 CFR 53)
- **Screwworm** (9 CFR 71.3)
- **Swine Vesicular Disease** (9 CFR 53)
- **Bovine & Equine Piroplasmosis** (9 CFR 71, 9 CFR 71)
### Diseases Notifiable to the OIE

#### Multiple species diseases
- Anthrax
- Aujeszky's disease
- Bluetongue
- Brucellosis (\textit{Brucella abortus})
- Brucellosis (\textit{Brucella melitensis})
- Brucellosis (\textit{Brucella suis})
- Crimean Congo haemorrhagic fever
- Echinococcosis/hydatidosis
- Foot and mouth disease
- Heartwater
- Japanese encephalitis
- Leptospirosis
- New world screwworm (\textit{Cochliomyia hominivorax})
- Old world screwworm (\textit{Chrysomya bezziana})
- Paratuberculosis
- Q fever
- Rabies
- Rift Valley fever
- Rinderpest
- Trichinellosis
- Tularemia
- Vesicular stomatitis
- West Nile fever

#### Cattle diseases
- Bovine anaplasmosis
- Bovine babesiosis
- Bovine genital campylobacteriosis
- Bovine spongiform encephalopathy
- Bovine tuberculosis
- Bovine viral diarrhoea
- Contagious bovine pleuropneumonia
- Enzootic bovine leukosis
- Haemorrhagic septicaemia
- Infectious bovine rhinotracheitis/infectious pustular vulvovaginitis
- Lumpky skin disease
- Malignant catarrhal fever
- Theileriosis
- Trichomonosis
- Trypanosomosis (tsetse-transmitted)
### Sheep and goat diseases
- Caprine arthritis/encephalitis
- Contagious agalactia
- Contagious caprine pleuropneumonia
- Enzootic abortion of ewes (ovine chlamydiosis)
- Maedi-visna
- Nairobi sheep disease
- Ovine epididymitis (*Brucella ovis*)
- Peste des petits ruminants
- Salmonellosis (*S. abortusovis*)
- Scrapie
- Sheep pox and goat pox

### Equine diseases
- African horse sickness
- Contagious equine metritis
- Dourine
- Equine encephalomyelitis (Western)
- Equine infectious anaemia
- Equine influenza
- Equine piroplasmosis
- Equine rhinopneumonitis
- Equine viral arteritis
- Glanders
- Venezuelan equine encephalomyelitis

### Swine diseases
- African swine fever
- Classical swine fever
- Nipah virus encephalitis
- Porcine cystercerosis
- Porcine reproductive and respiratory syndrome
- Swine vesicular disease
- Transmissible gastroenteritis

### Avian diseases
- Avian chlamydiosis
- Avian infectious bronchitis
- Avian infectious laryngotracheitis
- Avian mycoplasmosis (*M. gallisepticum*)
- Avian mycoplasmosis (*M. synoviae*)
- Duck virus hepatitis
- Fowl cholera
- Fowl typhoid
- High and Low pathogenic Avian Influenza
- Infectious bursal disease (Gumboro disease)
- Marek's disease
- Newcastle disease
- Pulmonary disease
- Turkey rhinotracheitis

### Lagomorph diseases
- Myxomatosis
- Rabbit haemorrhagic disease

### Bee diseases
- Acarapisis of honey bees
- American foulbrood of honey bees
- European foulbrood of honey bees
- Small hive beetle infestation (*Aethina tumida*)
- *Tropilaelaps* infestation of honey bees
- Varroosis of honey bees
Fish diseases

- Epizootic haematopoietic necrosis
- Infectious haematopoietic necrosis
- Spring viraemia of carp
- Viral haemorrhagic septicemia
- Infectious salmon anaemia
- Epizootic ulcerative syndrome
- Koi Herpes Disease
- Infection with Gymnodactylus salaris
- Red sea bream iridoviral disease

Mollusc diseases

- Infection with Bonamia ostreae
- Infection with Bonamia exitiosa
- Infection with Marteilia refringens
- Infection with Abalone Herpes like virus
- Infection with Perkinsus marinus
- Infection with Perkinsus olsen
- Infection with Xenohaliotis californiensis

Crustacean diseases

- Taura syndrome
- White spot disease
- Yellowhead disease
- Infectious Myonecrosis
- Necrotising Hepatopancreatitis
- Infectious hypodermal and haematopoietic necrosis
- Crayfish plague (Aphanomyces astaci)
- White Tail Disease

Other diseases

- Camelpox
- Leishmaniosis

Amphibians

- Infection with Ranavirus
- Infection with Batrachochytrium Dendrobatidis
**Laboratory Submissions and Contact Information***

For specific information on samples required, samples accepted and special handling and mailing instructions, please contact the laboratory directly.

**National Veterinary Services Laboratory (Ames, Iowa)**

USDA/APHIS, VS, NVSL Diagnostic Bacteriology Laboratory – Serology

1920 Dayton Avenue

Ames, IA 50010

Phone:  (515) 337-7212

Fax:  (515) 337-7569

**USDA/APHIS, VS, NVSL, Foreign Animal Disease Diagnostic Laboratory**

Mainland Warehouse (shipping address)

Rt 25 Orient Point, NY  11957

Phone:  (631) 323-3063

Fax:  (631) 323-3366

**New Mexico Veterinary Diagnostic Lab**

1101 Camino de Salud, NE

Albuquerque, NM  87102

Phone:  (505) 383-9299

Fax:  (505) 383-9294
Brucellosis labs (brief listing)

New Mexico Veterinary Diagnostic Lab (Card test only)
1101 Camino de Salud, NE
Albuquerque, NM 87102
Phone: (505) 383-9299
Fax: (505) 383-9294

Texas Veterinary Medical Diagnostic Laboratory
Amarillo Laboratory
6610 Amarillo Blvd., West
Amarillo, TX 79106
Phone: (806) 353-7478, toll free (888) 646-5624

Texas State/Federal Veterinary Diagnostic Laboratory
4501 Springdale Rd.
Austin, TX 78723
(512) 933-0441

Rocky Mountain Regional Animal Health Laboratory
2331 West 31st Avenue
Denver CO 80211
303.477.0049 ph 303.458.7857 fx
Monday through Friday 8am to 5pm.

Arizona Veterinary Diagnostic Lab (Card Test Only)
2831 N. Freeway, Tucson AZ 85705-5021
Phone: (520) 621-2356 Fax: (520) 626-8696
Toll Free: 1-866-897-1166
azvdl@ag.arizona.edu

National Veterinary Services Laboratories
1920 Dayton Ave.
Ames, Iowa 50010
Phone: (515) 337-7266

For more information on National Animal Health Laboratories:

For specific information on samples required, samples accepted and special handling and mailing instructions, please contact the laboratory directly.

Updated 8/26/2013
NOTICE: International health certificates for the export of animals from the United States are completed by the accredited veterinarian who certifies herd and animal health status, conducts tests, and records test results for the individual animals being exported. Completed and signed international health certificates must be endorsed by a Veterinary Services (VS) area office in order to be valid.

1. Review the USDA, VS website for the current international animal export regulations for a particular country. Each country may have other specific health requirements for entry of animals. These requirements are established by the importing country, not the United States. The USDA, VS website is as follows:

   http://www.aphis.usda.gov/regulations/vs/iregs/animals/

2. If you have any questions or concerns regarding the regulations for exporting animals to a foreign country, contact the NM Area Office at 505-761-3160. The office hours are 9:00am – 3:00 pm for processing of international health certificates.

3. It is recommended that the exporter contact the airlines for their requirements.

4. The completed and signed health certificate(s) can be hand-carried or mailed to the NM Area Office for endorsement.

5. If hand-carried, an appointment is necessary in order to ensure the USDA veterinarian is available to sign and endorse the health certificate(s). The following documents must be attached to the health certificate(s):

   a. Copy of all vaccination or test results
   b. Check or money order for the user fee charge (call the office for the amount due) payable to USDA, APHIS, VS.

6. If the health certificate(s) will be mailed, the following must be attached to the health certificate(s):

   a. Copy of all vaccination or test results
   b. Check or money order for the user fee charge (call the office for the total amount due) payable to USDA, APHIS, VS.
c. FedEx pre-paid air bill or UPS pre-paid air bill (for quick expeditious return of the documents.

Mail the documents to:

USDA, APHIS, VS
6200 Jefferson St., NE, Suite 117
Albuquerque, NM 87109

**Other Information:**

Exports are handled in the order in which they are received; please allow sufficient time for processing and handling. For out of state submitters, it is highly recommended that the complete health certificate package be submitted via fax (505-761-3176) to the NM/AZ Area office for review before submitting for endorsement.

The health certificate will not be processed without the user fee payment (check or money order only).

When submitting a check for payment, include the Social Security number for personal checks or the TIN (tax identification number) for business checks.

See appendix C to view the USDA, APHIS, VS small animal health certificate (APHIS Form 7001).

See Appendix D to view the USDA, APHIS, VS large animal health certificate (VS Form 17-140).

It is your responsibility to ensure that all appropriate blanks are complete and correct. Your signature in the “Signature Block” indicates that all information is accurate and complete. Partially completed or incorrectly completed certificates will be returned to the signing veterinarian.

For further assistance, please call our office at 505-761-3160 or fax at 505-761-3176.
Common Errors
International Health Certificates

The errors below may result in the delay in the processing of the international health certificate(s):

1. Accredited veterinarian fails to contact the USDA, APHIS, VS office for the current country requirements.

2. The wrong form is completed.

3. The certificate is incomplete – there is information missing in some of the boxes.

4. The certificate is not signed by the accredited veterinarian.

5. The accredited veterinarian does not certify to the certification statements by marking the boxes which apply.

6. The endorsement date is filled in by the vet clinic.

7. The accredited veterinarian did not sign the Rabies Vaccination Certificate when completing the certificate for small animals.

8. Some information on the certificate for small animals does not match the Rabies Vaccination and/or the rabies titer test results.

9. Some information on the certificate for large animals does not match the coggins results.

10. The user fee check or money order is not included with the certificate package.

11. Some countries require an alternate color other than black ink for the signature.

12. Some countries require that the certificate be typed, with no errors, and not handwritten.
EXPORT USER FEES

Methods of Payment:

Check
Money order
Credit account with APHIS

The NM/AZ Area Office will accept check or money order only. A credit account may be established with APHIS. Contact the Area Office for information regarding establishing an account.

User Fees are subject to change, Contact your Area Office for current User Fee information.
Pertinent Information for Accredited Veterinarians

Regarding Tuberculosis Testing

In accordance with Parts 160-162, Title 9, CFR, there are certain standards and rules of practice for veterinarians accredited by the Deputy Administrator of Veterinary Services upon the joint recommendation of the State Veterinarian and the Area Veterinarian in Charge.

An excerpt of Part 161.3 reads: "An accredited veterinarian shall perform the functions of an accredited veterinarian subject to the supervision and directions of the Veterinarian in Charge and the State Animal Health Official.” This includes responsibilities in Federal and cooperative programs. A few salient points are emphasized for your information. The NMSLB requires all veterinarians to have been State TB certified in order to conduct TB testing. Additionally, testing of any species other than cattle or bison requires special training. Contact the VS office in Albuquerque for instructions.

Tuberculosis Testing in Cattle and Bison

1. Use a 3/8” 26 g needle with a ½ cc or 1 cc disposable syringe. Draw in one dose, 0.1 cc of USDA Contract Bovine PPD tuberculin at a time.

2. Clean the caudal fold with cotton.

3. The needle is inserted to full length between the superficial layers of the skin (intradermal) withdraw slightly and inject. A proper injection will raise a small bleb at the injection site.

4. Read the test at 72 hours (plus or minus 6 hours).

5. Reading of the test shall be by palpation and observation. This is to be done by the veterinarian that injected the animal(s).

6. All responses shall be noted on the test chart and the animal(s) called suspect.

7. Suspects shall be reported by telephone, on the day of observation, to the Veterinary Medical Officer (VMO) in that section (see section map) including weekends and after hours. A copy of the test chart shall be made available for the Section VMO. If unable to reach the Section VMO, contact the NM Veterinary Service area office and fax a copy of the test chart to the area office. The comparative test must be conducted by the VMO within 10 days of initial injection.

8. The testing veterinarian is held responsible for the proper application and reading of tuberculin tests. Test records shall be completed and forwarded within 10 business days of observation.
Guidelines for Completing the Tuberculosis Test Record

See VS Form 6-22, Attachment

The following guidelines should help you properly complete the VS Form 6-22. VS 6-22B is a continuation form for use if there are more than 30 animals being tested on one date. All test charts will be completed legibly in their entirety and will reflect the true status as determined by the testing veterinarian. If an item is not applicable mark an “NA” or a dash indicating that it has been reviewed.

- **STATE:** New Mexico, and may be abbreviated NM.
- **HERD OWNER’S NAME:** Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code. If a livestock market, put name and address of the market in box and put the owner name above.
- **COUNTY:** Name of county where animals are located.
- **Reason for test:** Place an “x” in the appropriate box. For Sale or Show, please circle which one it is. If Movement or any other reason not specified, check ‘Other’ and write the reason in the box.
- **COMPLETE HERD TEST:** If the whole herd was tested, check yes and give the number of test eligible animals in the herd.
- **Kind of Herd:** Indicate the kind of herd.
- **METHOD OF TEST:** Place an “x” in the appropriate box. Alternate sites should be indicated.
- **SUMMARY:** Indicate the number of negatives, suspects and the total number tested.
- **INJECTION/DATE/HOUR:** Initials of veterinarian who injects the animals, date and hour of the test.
- **PRACTITIONER’ NAME and SIGNATURE:** Always sign the test record and print your name below your signature.
- **AGREE CODE:** Fill in your NM Federal Accreditation Code (not your state license number).
- **OBSERVATION/DATE/HOUR:** Initials of the veterinarian who observes the test results, date and time. Observation should be completed 72 hours (+/- 6) following injection. It MUST be the same veterinarian who injects and observes.
- **IDENTIFICATION:** This must be an OFFICIAL identification, usually a 9-digit alphanumeric USDA ear tag which is unique to each animal. An official vaccination tag is acceptable in place of a silver USDA tag. An animal carrying an official tag (even if from other states) **shall not** be retagged nor shall the ear tag be removed. In instances where more than one official tag is present, all tags shall be recorded. Currently RFID identification must be accompanied by a USDA silver or official vaccinate.
ID. If using registration tattoos, give the entire tattoo (must match registration papers, which may be requested), along with the brand on the animal, and their location. Bangle tags are not considered official identification but should be noted along with the official ID. Please indicate if the animal has been re-tagged by putting RT in the space before the identification number. Should you have any questions regarding identification please contact the Veterinary Services New Mexico area office.

- **AGE:** Note the age of the animal in years (Y) or months (M).
- **BREED:** Enter the breed abbreviation. A list of standardized breed codes is provided. As an example, the code for longhorn is TL, not LH.
- **SEX:** Self-explanatory. If castrated, neutered, etc. please note the codes to be used (ie. castrated male is ST for steer).
- **RESULTS:** There are only 2 choices. N = negative or S = suspect.
- **OWNER SIGNATURE:** The owner or his agent should sign and date the record as of the date of observation.
**State:** NM

**Herd Owner’s Complete Address:** The physical location of the animals. They are not in a PO Box! If livestock market, put the name & address of the market in the address box and put the owner’s name in the Herd Owner’s Name boxes.

**Reason For Test:** If Sale or Show check the box and circle which one, for movement check other & write in Movement (Mov).

**Injection and Observation:** Should be the initials of the veterinarian who injects and observes the animal. **Must** be the same veterinarian.

**Results:** Will either be N-Negative or S-Suspect.

**Age:** Should be filled in with an estimation of the animals’ age noted in years (Y) or months (M).

**Agreement Code:** Your National Accreditation Number. Not your license #

**Hour fields:** Observation should be completed 72 hours (+/- 6) following injection.
## Tuberculin Test in Various Species of Animals

<table>
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<th>Species</th>
<th>Dose and Type</th>
<th>Site</th>
<th>Read Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cattle *</td>
<td>0.1 ml PPD Bovis</td>
<td>Caudal Fold</td>
<td>72 hrs</td>
</tr>
<tr>
<td>Horse</td>
<td>Not Reliable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camelids ** (Llamas, Alpacas, others)</td>
<td>0.1 ml PPD Bovis</td>
<td>Axillary Region</td>
<td>72 hrs</td>
</tr>
<tr>
<td>Sheep, Goats</td>
<td>0.1 ml PPD Bovis</td>
<td>Caudal Fold</td>
<td>72 hrs</td>
</tr>
<tr>
<td>Swine</td>
<td>0.1 ml PPD Bovis</td>
<td>Caudal Fold</td>
<td>72 hrs</td>
</tr>
<tr>
<td></td>
<td>0.1 ml PPD Avian</td>
<td>Vulvar lips</td>
<td>48 hrs</td>
</tr>
<tr>
<td>Poultry</td>
<td>0.1 ml PPD Avian</td>
<td>Wattle</td>
<td>48 hrs</td>
</tr>
<tr>
<td>Dogs</td>
<td>If temperature of dog is within normal range, inject 0.75 ml PPD Bovis, SQ. Check temperature every 2 hours for 12 Hours. A 2 degree F rise in temp is a positive test.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cats</td>
<td>Not Reliable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other ungulates</td>
<td>0.1 ml PPD Bovis</td>
<td>Side of Neck, eyelid, or caudal fold</td>
<td>72 hrs</td>
</tr>
<tr>
<td>Cervidae **</td>
<td>0.1 ml PPD bovis</td>
<td>Side of Neck</td>
<td>72 hrs</td>
</tr>
</tbody>
</table>

** Must receive training from USDA, APHIS – VS in order to conduct testing in these species.
Herd Accreditation

Tuberculosis:

All animals in a herd must pass at least two (2) consecutive official TB tests conducted at 12-15 month intervals and have no evidence of, or exposure to bovine TB. The CFT test is the official test for testing herds for accreditation.

The test observation date (month/day) of the second consecutive test that has no evidence of TB will become the anniversary date for herd accreditation.

Animals that respond to the CFT test will be classified as ‘suspect’. Herds containing suspects to the CFT test must be quarantined until the suspect animals are re-tested negative by the CCT test within 10 days of the CFT injection, or re-tested negative by the CCT test 60 or more days after the CFT injection. If the CCT test is negative on retest, the herd may be released from quarantine. The CCT test may only be applied by State or Federal veterinarians.

The testing age limit for cattle is 18 months of age or older. The testing age limit for goats is 12 months of age or older.

Additions to accredited herds must meet certain minimum test requirements prior to entry, animals not meeting the test standards should be isolated (geographic separation) until completion of such testing to prevent loss of accredited status.

Any new additions to the herd must be listed on the test chart and state whether they are purchased or natural additions. Also, any animals not present at the re-certification need to be accounted for. Accurate and complete record keeping is a requirement.

Owners/producers desiring to have their herd accredited should be encouraged to contact the VS-NM offices for information and guidelines.
Brucellosis Vaccination and Testing: Do’s and Don’ts

Brucellosis Testing

See VS Form 4-33, Attachment

1. Preferably, blood samples should be collected in a serum separator vaccutainer tube or a plastic 5cc microbleeder tube.
2. Write your Agreement Code and a sequential number corresponding to each sample tube on the VS Form 4-33, “Brucellosis Test Record”, Label tubes on the collar (wipe first!) with a Sharpie marker to avoid accidental erasure.
3. The blood samples should be allowed to clot at room temperature; AVOID heat and cold extremes and direct sunlight. After clotting, place samples on the top shelf of a refrigerator. DO NOT FREEZE!
4. All blood samples should be submitted to a commercial diagnostic laboratory (see examples on the Laboratory list, page 5-2).
5. OVERNIGHT samples to ensure arrival at the laboratory the next working day. If you collect blood samples on a Friday or Saturday, refrigerate them over the weekend and overnight on Monday. If samples are allowed to sit 2-3 days in the heat or extreme cold they may arrive hemolized and will be useless.
6. A VS form 4-33 “Brucellosis Test Record” must be used for all field testing.
7. No unofficial card or CITE tests are to be done in the field.
<table>
<thead>
<tr>
<th>TUBE NO.</th>
<th>RECORD ALL IDENTIFICATION NUMBER(S)</th>
<th>VACC TATTOO</th>
<th>AGE</th>
<th>BREED</th>
<th>SEX</th>
<th>FLOAT</th>
<th>BARCODE</th>
<th>STT</th>
<th>RV</th>
<th>CF</th>
<th>TEST RESULT</th>
<th>REMARKS</th>
<th>REACTOR TAG NUMBER</th>
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</tbody>
</table>
Guidelines for Completing the Brucellosis Test Record

See VS Form 4-24, Attachment

• STATE: Arizona can be abbreviated as AZ.
• COUNTY: Name of county in which tested animals are located.
• HERD OWNER: Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code.
• COMPLETE HERD TEST: If the whole herd was tested, check yes and give the number of test eligible animals in the herd.
• KIND OF HERD: Indicate the kind of herd.
• SUMMARY: Indicate the number of negatives, suspects and the total number tested.
• CERTIFICATION FOR PAYMENT: Always check private, unless contracted by the State.
• SIGNATURE: Always sign the test record and print your name below your signature. Indicate your mailing address.
• AGREE CODE: Fill in your National Accreditation Code (not your state license number).
• DATE BLED: Enter the date the animals were bled.
• TUBE NUMBER: Use consecutive numbers. Do not duplicate numbers on samples mailed to the laboratory on the same day. Write the number and your vet code on the top of each blood tube.
• COLUMN 2: Indicate in this column if the animal has been re-tagged (RT), is a natural addition (NA), purchased addition (PA) or aborter (AB). The codes are located at the bottom of the column.
• IDENTIFICATION NUMBER: This must be an OFFICIAL identification, usually a 9-digit alphanumeric USDA ear tag which is unique to each animal. An official vaccination tag is acceptable in place of a silver USDA tag. An animal carrying an official tag (even if from other states) shall not be retagged nor shall the ear tag be removed. In instances where more than one official tag is present, all tags shall be recorded. If using registration tattoos, give the entire tattoo (must match registration papers, which may be requested), along with the brand on the animal, and their location. Bangle tags are not considered official identification but should be noted along with the official ID.
• VACCINATION TATTOO: Enter as shown in the animal’s ear. Record all legible characters.
• AGE: Note the age of the animal in years (Y) or months (M).
• BREED: Enter the breed abbreviation. A list of standardized breed codes is provided. As an example, the code for longhorn is TL, not LH.
• SEX: Self-explanatory. Female (F) and male (M). Steers are NOT tested.
• REMARKS AND ADDITIONAL INFORMATION: Use this column for additional identification and/or other pertinent data. This includes plastic ear tags and neck chains. ALWAYS correlate these with a USDA silver ear tag. With commercial tags, show the type and color.
• REACTOR TAG NUMBER: For reactor tag placed in the left ear of a brucellosis infected animal (USDA Personnel only). This field may be used to note bangle tag numbers provided the practitioner relabels the column as such.
<table>
<thead>
<tr>
<th>NO.</th>
<th>IDENTIFICATION NUMBER</th>
<th>AGE (MC/YR.)</th>
<th>BREED</th>
<th>SEX</th>
<th>P/B GRADE</th>
<th>TATTOO</th>
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</tbody>
</table>

CERTIFICATION OF OWNER OR WITNESS

I CERTIFY THAT the animals listed hereon were vaccinated and identified for the above named owner.

Signature: ____________________________ Date: ____________

CERTIFICATION FOR RE-ESTABLISHING VACCINATION STATUS

* [ ] indicate tattoo of animals previously vaccinated in appropriate column.

I CERTIFY THAT I have personally examined the animal(s) noted hereon, and have read the official tattoo(s) and have retagged them as shown.

Signature: ____________________________ Date: ____________
ALL VACCINATIONS MUST BE PROMPTLY REPORTED

COOPERATIVE STATE-FEDERAL BRUCELLOSIS ERADICATION PROGRAM

BRUCELLOSIS VACCINATION RECORD

<table>
<thead>
<tr>
<th>HEAD NUMBER</th>
<th>HERD NUMBER</th>
<th>LAST</th>
<th>FIRST</th>
<th>INITIAL</th>
<th>VACCINE USED</th>
<th>EXPIRATION DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>KIND OF HERD</th>
<th>POST OFFICE</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAIRY</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>BEEF</td>
<td></td>
<td></td>
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<tr>
<td>MIXED</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>REMARKS</th>
<th>WBBS</th>
<th>CV</th>
<th>AV</th>
<th>RGE</th>
<th>TWP</th>
<th>SEC</th>
<th>DISTRICT</th>
<th>FARM UNIT</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>IDENTIFICATION NUMBER</th>
<th>AGE</th>
<th>BREED</th>
<th>SEX</th>
<th>P/B GRADE</th>
<th>TATTOO</th>
</tr>
</thead>
<tbody>
<tr>
<td>02</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>24</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
</tr>
</tbody>
</table>

I CERTIFY THAT: (1) I have vaccinated with Strein 19, tattooed and ear-tagged the above named animal(s), and recorded all information as prescribed by the Brucellosis UM & R. and (2) when payment is claimed at program expense in accordance with agreement number below, no payment has been or will be received from any other source.

- Signature
- Date of Vaccination
- Agree. Code

CERTIFICATION OF OWNER OR WITNESS

I CERTIFY THAT the animals listed hereon were vaccinated and identified for the above named owner.

- Signature
- Date

CERTIFICATION FOR RE-ESTABLISHING VACCINATION STATUS

- Indicate tattoo of animals previously vaccinated in appropriate column.
- I CERTIFY THAT I have personally examined the animal(s) noted hereon, and have read the official tattoo(s) and have retagged them as shown.

- Signature
- Date

VS FORM 4-28
(JUL 83) Previous edition may be used.
Brucellosis Vaccination

All brucellosis vaccinations in Arizona will be by use of a 2ml dose of approved *Brucella abortus* vaccine given subcutaneously. RB-51 vaccine replaced Strain 19 vaccine as of September 1, 1996. PRIOR PERMISSION MUST BE OBTAINED from the State Veterinarian for Strain 19 use on any animal. The age for vaccination of both dairy and beef heifers is between 4-12 months of age, with 5 months the ideal age. ONLY accredited veterinarians and State or Federal officials are authorized to perform brucellosis vaccinations. All vaccinated animals must be permanently identified as vaccinates and vaccination records must be filed with the State-Federal office within 30 days.

Adult vaccinations are only to be administered with **prior** approval by the State Veterinarian.

Approved, official identification of calf-hood vaccinated animals consists of a vaccination tattoo plus one of the following:

- An official vaccination ear tag;
- A registration brand and a registration tattoo

If an official USDA ear tag is already present in the ear, the animal **SHOULD NOT** be re-tagged with an official ear tag. All vaccinations must be reported on VS Form 4-24 (Brucellosis Vaccination Record) or VS Form 4-26 (Brucellosis Vaccination Record).

Ear tags and tattoos are placed in the RIGHT ear. The tattoo, for RB51 vaccinates, shows the US Registered Shield and the letter V, preceded by the letter R, and followed by a number corresponding to the last digit of the year in which the vaccination was done. For calendar year 2013, the tattoo would read/look as follows:

![Tattoo Example]
Guidelines for Completing the Brucellosis Vaccination Record

See VS Form 4-26, Attachment

- **STATE:** Arizona can be abbreviated as AZ.
- **COUNTY:** Name of county in which tested animals are located.
- **HERD OWNER:** Legal name of owner should be entered in this block, last name first. If a ranch/dairy name, follow it with a contact person and physical location of the animals, complete address including zip code.
- **VACCINE USED:** This will be RB-51, unless permission to use Strain 19 has been approved.
- **EXPIRATION DATE:** This is the expiration date of the vial of vaccine being used.
- **SERIAL NUMBER:** This is the serial number from the vial of vaccine being used.
- **DOSAGE:** Mark the appropriate dosage being used, full or reduced.
- **VACCINATION TATTOO:** Place the tattoo being applied to the animals in this block, it should read: type of vaccine {R}, shield {V} and last number of the calendar year in which the vaccine is administered {0-9}, ie., RV3 for 2013.
- **KIND OF HERD:** Indicate the kind of herd.
- **REMARKS:** Use this block for additional and/or other pertinent information.
- **CERTIFICATION FOR PAYMENT:** Always check private, unless contracted by the State.
- **SIGNATURE:** Always sign the vaccination record.
- **DATE OF VACCINATION:** Enter the date the animals were vaccinated.
- **AGREE CODE:** Fill in your National Accreditation Code (not your state license number).
- **CERTIFICATION OF OWNER OR WITNESS:** The owner or designated agent must sign and date the vaccination record.
- **CV or AV:** CV is for calfhood vaccinate, AV is for adult vaccinate. Adult vaccination is only to be administered with prior approval of the State Veterinarian and the Area Veterinarian in Charge.
- **IDENTIFICATION NUMBER:** Place the official ear tag number (the vaccination tag number) in this block. If using registration tattoos, give the entire tattoo (must match registration papers, which may be requested), along with the brand on the animal, and their location.
- **AGE:** Note the age of the animal in years (Y) or months (M).
• BREED: Enter the breed abbreviation. A list of standardized breed codes is provided. As an example, the code for longhorn is TL, not LH.
• SEX: Should only be Female (F).
• If you are retagging animals previously vaccinated and tattooed, show the existing tattoo. Sign and date the “Certification for Re-Establishing Vaccination Status” block.
SOURCE OF SUPPLIES

From:

USDA, APHIS, Veterinary Services
6200 Jefferson St., NE, Suite 117
Albuquerque, New Mexico 87109
(505) 761-3160

1. Brucellosis Test Record – VS Form 4-33 and VS form 4-34A (continuation)

2. Brucellosis Vaccination Record – VS Form 4-21 and VS Form 4-24 (short form)

3. Tuberculosis Test Record – VS Form 6-22 and VS Form 6-22B (continuation)

4. Specimen Submission – VS Form 10-4. This is used for submission of samples to NVSL, Ames, Iowa. Authorization from the Area Veterinarian in Charge, Albuquerque Area Office, must be obtained prior to submission of samples.

5. United States Origin Health Certificate – VS Form 17-140 and VS Form 17-140A (continuation) – for large animal species


7. Equine Infectious Anemia Laboratory Test – VS Form 10-11

8. Official Scrapie Eradication Program Tags

9. Official Identification Ear Tags (silver) and Official Calfhood Vaccination Tags

10. USDA Contracted Bovine PPD Tuberculin

11. USDA Official Seals. USDA Official Seals are accountable items. They must be applied and removed by an APHIS representative, State representative, accredited veterinarian, or an individual authorized for this purpose by an APHIS representative.
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<th>Breed Name</th>
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<td>AF</td>
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<td>Dairy Crossbred</td>
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TAGS AND SEALS

TAGS

Official USDA animal identification, calfhood vaccination and reactor tags for cattle or bison are accountable property. Individuals receiving these eartags are responsible for their security and proper use. Any loss, theft, accidental or deliberate misuse must be reported immediately to the Area Veterinarian in Charge (AVIC). In addition, official identification is not to be left on any farm, ranch, dairy or other residence for use by non-accredited individuals.

Each accredited veterinarian in a shared practice must have their own eartags ordered for them. The transfer of any assigned tags to another accredited veterinarian must be reported immediately to the Veterinary Service office in Albuquerque (identifying tag numbers and date transferred).

SEALS

USDA Official Seals must be applied and removed by an APHIS representative, State representative, accredited veterinarian, or an individual authorized for this purpose by an APHIS representative. An accredited veterinarian who has need of USDA Official Seals should contact the AVIC.

A record must be kept of when, where and for whom each seal is used.
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Scrapie

Scrapie is a fatal, degenerative disease affecting the central nervous system of sheep and goats. It is among a number of diseases classified as transmissible spongiform encephalopathies (TSE). The scrapie agent is thought to be spread most commonly from the ewe to her offspring and to other lambs through contact with the placenta and placental fluids. Signs or effects of the disease usually appear 2 to 5 years after the animal is infected but may not appear until much later. After the onset of clinical signs, death is inevitable.

The signs of scrapie vary among individual animals and develop very slowly. Due to damage to nerve cells, affected animals usually show behavioral changes, tremor (especially of the head and neck), rubbing and locomotor incoordination that progresses to recumbency and death.

A sheep or goat that exhibits any of the following clinical signs of scrapie must be reported to a State or APHIS representative: weight loss despite retention of appetite; behavioral abnormalities; pruritus (itching); wool pulling; biting at legs or side; lip smacking; motor abnormalities such as incoordination, high stepping gait of forelimbs, bunny-hop movements of rear legs, or swaying of back end; increased sensitivity to noise and sudden movement; tremor, star gazing, head pressing, recumbency, or other signs of neurological disease; or chronic wasting.

An infected animal may appear normal if left undisturbed at rest. However, when stimulated by a sudden noise, excessive movement, or the stress of handling, the animal may tremble or fall down in a convulsive-like state.

The genetics of the sheep affects their susceptibility to scrapie. Two locations on DNA that code for prion protein are particularly important for scrapie susceptibility: codons 136 and 171. Codon 136 may code for either of the amino acids alanine (A) or valine (V). Codon 171 may code for the amino acids arginine (R), glutamine (Q), histidine (H), or lysine (K).

Research indicates that QQ sheep and goats are the most susceptible to scrapie infection; whereas QR sheep are much less susceptible and RR sheep are resistant. The designations QQ, QR and RR refer to the results of an official genotype test conducted at codon 171. H, K or any amino acid other than R at codon 171 will be treated as equivalent to Q at codon 171.

The Scrapie Flock Certification Program (SFCP) is designed to monitor flocks and certify the scrapie status of the animals enrolled in the program. Any
sheep or goat owner may apply to participate in the SFCP. The program provides participating producers with the opportunity to protect their sheep from scrapie and to enhance the marketability of their animals through certifying their origin in scrapie-free flocks.

Briefly, SFCP participants are required to:

1) establish and maintain records;
2) make animals and records available for inspection by State or APHIS representatives;
3) schedule an annual inspection within 11-13 months of the preceding inspection;
4) identify animals with official SFCP identification (as specified by program standards*);
5) report as soon as discovered to the State or VS-NM office: a) scrapie suspect animals including any animals exhibiting signs consistent with scrapie so that they can be evaluated and/or tested; and b) animals found dead at over 14 months of age so that if possible they can be sampled for scrapie testing.
6) allow State or Federal representatives to enter premises to carry out program procedures.

*Animals required to be officially identified are:

- All breeding sheep.
- All sheep over 18 months of age.
- All scrapie exposed, suspect, test positive and high-risk animals.
- Breeding goats except low-risk commercial goats.
- Animals for exhibition.

To obtain scrapie tags a producer needs to obtain a flock identification number and national premises identification number from the NM Livestock Board. USDA scrapie tags are provided free of charge with a choice of metal or plastic tags. Official tags may be purchased from approved tag companies.

Owners/producers desiring to participate in the SFCP should be encouraged to contact the NM Livestock Board and VS-NM offices for information and guidelines.
SCRAPIE TAG INFORMATION AND RULES

USDA estimates substantial eradication of scrapie in the United States by the end of 2010, which meets the World Organization for Animal Health (OIE) requirements to attain scrapie-free status in the U.S. by the end of 2017. Presently, there are only a few hundred reported cases of scrapie in the US annually; however eradication and attaining scrapie free status is important for the following reasons:

• Scrapie costs U.S. producers an estimated $20 million annually in lost world exports, increased costs and animal loss.

• Scrapie is a Transmissible Spongiform Encephalopathy (TSE) such as BSE in cattle and Chronic Wasting Disease in elk and deer. While there is no scientific evidence that scrapie can spread from one species to another under normal conditions, however it is only prudent to eradicate the disease. Public expectation is the eradication of all TSEs.

• In the past, many cases of scrapie have gone undetected, however state and producer compliance with the National Scrapie Eradication Program (NSEP) has proven to be an effective means of controlling scrapie.

A. TO OBTAIN SCRAPIE TAGS:

1) Obtain a Premises ID from the office of the AZ State Veterinarian (602) 542-4293.

2) Call USDA and order scrapie tags: (505) 761-3160.

• A list of USDA-approved scrapie identification ear tags is available through USDA (505) 761-3160. Printed with the flock number and the U.S. shield symbol.

B. CATEGORIES OF SHEEP AND GOATS THAT REQUIRE OFFICIAL ID AT PUBLIC AUCTION

• To sell at public livestock auction, all sheep and goats must have a scrapie tag. The seller must maintain records for five years.
  - to expedite check-in at the auction, please have a list of the sheep/goats with their scrapie tags written down prior to arriving at the auction yard.

C. GENERAL SCRAPIE REGULATIONS

• The regulations require that all sheep over 18 months of age need to be officially identified before they enter interstate commerce. This will include: primarily cull ewes and rams that are sold to livestock markets or dealers.

• Official ID is a scrapie tag issued by USDA-APHIS with an official flock ID number. Producers must secure these tags from USDA. In addition to cull ewes and rams, any breeding stock sold out of state, or breeding stock that goes to any show/exhibition/demonstration must also have the official ID in place.

• Market lambs (less than 18 months of age, in feeder channels) that are sold and sent directly to slaughter will not need to have the ID. This does not apply to market lambs at public auction.
D. CATEGORIES OF SHEEP AND GOATS REQUIRE OFFICIAL ID AT SHOWS

- All breeding males and females i.e. rams and bucks; ewes, ewe lambs, does and doelings;
- New Mexico fairs and exhibitions: All sexually intact sheep and goats require a scrapie tag.
- Prior to sale or movement, scrapie tags are required.
- Owners of sheep/goats sold at shows/exhibitions must maintain the following information:
  - Identification of the individual animal(s) sold, the buyer’s name, address and phone number;
    these records must be retained for five years.

E. TATTOOS ARE PRIMARILY USED IN GOATS:

- Goat owners may opt to use tattoos for ID in lieu of scrapie tags.
- To utilize tattoos: call USDA/APHIS and request a herd ID number.
- The APHIS assigned herd ID number and an individual production number can be tattooed in the
  ear, flank or tail-fold.
- Holders of breed registry assigned tattoo prefixes (i.e., American Dairy Goat Assn.) should have
  these linked to their premises.
- Breed Registry tattoos must be approved by the New Mexico Livestock Board.
- Breed Registry Tattoos: Generally, the registered herd tattoo is applied in the right ear and the
  year of birth code letter and individual animal number is applied in the left ear.
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<td><a href="http://www.agmkt.state.ny.us/Al">www.agmkt.state.ny.us/Al</a></td>
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<td>North Carolina</td>
<td>(919) 733-7601</td>
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<td>North Dakota</td>
<td>(701) 328-2231</td>
<td>(701) 220-5194</td>
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<td>Ohio</td>
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<td>Oklahoma</td>
<td>(405) 522-6131</td>
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<td>Oregon</td>
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<td>(307) 777-7515</td>
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<td>(307) 777-6561</td>
<td>(307) 777-6444</td>
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February 2012
ePermits

The website is:

http://www.aphis.usda.gov/permits/

Any questions about ePermits should be directed to e-Permit Support at 1-866-314-8732

USDA Office Contacts

For questions and assistance regarding permit application status, whether or not you need a permit, and regulations and policies concerning allowable imports please contact the appropriate office:

- Plants and Plants Products:
  Telephone Number: 301-734-0841 or Toll free: 1-877-770-5990
  Email: Permits@aphis.usda.gov

- Pest Permits and Noxious Weeds:
  Telephone Number: 301-734-0841 or Toll free: 866-524-5421
  Email: Pest.Permits@aphis.usda.gov

- Animals Products:
  Telephone Number: 301-734-3277
  Fax Number: 301-734-8226

- Live Animals:
  Telephone Number: 301-734-8364

- Select Agents, Organisms and Vectors:
  Telephone Number: 301-734-5960

- Genetically Engineered Organisms:
  Telephone Number: 301-734-7324
  Email: biotechquery@aphis.usda.gov
PLAGUE : INFORMATION FOR VETERINARIANS

General Information

Plague is caused by Yersinia pestis, a gram-negative bacterium that is endemic to most of the western United States. Epizootics of plague occur in wild rodents (rock squirrels, prairie dogs, ground squirrels, chipmunks, woodrats, and others) and most people acquire plague by the bite of an infectious rodent flea. However, about one-fifth of all human cases result from direct contact with infected animals. Cats are particularly susceptible to plague and can play a role in transmission to humans by a variety of mechanisms including transporting infected fleas or rodent/rabbit carcasses into the residential environment, direct contact contamination with exudates or respiratory droplets, and by bites or scratches. Cat-associated human cases were first reported in 1977. In a study by Gage (2000), 23 human plague cases were associated with exposure to infected cats, including 5 veterinarians or their assistants. Dogs are frequently infected with Y. pestis, develop antibodies to the organism, and can occasionally exhibit clinical signs, but have not been demonstrated to be sources of human infection. Dogs also can transport infected fleas or rodent/rabbit carcasses into the residential environment. Ungulates have rarely been identified as infected with Y. pestis.

Plague in Cats

Clinical features

In enzootic areas, plague should be considered in the differential diagnosis of fever of unknown origin in cats and dogs. In a study of plague in cats by Eidson (1991), 53% of cats had bubonic plague, 8% were septicemic, and 10% had plague pneumonia. In 29% of the cats, the form of illness was unknown but was presumed to be septicemic. Of cats with bubonic plague, 75% had submandibular lymphadenitis. Abscessed lymph nodes may be clinically indistinguishable from abscesses due to other causes (e.g. bite wounds). Fever, lethargy and anorexia are common and oral lesions are often present. In addition to pneumonia, cats with advanced disease may develop DIC, multi-organ failure and other complications of gram-negative sepsis. Untreated, approximately 38% of cases will be fatal.

Laboratory Diagnosis

Because of zoonotic concerns, it is important to collect and submit samples for diagnostic testing. Samples should be placed on ice or frozen, and shipped via courier to the New Mexico Department of Agriculture’s Veterinary Diagnostic Services (VDS) which is located in Albuquerque.

Antemortem Samples Fluorescent antibody (FA) and culture: Swabs of lesions using culturette (oral cavity, draining lymph nodes), whole blood, or lymph node aspirate are the preferred samples, if available. If evidence of plague pneumonia, perform pharyngeal swab using culturette. Aspirates may be left in the syringe for shipment or transferred to a culturette. Serology: Acute and convalescent serum (0.5 ml), collected at least 14 days apart. In enzootic areas, dogs and cats that roam and hunt may retain titers from previous infections so interpretation on single serology is problematic. A four-fold rise between acute and convalescent titers is confirmatory. NOTE: It is preferable to collect specimens for culture prior to administering antibiotics, but samples should still be collected if antibiotics have been given.

Postmortem Samples Lymph node aspirate, tissues from lymph node, liver, spleen, lung, or whole blood. Tissue samples should be placed in a clean container, (do NOT use formalin or alcohol). As an alternative, the entire carcass may be submitted to VDS for necropsy. Please call ahead so staff can take appropriate measures.

Management and Therapy

In addition to thorough physical examination, auscultation and x-rays of the chest should be done to check for the possibility of plague pneumonia. A flea control product that kills fleas on contact (e.g. fipronil) should be applied to the cat.

Due to the rapid progression of this disease, treatment for suspected plague (and infection control practices) should be started before a definitive diagnosis is obtained. Streptomycin has been considered the drug of choice in human cases but is difficult to obtain and rarely used today. Gentamicin is currently used to treat most human plague cases and should be considered a suitable alternative choice in veterinary medicine for seriously ill patients, although it is not approved for this purpose. Animals with renal failure will require adjusted dosages. Doxycycline is appropriate for treatment of less complicated cases. Tetracycline and chloramphenicol are also options. Penicillins
are not effective in treating plague. In treatment studies with experimentally infected mice, the fluoroquinolones performed as well as streptomycin. No veterinary clinical trials have been performed on fluoroquinolones however there is growing evidence from their use by veterinarians in enzootic areas that they are effective in the treatment of plague in dogs and cats. The recommended duration of treatment is 10 to 21 days with clinical improvement (including defervescence) expected within a few days of initiation of treatment.

Because of the risk of disease transmission to their owners, cats should not be sent home immediately, but should be hospitalized and placed in isolation, especially if there is evidence of pneumonia. The duration of infectivity in treated cats has not been studied, but cats are thought to be noninfectious after 72 hours of appropriate antibiotic therapy with evidence of clinical improvement. Patients receiving parenteral antibiotics may be switched to oral therapy upon clinical improvement.

**Risks to Veterinarians, Veterinary Staff and Pet Owners**

Every case of cat plague represents a potential risk for human exposure and illness. Acquiring primary pneumonic plague from cats is a particular risk for veterinarians, their assistants and pet owners. In addition, bubonic plague or primary plague septicemia can result from contact with infectious tissues, exudates, or fleas.

**Personal Protection:** Any exudates and the oral cavity should be considered infectious. In pneumonic plague, spread occurs by respiratory droplet, requiring close patient contact for transmission to occur. Masks, gloves and eye guards should be worn when examining and treating cats suspected of having plague. Exudates should be considered infectious and any material used for treating suspect cats should be disinfected, autoclaved, or incinerated.

Veterinary clinic personnel should be advised of these risks and advised to consult their physician and state health department in the event of possible exposure to an infected cat. If you suspect that you have been exposed to *Y. pestis* and develop febrile illness, seek medical attention immediately. The usual incubation period for bubonic plague in humans is 2 to 7 days. The incubation period for primary pneumonic plague is considerably shorter, only 1 to 3 days. Most fatalities are a result of a delay in appropriate antimicrobial therapy.

**Advising clients:** Owners of cats with suspected plague should be advised to consult their physician and state health department. Animal owners in plague enzootic areas should be advised to confine pets and to apply a flea control product to pets which go outside. This is especially important during the most common periods of plague transmission (March through October). Clients should be warned that pets should not share sleeping areas with family members. All ill animals, especially cats, should be seen by a veterinarian.

**Contacting Health Officials**

It is *extremely important* that public health officials be notified promptly when plague is suspected. Public health officials can assist in follow-up of potentially exposed persons, consult with the veterinarian, veterinary staff, and the owner’s physician about the need for antibiotic prophylaxis, do an environmental risk assessment at the owner’s home and provide community education. The New Mexico Department of Health’s Epidemiology and Response Division can be contacted at 505-827-0006 for follow up. Ask for the on-call person.

**References**


Comments on Rabies Vaccination Requirements for Dogs and Cats

There have been complaints in the past from the public over how some veterinarians are administering the vaccine and whether they are informing pet owners about their options. These comments are intended to help veterinarians make rational rabies vaccination recommendations in clinical practice. They are not intended to represent any type of legal vaccination standard of care.

Comments:

1. When the state regulation allowing both the 1-year and 3-year rabies vaccination protocols was adopted in 2003, a letter was sent to city and county managers around the state, asking them to consider changing their local ordinances to also allow both protocols. To date, there are some communities which still require the 1-year vaccination protocol. Local ordinances can be stricter than state regulations. The best way to know if this is true in your area is to talk with your local animal control officers who should be knowledgeable on local rabies ordinances.

2. Both rabies vaccination protocols have been shown to protect both the animal and the public from rabies equally as well. Even if an area has a high incidence of rabies in wild animals, no increased rabies protection of the vaccinated animal has been demonstrated by using the 1-year protocol instead of the 3-year protocol.

3. I have heard that some practitioners are using a licensed 3-year rabies vaccine annually in order to give their client’s animal “extra protection” from rabies. I have strongly discouraged this practice as it is a violation of the state regulation which says rabies vaccine is to be used according to the manufacturer’s recommendations. If you and your client have decided to vaccinate for rabies every year, then a vaccine licensed and labeled for 1-year use must be used.

4. If you are in a city/county that allows the 3-year protocol, then no matter which licensed rabies vaccine is used for the first dose, and no matter how long it has been since the first dose was given, if the second dose is labeled as a 3-year vaccine then the rabies certificate must be written for 3 years. There is no medical penalty if the second dose is not given within one year of the initial dose of vaccine. The vaccination protocol should not be started over again. The animal should have a good anamnestic response no matter how long it has been since the first dose. Of course, the initial dose of any rabies vaccine is only good for one year and if an
animal control officer finds an animal with an expired rabies certificate, they may fine the owner.

5. There are continuing public concerns, some based on scientific studies, that vaccination can cause adverse reactions in a small percentage of pets, including cancer and immune-mediated diseases. In Table 1 of the 2006 American Animal Hospital Association (AAHA) Canine Vaccination Guidelines it is stated: “When given annually, 1-year rabies products should not be considered to cause fewer adverse reactions than 3-year rabies products.”

6. The AAHA guidelines also discuss potential liability associated with vaccine administration and informed consent as an important part of reducing liability. Decisions surrounding vaccination of client-owned pets should include a discussion with the client and be fully documented in the medical record. Making sure the client understands the different types of rabies vaccines available and their potential benefits and risks prior to vaccination is an important part of informed consent. Vaccination is a medical decision and a medical procedure that should be individualized based on the risk and lifestyle of the individual animal and should include input from the client. The AAHA guidelines can be downloaded from their website: http://www.aahanet.org/About_aaha/vaccine_guidelines06.pdf
Appendix A

Standards for Accredited Veterinarian Duties

Code of Federal Regulations
(Revised as of January 1, 2011)

Part 161

Source: 57 FR 54912, Nov. 23, 1992, unless otherwise noted.

§ 161.1 Statement of purpose; requirements and application procedures for accreditation.

(a) This subchapter concerns a program administered by APHIS to accredit veterinarians and thereby authorize them to perform, on behalf of APHIS, certain activities specified in this chapter. This program is intended to ensure that an adequate number of qualified veterinarians are available in the United States to perform such activities.

(b) Categories of accreditation. A veterinarian may be accredited as a Category I veterinarian or a Category II veterinarian. A veterinarian who is accredited under Category I is only authorized to perform accredited duties on Category I animals, as defined in §160.1. A veterinarian who is accredited under Category II is authorized to perform accredited duties on both Category I animals and Category II animals.

(c) Application for initial accreditation. A veterinarian may apply for accreditation by completing an application for accreditation and submitting it to APHIS. In completing the application, the veterinarian will choose one of the accreditation activity categories, either Category I or Category II, as discussed in paragraph (b) of this section. Applications for Category I accreditation must include certification that the applicant is able to perform the tasks listed in paragraph (g)(1) of this section. Applications for Category II accreditation must include certification that the applicant is able to perform the tasks listed in paragraph (g)(2) of this section. An accredited veterinarian must not perform duties requiring a program certification unless he or she is accredited under Category II and qualified to perform such duties in accordance with §161.5 of this part.

(d) Review of application. Applications for accreditation received by APHIS shall be forwarded to the State Animal Health Official for the State in which the veterinarian wishes to perform accredited duties for approval. Within 14 days after receiving an application, a State Animal Health Official shall either endorse the application or send a written statement to the Administrator explaining why it was not endorsed; but if the State Animal Health Official fails to take one of these actions within 14 days, APHIS shall proceed to review the application. The Administrator will review the application and the written statement, if any, and determine whether the applicant meets the requirements for accreditation contained in this part.
Accreditation requirements. The Administrator is hereby authorized to accredit a veterinarian when he or she determines that:

1. The veterinarian is a graduate with a Doctorate of Veterinary Medicine or an equivalent degree (any degree that qualifies the holder to be licensed by a State to practice veterinary medicine) from a college of veterinary medicine;

2. The veterinarian is licensed or legally able to practice veterinary medicine in the State in which the veterinarian wishes to perform accredited duties. APHIS will confirm the licensing status of the applicant by contacting the State board of veterinary medical examiners or any similar State organization that maintains records of veterinarians licensed in a State;

3. The veterinarian has completed initial accreditation training, using content provided by APHIS; and

4. The veterinarian has completed an orientation program approved by the Veterinarian-in-Charge for the State in which the veterinarian wishes to perform accredited duties, and upon completion of the orientation, has signed a written statement listing the date and place of orientation, the subjects covered in the orientation, and any written materials provided to the veterinarian at the orientation. The Veterinarian-in-Charge shall also give the State Animal Health Official an opportunity to review the contents of the orientation, and invite him or her to participate in developing orientation materials and conducting the orientation. The veterinarian applying for accreditation must have completed the orientation program within 3 years prior to submitting the application for accreditation. The core orientation program shall include the following topics:

   i. Federal animal health laws, regulations, and rules;
   ii. Interstate movement requirements for animals;
   iii. Import and export requirements for animals;
   iv. USDA animal disease eradication and control programs;
   v. Laboratory support in confirming disease diagnoses;
   vi. Ethical and professional responsibilities of an accredited veterinarian;
   vii. Foreign animal disease awareness;
   viii. Animal health emergency management; and
   ix. Animal health procedures, issues, and information resources relevant to the State in which the veterinarian wishes to perform accredited duties.

Change in accreditation category. (1) Category I to Category II. A veterinarian who is accredited under Category I may become accredited under Category II if the veterinarian applies for accreditation under Category II by completing an application for accreditation, including certification that the applicant is able to perform the tasks listed in paragraph (g)(2) of this section, and submitting it to APHIS. The veterinarian must also have fulfilled the training requirements in §161.3(b) that are associated with renewal of accreditation under Category II.

(2) Category II to Category I. A veterinarian who is accredited under Category II may become accredited under Category I if the veterinarian applies for accreditation under Category I by completing an application for accreditation, including certification that the applicant is able to perform the tasks listed in paragraph (g)(1) of this section, and submitting it to APHIS. The veterinarian must also have fulfilled the training requirements in §161.3(b) that are associated with renewal of accreditation under Category I.

Tasks that applicants for accredited status must be able to perform. Applicants for accredited status must be able to:

1. Category I. (i) Perform physical examination of individual Category I animals to determine whether they are free from any clinical signs suggestive of communicable disease.
(ii) Recognize the common breeds of Category I animals and accurately record breed information on official documents.
(iii) Apply common animal identification for Category I animals.
(iv) Properly complete certificates for domestic and international movement of Category I animals.
(v) Perform necropsies on Category I animals.
(vi) Recognize and report clinical signs and lesions of exotic animal diseases that occur in Category I animals.
(vii) Vaccinate Category I animals and accurately complete the vaccination certificates.
(viii) Properly collect and ship specimen samples to the appropriate laboratory for testing with complete and accurate paperwork.
(ix) Develop appropriate biosecurity protocols, as well as cleaning and disinfection protocols, to control communicable disease spread in Category I animals.

(2) Category II. (i) Perform physical examination of individual animals and visually inspect herds or flocks to determine whether the animals are free from any clinical signs suggestive of communicable disease.

(ii) Recognize the common breeds of Category I and Category II animals, including the types of poultry as defined by the National Poultry Improvement Plan in subchapter G of this chapter and the common breeds of livestock, and be able to accurately record breed information on official documents.
(iii) Recognize all USDA animal identification systems.
(iv) Estimate the age of livestock using a dental formula.
(v) Apply USDA-recognized identification (e.g., eartag, microchip, tattoo) for the USDA animal identification system.
(vi) Certify the health status of an avian flock regarding diseases of domestic or international regulatory concern, and evaluate records pertaining to poultry flock testing and participation in Federal and State poultry health programs and classifications.
(vii) Properly complete certificates for domestic and international movement of animals.
(viii) Apply and remove official seals.
(ix) Perform necropsies on animals.
(x) Recognize and report clinical signs and lesions of exotic animal diseases.
(xi) Develop a herd or flock health plan consistent with requirements in subchapters B, C, and D of this chapter.
(xii) Vaccinate for USDA program diseases and accurately complete the vaccination certificate.
(xiii) Properly collect and ship sample specimens to an appropriate laboratory for testing with complete and accurate paperwork.
(xiv) Properly perform testing for tuberculosis (e.g., caudal fold test).
(xv) Develop appropriate biosecurity protocols, as well as cleaning and disinfection protocols, to control communicable disease spread.
(xvi) Explain basic principles for control of diseases for which APHIS or APHIS-State cooperative programs presently exist.

(h) Authorization to perform duties. An accredited veterinarian may not perform accredited duties in a State until after receiving written authorization from APHIS. If a Category I accredited veterinarian completes the necessary training requirements and becomes a Category II accredited veterinarian, the veterinarian may not perform Category II accredited duties in a State until after receiving written authorization from APHIS.

§ 161.2 Performance of accredited duties in different States.

(a) If an accredited veterinarian wishes to perform accredited duties in a State other than the State in which the veterinarian was initially accredited in accordance with §161.1(e), the accredited veterinarian must complete an application to request authorization to perform accredited duties in the new State from the Veterinarian-in-Charge of that State. The Veterinarian-in-Charge of the new State may require the accredited veterinarian to complete, prior to performing any accredited duties in the new State, an orientation in animal health procedures and issues relevant to the new State. The Veterinarian-in-Charge shall review the content of each such orientation and shall approve its use after determining that it includes adequate information about animal health agencies, regulatory requirements, administrative procedures, and animal disease issues in the new State, to prepare an accredited veterinarian from another State to perform accredited duties in the new State. The Veterinarian-in-Charge shall also give the State Animal Health Official of the new State an opportunity to review the contents of the orientation, and invite him or her to participate in developing orientation materials and conducting the orientation.
(b) An accredited veterinarian may not perform accredited duties in a State in which the accredited veterinarian is not licensed or legally able to practice veterinary medicine.

(c) An accredited veterinarian may not perform accredited duties in a State other than the one in which the veterinarian was initially accredited until the veterinarian receives written authorization from APHIS to perform accredited duties in the new State.

(Approved by the Office of Management and Budget under control numbers 0579–0032 and 0579–0297)

[74 FR 65011, Dec. 9, 2009]

§ 161.3 Renewal of accreditation.

(a) Accredited veterinarians who wish to continue participating in the National Veterinary Accreditation Program must renew their accreditation every 3 years by completing an application for accreditation renewal and submitting it to APHIS. Newly accredited veterinarians must renew their accreditation within 3 years of completing the orientation program described in §161.1(e)(4) of this part, regardless of when their accreditation was granted. Other veterinarians must renew their accreditation within 3 years of the previous renewal.

(b) Accredited veterinarians who wish to renew their accreditation under Category I must complete 3 supplemental training units approved by APHIS by the end of their 3-year tenure as an accredited veterinarian. Accredited veterinarians who wish to renew their accreditation under Category II must complete 6 supplemental training units approved by APHIS by the end of their 3-year tenure as an accredited veterinarian. Accredited veterinarians who wish to change the category in which they are accredited, rather than renew accreditation in their current accreditation category, should follow the procedure in §161.1(f) of this part.

(c) Accredited veterinarians who do not complete the required training within 3 years as specified in paragraph (a) of this section will have their accredited status expire. Veterinarians whose accreditation has expired will not be allowed to perform accredited duties until they receive notification of their reinstatement from APHIS. Veterinarians who perform duties that only accredited veterinarians are authorized to perform while their accredited status has expired will be subject to such criminal and civil penalties as are provided by the Animal Health Protection Act (7 U.S.C. 8301 et seq.) or other applicable Federal statutes or regulations. To be reinstated, the veterinarian must complete the necessary supplemental training units for the appropriate category and submit an application for renewal of veterinary accreditation to APHIS. A veterinarian who allows his or her accredited status to expire must have completed the required number of supplemental training units within 3 years of his or her application for renewal in order to be approved for renewal. Supplemental training units completed since the veterinarian’s last renewal but more than 3 years before the veterinarian’s application for renewal will not count towards fulfilling his or her training requirement.

(d) Veterinarians who are Accredited as of February 1, 2010, may continue to perform accredited duties between February 1, 2010, and the date of their first renewal. APHIS will provide notice for 3 months to accredited veterinarians who are Accredited as of February 1, 2010, to notify them that they must elect to participate in the NVAP as a Category I or Category II veterinarian. Veterinarians must elect to continue to participate by October 1, 2011, or their Accredited status will expire. When APHIS receives notice from an Accredited veterinarian that he or she elects to participate, APHIS will notify the Accredited veterinarian of his or her date for first renewal. The Accredited veterinarian must then complete all the training requirements for renewal, as described in this section, by his or her first renewal date.

[74 FR 65011, Dec. 9, 2009, as amended at 76 FR 52549, Aug. 23, 2011]
§ 161.4 Standards for accredited veterinarian duties.

An accredited veterinarian shall perform the functions of an accredited veterinarian only in a State in which the accredited veterinarian is licensed or legally able to practice veterinary medicine. An accredited veterinarian shall perform the functions of an accredited veterinarian and carry out all responsibilities under applicable Federal programs and cooperative programs subject to direction provided by the Veterinarian-in-Charge and in accordance with any regulations and instructions issued to the accredited veterinarian by the Veterinarian-in-Charge, and shall observe the following specific standards:

(a) An accredited veterinarian shall not issue a certificate, form, record or report which reflects the results of any inspection, test, vaccination or treatment performed by him or her with respect to any animal, other than those in regular health maintenance programs, unless he or she has personally inspected that animal within 10 days prior to issuance. Inspections under this paragraph must be conducted in a location that allows the accredited veterinarian sufficient space to observe the animal in such a manner as to detect abnormalities related to areas such as, but not limited to, locomotion, body excretion, respiration, and skin conditions. An accredited veterinarian shall examine such an animal showing abnormalities, in order to determine whether or not there is clinical evidence compatible with the presence or absence of a communicable disease.

(1) Following the first two inspections of a herd or flock as part of a regular health maintenance program, an accredited veterinarian shall not issue a certificate, form, record or report which reflects the results of any inspection, test, vaccination or treatment performed by him or her with respect to any animal in that program, unless he or she has personally inspected that animal within 10 days prior to issuance.

(2) Following the third and subsequent inspections of a herd or flock in a regular health maintenance program, an accredited veterinarian shall not issue a certificate, form, record or report which reflects the results of any inspection, test, vaccination or treatment performed by him or her with respect to any animal in that program, unless he or she has personally inspected that animal within 30 days prior to issuance.

(b) An accredited veterinarian shall not issue, or allow to be used, any certificate, form, record or report, until, and unless, it has been accurately and fully completed, clearly identifying the animals to which it applies, and showing the dates and results of any inspection, test, vaccination, or treatment the accredited veterinarian has conducted, except as provided in paragraph (c) of this section, and the dates of issuance and expiration of the document. Certificates, forms, records, and reports shall be valid for 30 days following the date of inspection of the animal identified on the document, except that origin health certificates may be valid for a longer period of time as provided in §91.3(a) of this chapter. The accredited veterinarian must distribute copies of certificates, forms, records, and reports according to instructions issued to him or her by the Veterinarian-in-Charge.

(c) An accredited veterinarian shall not issue any certificate, form, record, or report which reflects the results of any inspection, test, vaccination, or treatment performed by another accredited veterinarian, unless:

(1) The signing accredited veterinarian has exercised reasonable care, that is, a standard of care that a reasonably prudent person would use under the circumstances in the course of performing professional duties, to determine that the certificate, form, or report is accurate;
(2) The certificate, form, or report indicates that the inspection, test, vaccination, or treatment was performed by the other accredited veterinarian; identifies the other accredited veterinarian by name; and includes the date and the place where such inspection, test, or vaccination was performed; and,

(3) For a certificate, form, or report indicating results of a laboratory test, the signing accredited veterinarian shall keep a copy of the certificate, form, or report and shall attach to it either a copy of the test results issued by the laboratory, or a written record (including date and participants' names) of a conversation between the signing accredited veterinarian and the laboratory confirming the test results.

(d) An accredited veterinarian shall perform official tests, inspections, treatments, and vaccinations and shall submit specimens to designated laboratories in accordance with Federal and State regulations and instructions issued to the accredited veterinarian by the Veterinarian-in-Charge.

(e) An accredited veterinarian shall identify or be physically present to supervise the identification of reactor animals by tagging or such other method as may be prescribed in instructions issued to him or her by the Veterinarian-in-Charge or by a State Animal Health Official through the Veterinarian-in-Charge.

(f) An accredited veterinarian shall immediately report to the Veterinarian-in-Charge and the State Animal Health Official all diagnosed or suspected cases of a communicable animal disease for which APHIS has a control or eradication program in 9 CFR chapter I, and all diagnosed or suspected cases of any animal disease not known to exist in the United States as provided by §71.3(b) of this chapter.

(g) While performing accredited work, an accredited veterinarian shall take such measures of sanitation as are necessary to prevent the spread of communicable diseases of animals by the accredited veterinarian.

(h) An accredited veterinarian shall keep himself or herself currently informed on Federal and State regulations that are provided to him or her by the Veterinarian-in-Charge, or by a State official through the Veterinarian-in-Charge, governing the movement of animals, and on procedures applicable to disease control and eradication programs, including emergency programs.

(i) An accredited veterinarian shall not use or dispense in any manner, any pharmaceutical, chemical, vaccine or serum, or other biological product authorized for use under any Federal regulation or cooperative disease eradication program, in contravention of applicable Federal or State statutes, regulations, and policies.

(j) An accredited veterinarian shall be responsible for the security and proper use of all official certificates, forms, records, and reports; tags, bands, or other identification devices; and approved digital signature capabilities used in his or her work as an accredited veterinarian and shall take reasonable care to prevent the misuse thereof. An accredited veterinarian shall immediately report to the Veterinarian-in-Charge the loss, theft, or deliberate or accidental misuse of any such certificate, form, record, or report; tag, band, or other identification device; or approved digital signature capability.

(k) An accredited veterinarian may issue an origin health certificate for export use pursuant to part 91 of this chapter without including test results from a laboratory, if the Veterinarian-in-Charge has determined that such action is necessary to save time in order to meet an exportation schedule and agrees to add the test results to the certificate at a later time. In such cases, the accredited veterinarian shall state on a removable attachment to the certificate that such test results are to be added by the Veterinarian-in-Charge.
§ 162.1 Scope and applicability of rules of practice.

The Uniform Rules of Practice for the Department of Agriculture promulgated in subpart H of part 1, subtitle A, title 7, Code of Federal Regulations, are the Rules of Practice applicable to adjudicatory, administrative proceedings for the revocation or suspension of accreditation of veterinarians (9 CFR parts 160 and 161). In addition, the Supplemental Rules of Practice set forth in subpart B of this part shall be applicable to such proceedings.

Subpart B—Supplemental Rules of Practice

§ 162.10 Summary suspension or revocation of accreditation of veterinarians.

In any situation where the Administrator has reason to believe that any veterinarian accredited under the provisions of parts 160 and 161 of this subchapter has knowingly violated the Animal Health Protection Act (7 U.S.C. 8301 et seq.), the Administrator may summarily suspend the accreditation of such veterinarian pending final determination in either a suspension or revocation proceeding, effective upon oral or written notification, whichever is earlier. In the event of oral notification, a written confirmation thereof shall be given to such veterinarian as promptly as circumstances permit.

[74 FR 65013, Dec. 9, 2009]

§ 162.11 Notification.

The Veterinarian-in-Charge shall notify an accredited veterinarian when there is reason to believe that the accredited veterinarian has not complied with the “Standards for Accredited Veterinarian Duties” as contained in §161.4 of this subchapter. The notification shall be in writing, with a copy to the State Animal Health Official, and shall include a statement of the basis for the belief that the accredited veterinarian has failed to comply with the Standards and shall notify the accredited veterinarian if the Veterinarian-in-Charge has arranged to hold an informal conference to discuss the matter.


§ 162.12 Informal conference.

(a) The Veterinarian-in-Charge, in consultation with the State Animal Health Official and the accredited veterinarian, shall designate the time and place for the holding of an informal conference to review the matter, unless the Veterinarian-in-Charge determines that an informal conference is inappropriate. An informal conference is inappropriate only if the Veterinarian-in-Charge decides to dismiss the case based on available facts, or if civil or criminal charges based on the actions or inactions believed to be in violation of the “Standards for Accredited Veterinarian Duties” contained in §161.4 of this subchapter are pending against the accredited veterinarian. An informal conference shall include the Veterinarian-in-Charge or his or her representative, the accredited veterinarian, and any other persons the Veterinarian-in-Charge requests to attend due to their involvement in or knowledge of the possible violation. The State Animal Health Official will be invited to attend each informal conference held regarding activities in his or her State.

(b) If prior to, during, or after the informal conference, but prior to the issuance of a formal complaint, the accredited veterinarian is found not to have violated the regulations, the Veterinarian-in-Charge will issue a letter dismissing the case, and provide a copy of the letter to the accredited veterinarian and to the State Animal Health Official. Prior to, during, or after the informal conference, the Veterinarian-in-Charge may issue a letter identifying actions of the accredited veterinarian that were minor violations of the Standards, instructing the accredited veterinarian in proper procedures, and admonishing the accredited veterinarian to use greater care in performing these procedures in the future.

(c) Prior to, during, or at the conclusion of the informal conference, the Veterinarian-in-Charge may issue a written warning to the accredited veterinarian without further procedure after determining that a warning with appropriate instructions will be adequate to attain compliance with the Standards.

(d) If prior to, during, or at the conclusion of, the informal conference, the accredited veterinarian consents, in writing, to the issuance of an order revoking or suspending his or her accreditation for a specified period of time, in lieu of further procedure, the Veterinarian-in-Charge may issue such a consent order without further procedure.


§ 162.13 Formal complaint.

If a consent order has not been issued, or if, after an informal conference, the Veterinarian-in-Charge has not issued a letter of dismissal or letter of warning to the accredited veterinarian, a formal complaint may be issued by the Administrator in accordance with §1.135 of the Uniform Rules of Practice (7 CFR 1.135).
Appendix B - Veterinary Services Memorandum 570.8

JANUARY 26, 2007

VETERINARY SERVICES MEMORANDUM NO. 570.8

SUBJECT: Veterinary Services (VS) Policy on Reportable Program Diseases

TO: VS Management Team

I. PURPOSE

This memorandum clarifies the accredited veterinarian’s (AV) role in title 9 of the Code of Federal Regulations (9 CFR), section 161.3(f), by specifying which program diseases are considered reportable to the Area Veterinarian in Charge (AVIC) and the State Animal Health Official.

II. CANCELLATION

VS Memorandum No. 570.8 dated September 27, 2006, is hereby canceled.

III. GENERAL

In 9 CFR 161.3(f), it states “An AV shall immediately report to the Veterinarian in Charge and the State Animal Health Official all diagnosed or suspected cases of a communicable animal disease for which the Animal and Plant Health Inspection Service (APHIS) has a control or eradication program in 9 CFR chapter I, and all diagnosed or suspect cases of any animal disease not known to exist in the United States as provided by Section 71.3(b) of this chapter.” VS has numerous animal health programs, most of which are mandatory, but some are voluntary programs. As a result, not all program diseases need to be reported to the AVIC.

IV. REPORTABLE DISEASES

Listed below are VS reportable diseases. These diseases must be reported immediately to the AVIC and the State Animal Health Official to be in compliance with 9 CFR 161.3(f).

- Bovine spongiform encephalopathy – cattle (9 CFR 94)
- Brucellosis – cattle, bison, swine, and cervidae (9 CFR 78)
- Chronic wasting disease – cervidae (9 CFR 55)
- Dourine – horses and asses (9 CFR 75.1 – listed in CFR but no text)
- Equine infectious anemia – horses, asses, mule, pony, and zebra (9 CFR 75.4)
- Equine viral arteritis (Uniform Methods and Rules APHIS 91-55-075)
- Exotic Newcastle disease – poultry (9 CFR 82.1, 9 CFR 94)
- Infectious salmon anemia (9 CFR 53)
- Pseudorabies – livestock: swine, cattle, sheep, and goats (9 CFR 85)
- Scrapie – sheep and goats (9 CFR 79)
- Spring viremia of carp (9 CFR 53)
- Texas (splenetic) fever – cattle (9 CFR 72)
- Tuberculosis – cattle, bison, and captive cervids (9 CFR 77)
- Vesicular stomatitis – livestock (9 CFR 121)
And all diagnosed or suspect disease not known to exist in the United States including, but not limited to:

African swine fever (9 CFR 53)
Classical swine fever (9 CFR 53)
Contagious pleuropneumonia (9 CFR 53)
Foot-and-mouth disease (9 CFR 53)
Glanders (9 CFR 71.3)
Highly pathogenic avian influenza (9 CFR 53)
Rinderpest (9 CFR 53)
Scabies – sheep (9 CFR 53)
Screwworm (9 CFR 71.3)
Swine Vesicular Disease (9 CFR 53)
Bovine & Equine Piroplasmosis (9 CFR 71, 9 CFR 71)

An AV should also report any clinical signs or syndromes consistent with the above listed diseases. Refer to the National Veterinary Accreditation Program Reference Guide (APHIS 91-55-082) starting on page 6-6, for additional reportable foreign animal diseases and suspicious clinical signs.

V. NONREPORTABLE DISEASES

Listed below are diseases that are covered by regulations in the CFR, but are not considered reportable diseases. AVs do not need to report these diseases to VS to be in compliance with 9 CFR 161.3(f). However, individual States may still require AVs to report these diseases to the State Animal Health Official.

Acute swine erysipelas – swine (9 CFR 71)
Anthrax – all domestic species (9 CFR 71)
Bluetongue – all domestic species (9 CFR 71)
Chlamydiosis – poultry (9 CFR 82.19)
Low pathogenic avian influenza other than H5 or H7 type – (9 CFR 145)
Mycoplasma gallisepticum – poultry (9 CFR 145)
Mycoplasma meleagridis – poultry (9 CFR 145)
Mycoplasma synoviae – poultry (9 CFR 145)
Salmonella enteritidis – poultry (9 CFR 145)
Salmonella gallinarum – poultry (9 CFR 145)
Salmonella pullorum – poultry (9 CFR 145)
Scabies – cattle (9 CFR 71)
Johne disease – cattle (9 CFR 71.3, 9 CFR 80)

John R. Clifford
Deputy Administrator
Veterinary Services