



United States
Department of
Agriculture

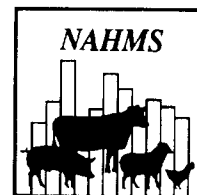
Animal and
Plant Health
Inspection
Service

Veterinary
Services

GENERAL BEEF MANAGEMENT REPORT 1997

National Animal
Health Monitoring
System

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Fort Collins, CO
80521



Form Approved
O.M.B. Number 0579-0079
Approval Expires 9/30/99
Project Code 930

INTRODUCTION

[Rephrase in your own words.]

This survey is part of a program to study management and health practices on beef cattle operations. We need some information about this operation's beef cattle. Response is voluntary.

[Explain the program and show the respondent the Beef '97 brochure and the Producer Information Packet.]

OPERATION DESCRIPTION

1. Were **any Beef Cows**, regardless of ownership, on this operation on **January 1, 1997**?

Yes [Go to **Section A**.] No [Continue.]

2. Has the operation named on the label been sold, rented or turned over to someone else?

Yes [Continue.] No →

3. Was the operator (*name on label*) operating a farm (or ranch) on June 1, 1996?

Yes [Continue.] No [Continue.]

4. What is the name and address of the new operation that has taken over the land?

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

2a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? (*Including growing crops or raising livestock.*)

Yes Don't Know No

[Regardless of answer to above, write a note to explain the situation, then go to Section G on page 19.]

[Go to **Section G** on page 19.]

A - CATTLE INVENTORY AND CALF CROP

1. Now I have some questions about all of the cattle and calves, regardless of ownership, that were on this operation on **January 1, 1997**. Of the total number of cattle and calves on hand January 1, how many were--

1a. **Beef Cows?** *(Include beef heifers that have calved.)* +

Head
110

1b. **Dairy Cows**, whether dry or in milk? *(Include dairy heifers that have calved.)* +

111

1c. **Bulls**, weaned or older? *(Include beef and dairy bulls. Include spotters.)* +

112

2. My next questions are about all of the heifers, **weaned or older**, on the operation. On **January 1**, how many **heifers**, bred or unbred, were on this operation for--
[Heifers that have calved should be recorded as cows in Item 1.]

2a. **Beef Cow replacement?** +

113

(1) How many of these (Item 2a) beef heifers will calve in 1997?

114

2b. **Dairy Cow replacement?** +

115

(1) How many of these (Item 2b) dairy heifers will calve in 1997?

116

2c. How many **other Heifers** were on this operation on **January 1**? +

117

3. On **January 1**, how many **Steers**, weaned or older, were on this operation? +

118

4. How many **unweaned Calves** were on this operation on **January 1**? *(Include heifer, steer and bull calves.)* +

119

5. *[Add Items 1a, 1b, 1c, 2a, 2b, 2c, 3 and 4.]*
Then the total cattle and calves on hand **January 1** was: =

120

Is that correct? *[Make necessary corrections, then continue.]*

[If NO beef cows were on hand January 1 (Item 1a is zero), go to Section G on page 19.]

All the rest of my questions will refer only to the **beef** cow-calf operation.

★6. Next I have some questions about the **calves born to beef cows and heifers during 1996**. How many beef calves were **born alive** on this operation in 1996? Head
 (Exclude calves born dead.) 121

7. I'd like to know how many calves were born in each month of 1996. How many of the (★ Item 6) beef calves were born in --

	%	OR	Head
7a. January? +	122		123
7b. February? +	124		125
7c. March? +	126		127
7d. April? +	128		129
7e. May? +	130		131
7f. June? +	132		133
7g. July? +	134		135
7h. August? +	136		137
7i. September? +	138		139
7j. October? +	140		141
7k. November? +	142		143
7l. December? +	144		145
7m. [Add numbers by month.] Total should equal ★ <u>Item 6</u> (or 100 percent).] =	100%		146

8. During 1996, how many beef calves were **born dead**? Head
147

9. How many of the (★ Item 6) calves born in 1996 had or were expected to have **horns**? Head
148 149

[If NO calves were horned (Item 9 is zero), go to Item 10.]

9a. How many of the horned calves have been or will be **dehorned on this operation**? Head
 (Exclude calves dehorned elsewhere.) 150 151

[If NO calves dehorned on this operation (Item 9a is zero), go to Item 10.]

9b. What is the **average age** of calves when they're dehorned on this operation? Days OR Weeks OR Months
152 153 154
 [Enter response in only one unit.]

A - CATTLE INVENTORY AND CALF CROP

	%	OR	Head
10. How many of the bull calves born on this operation in 1996 were or will be castrated before sale?	155		156
11. Have or will any of the (★ <u>Item 6</u>) calves born on this operation in 1996 be marketed using forward pricing, such as forward cash, futures contract, options, etc.? [Enter 1 for yes or 3 for no.]	Yes <input type="checkbox"/> 1	No <input type="checkbox"/> 3	Code 157

[If NO forward pricing (Item 11 is Code 3), go to Section B.]

11a. How many calves were or will be priced by --

		Head
(1) Forward cash?	+	158
(2) Futures contract?	+	159
(3) Options?	+	160
(4) Some other method? (Specify: _____)	+	161
(5) [Add numbers by type.] Then the total number of calves forward priced was (or will be):	=	162

Is that correct? [Make necessary corrections, then continue.]

1. The next questions are about this operation's breeding practices. Thinking again about the calves born in 1996, I need you to tell me about the replacement heifers and the cows that were bred or intended to be bred to produce those calves. For calving in 1996--

- 1a. How many (column) were BOTH artificially inseminated AND exposed to bulls on this operation? +
 - 1b. How many (column) were ONLY artificially inseminated on this operation? +
 - 1c. How many (column) were ONLY exposed to bulls on this operation? +
 - 1d. How many exposed or artificially inseminated (column) were brought onto this operation? +
 - 1e. How many exposed or artificially inseminated (column) died, were sold or moved off the operation before calving in 1996? -
 - 1f. [Add Items 1a, 1b, 1c and 1d and subtract Item 1e.] Then the total number of (column) on hand for calving on this operation during 1996 was: =
- Is that correct? [Make necessary corrections, then continue.]

REPLACEMENT HEIFERS		COWS	
201		202	
203		204	
205		206	
207		208	
209		210	
211		212	

* 2. How many of these (column) had calves, born alive or dead, in 1996?

REPLACEMENT HEIFERS	COWS
213	214

[If NO replacement heifers/cows died, were sold or moved off before calving (Item 1e is zero), go to Item 4.]

3. How many of the (Item 1e) (column) that died, were sold or moved off before calving were pregnant?

REPLACEMENT HEIFERS	COWS
215	216

- 4. How many of the (* Item 2) (column) that calved in 1996 were--
- 4a. Raised on this operation? +
- 4b. Purchased? +
- 4c. [Add Items 4a and 4b. Total should equal * Item 2 or 100%.] =

REPLACEMENT HEIFERS			COWS		
%	OR	Head	%	OR	Head
217		218	219		220
221		222	223		224
100%		225	100%		226

- 5. During 1996, how many of the (* Item 2) (column) calved in--
- 5a. Individual calving pens (covered or uncovered)? +
- 5b. Covered sheds or barns (without individual pens or outside access)? +
- 5c. Calving lots (corrals or pens that do not allow grazing)? +
- 5d. Special calving pastures that allow increased observation and/or shelter? +
- 5e. Other pastures, open range or other locations? +
- 5f. [Add numbers by calving location. Total should equal * Item 2 (or 100 percent).] =

REPLACEMENT HEIFERS			COWS		
%	OR	Head	%	OR	Head
227		228	229		230
231		232	233		234
235		236	237		238
239		240	241		242
243		244	245		246
100%		247	100%		248

B - BREEDING PRACTICES AND HERD MANAGEMENT

6. During calving in 1996, how many of the (* Item 2) (column) required--

- 6a. Easy pull? +
- 6b. Hard pull (mechanical calf puller or abnormal presentation or position)? +
- 6c. Caesarean? +
- 6d. No assistance? +
- 6e. [Add numbers by type of assistance. Total should equal * Item 2 or 100%.] =

REPLACEMENT HEIFERS			COWS		
%	OR	Head	%	OR	Head
249		250	251		252
253		254	255		256
257		258	259		260
261		262	263		264
100%		265	100%		266

[If NO assisted births (Items 6a, 6b AND 6c are all zero), go to Item 8.]

7. How many of the assisted births (easy pulls, hard pulls and Caesareans) for (column) were attended by a veterinarian?

REPLACEMENT HEIFERS			COWS		
%	OR	Head	%	OR	Head
267		268	269		270

8. During calving in 1996, were (column) observed on a **regular basis**? [Enter 1 for yes or 3 for no.]

REPLACEMENT HEIFERS		COWS	
Code		Code	
Yes = 1	No = 3	Yes = 1	No = 3
271		272	

[If replacement heifers/cows NOT regularly observed during calving (Item 8 is NO), go to Item 9.]

8a. During calving in 1996, how many **times** were (column) **observed** during an average 24-hour period?

REPLACEMENT HEIFERS	COWS
Observations per 24 hours	Observations per 24 hours
273	274

9. How many **hours** are (column) normally **allowed to labor** before assistance is given?

REPLACEMENT HEIFERS	COWS
Hours	Hours
275	276

	One Season	Two or More Seasons	No Set Season	Code
10. Does this operation have one defined breeding season, two or more defined seasons or no set breeding season?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	277

[If two or more seasons or no set season (Item 10 is Code 2 or 3), go to Item 11.]

10a. When did the last breeding season begin?	Beginning Date MM DD YY 278
--	-----------------------------------

10b. When did the last breeding season end?	Ending Date MM DD YY 279
--	--------------------------------

CALVING FACTOR CODE LIST FOR ITEM 10c		
1 TRADITION	4 INCREASING WEANING WEIGHTS	7 TIMING OF HERD MOVEMENT
2 WEATHER	5 MARKET CYCLE	8 OTHER (Specify: _____)
3 FORAGE AVAILABILITY	6 LABOR AVAILABILITY	

10c. <i>[Refer to Respondent Booklet.]</i> Which one of these factors was most used to determine the timing of the last calving season for this operation?	Calving Factor Code 280
--	-------------------------------

11. The next questions are about this operation's **most recent breeding** season. During the last **breeding** season, how many--

11a. Yearling bulls (less than 2 years of age) did this operation use for breeding?	Head 281
11b. Mature bulls (2 years or older) did this operation use for breeding?	282

[If NO bulls used for breeding (Items 11a AND 11b are both zero), go to Item 18.]

12. In general, how many females would you expect--

12a. A yearling bull (less than 2 years of age) to mate or service?	Females per Bull 283
12b. A mature bull (2 years or older) to mate or service?	284

	Yes	No	Code
13. For the last breeding season, did this operation purchase, lease or borrow bulls to breed females?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	285

[If NO bulls purchased, leased or borrowed (Item 13 is NO), go to Item 17.]

	Yes	No	Code
14. Did any bull purchased, leased or borrowed for the last breeding season have a--			
14a. Semen test?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	286
14b. Scrotal measurement?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	287

B - BREEDING PRACTICES AND HERD MANAGEMENT

	Yes	No	Code
15. Were any of the purchased, leased or borrowed bulls older than 18 months OR no longer considered virgin?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	288

[If none older than 18 months or no longer considered virgin (Item 15 is NO), go to Item 17.]

	Yes	No	Code
16. Of the bulls that were older than 18 months OR no longer considered virgin, were they ALL cultured for trich (<u>Trichomonas fetus</u>)?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	289

	Yes	No	Code
17. In preparation for the last breeding season, did any of the bulls on this operation, excluding bulls purchased, leased or borrowed for the season, have a--			
17a. Semen test?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	290
17b. Scrotal measurement?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	291
17c. Culture for trich (<u>Trichomonas fetus</u>)?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	292

18. Now I'd like to know about all the calves weaned on this operation during 1996 . How many--			Head weaned during 1996	[If Head > 0, ask:] What was their average weight at weaning? Pounds
18a. Replacement heifer calves were weaned in 1996?	+	293	294	
18b. Other heifer calves were weaned in 1996?	+	295	296	
18c. Bull and steer calves were weaned in 1996?	+	297	298	
18d. [Add Items 18a, 18b and 18c.] Then the total number of calves weaned in 1996 was:	=	299		
Is that correct? [Make necessary corrections, then continue.]				

	Days	OR	Weeks	OR	Months
19. What is the average age of calves (heifers, bulls and steers) at weaning?	300		301		302
[Enter response in only one unit.]					

WEANING FACTOR CODE LIST FOR ITEM 20		
1 CALF AGE/WEIGHT	4 PHYSICAL CONDITION OF COW	7 TRADITION
2 END OF GRAZING LEASE OR PERMIT	5 MARKET PRICE OR CONTRACT	8 OTHER (Specify: _____)
3 FORAGE AVAILABILITY	6 CASH FLOW	

20. [Refer to Respondent Booklet.] Which one of these factors is most important to you for determining when to wean calves on this operation?	Weaning Factor Code
	303

	Yes	No	Code
21. During 1996, did this operation sell any beef cattle or weaned calves?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	304

[If NO cattle or weaned calves sold (Item 21 is NO), go to Section C.]

METHOD OF SALE CODE LIST FOR ITEM 22

1 AUCTION	3 DIRECT - PRIVATE TREATY	5 FORWARD CONTRACT	7 OTHER (Specify: _____)
2 DIRECT - VIDEO	4 CONSIGNMENT	6 CARCASS BASIS	

22. Now I'd like to ask about beef cattle and weaned calves sold during 1996. I'll need the number of head sold, the method of sale and the average sale weight. During 1996, how many--

- 22a. Steers, weaned or older, were sold?
- 22b. Heifers, weaned or older, were sold for breeding stock?
- 22c. Other heifers, weaned or older, were sold (for slaughter)?
- 22d. Cows were sold for breeding stock?
- 22e. Other cows were sold (for slaughter)?
- 22f. Bulls, weaned or older, were sold for breeding stock?
- 22g. Other bulls, weaned or older, were sold (for slaughter)?

Head sold in 1996	[If Head > 0, ask:]	
	[Refer to Respondent Booklet.]	
	What method of sale was used to sell most of these animals?	What was the average sale weight of these animals?
	Code	Pounds
305	306	307
308	309	310
311	312	313
314	315	316
317	318	319
320	321	322
323	324	325

[If NO cows sold for slaughter (Item 22e is zero), go to Section C.]

23. Of the (Item 22e) cows sold for slaughter, how many were sold primarily because of--

	%	OR	Head
23a. Pregnancy status (open or aborted)?	+	326	327
23b. Other reproductive problems (other than open or aborted)?	+	328	329
23c. Producing poor calves?	+	330	331
23d. Age or bad teeth?	+	332	333
23e. Physical unsoundness, such as injury or lameness?	+	334	335
23f. Bad eye(s)?	+	336	337
23g. Digestive problem?	+	338	339
23h. Respiratory problem?	+	340	341
23i. Udder problem?	+	342	343
23j. Temperament?	+	344	345
23k. Economics, such as drought, herd reduction or market conditions?	+	346	347
23l. Some other factor? (Specify: _____)	+	348	349
23m. [Add numbers by cause. Total should equal Item 22e (or 100 percent).]	=	100%	350

C - ILLNESS AND DEATHS

1. Now I'd like to know about the incidence of illness in this operation's beef cattle and calves. During 1996, how many (column) had--

- 1a. Respiratory disease?
- 1b. Scours or diarrhea?
- 1c. Pinkeye?
- 1d. Cancer eye?
- 1e. Foot rot?
- 1f. Mastitis?
- 1g. A retained placenta or uterine infection?
- 1h. An abortion?
- 1i. Neurologic problems (such as lack of coordination, tremors, nervousness or weakness)?

REPLACEMENT HEIFERS	COWS
Head	Head
401	402
403	404
405	406
407	408
409	410
	411
	412
413	414
415	416

2. During 1996, how many (column) had--

- 2a. Respiratory disease?
- 2b. Scours or diarrhea?
- 2c. Pinkeye?
- 2d. Foot rot?

BEEF CALVES 3 WEEKS OLD OR LESS	UNWEANED BEEF CALVES OVER 3 WEEKS OLD
Head	Head
417	418
419	420
421	422
	423

3. My next questions are about cattle and calves that died or were lost. During 1996, how many **unweaned beef calves** died or were lost from all causes? (*Exclude calves born dead.*)

Number
424

[If NO calves died or were lost before weaning (Item 3 is zero), go to Item 4.]

3a. How many of these (Item 3) calves died or were lost--

- (1) 24 hours or less after birth? +
- (2) More than 24 hours but less than three weeks after birth? +
- (3) Three weeks or more after birth, but before weaning? +
- (4) *[Add Items (1), (2) and (3). Total should equal Item 3 (or 100 percent).]* =

%	OR	Head
425		426
427		428
429		430
100%		431

3b. How many of the (Item 3) deaths or losses of **unweaned calves** in 1996 were caused by--

	%	OR	Head
(1) Digestive problems (bloat, scours, parasites, etc.)? +	432	433	
(2) Respiratory problems (pneumonia, shipping fever, etc.)? +	434	435	
(3) Weather (lightning, drowning, chilling, etc.)? +	436	437	
(4) Calving problems? +	438	439	
(5) Poisoning (nitrates, fescue, noxious weeds, feed, etc.)? +	440	441	
(6) Predators (known or unknown)? +	442	443	
(7) Theft? +	444	445	
(8) Other known reasons? (<i>Specify:</i> _____) +	446	447	
(9) Unknown reasons? +	448	449	
(10) [Add numbers by cause. Total should equal Item 3 (or 100 percent).] =	100%	450	

4. During 1996, how many **beef breeding cattle** (replacement heifers, cows and bulls) died or were lost from all causes? Head
451

[If NO beef breeding cattle died or were lost during 1996 (Item 4 is zero), go to Section D.]

4a. How many of these (Item 4) **cattle deaths** or losses were caused by--

	%	OR	Head
(1) Digestive problems (bloat, scours, parasites, etc.)? +	452	453	
(2) Respiratory problems (pneumonia, shipping fever, etc.)? +	454	455	
(3) Weather (lightning, drowning, chilling, etc.)? +	456	457	
(4) Calving problems? +	458	459	
(5) Poisoning (nitrates, fescue, noxious weeds, feed, etc.)? +	460	461	
(6) Predators (known or unknown)? +	462	463	
(7) Theft? +	464	465	
(8) Other known reasons? (<i>Specify:</i> _____) +	466	467	
(9) Unknown reasons? +	468	469	
(10) [Add numbers by cause. Total should equal Item 4 (or 100 percent).] =	100%	470	

D - HEALTH MANAGEMENT

- | | Yes | No | Code |
|--|----------------------------|----------------------------|------|
| 1. The next questions are about nutrition and health management. Does this operation usually calculate a balanced ration using either published feed values ("book values") or results of feed analyses? . . . | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 501 |

[If NO balanced ration calculated (Item 1 Is NO), go to Item 3.]

- | | | | |
|---|----------------------------|----------------------------|-----|
| 2. Is the balanced ration based on both the animals' requirements and the quality of feedstuffs available? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 502 |
| 3. During 1996, did this operation submit samples of any feed to a laboratory for nutritional analysis? (Include purchased and raised feed.) | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 503 |
| 4. In the past five years , have any of this operation's beef cattle had reproductive or health problems associated with mineral deficiencies, such as phosphorous, copper, selenium, zinc or magnesium? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 504 |

[If NO health problems associated with mineral deficiencies (Item 4 Is NO), go to Item 5.]

- | 4a. Were these health problems associated with deficiencies in-- | Yes | No | Code |
|--|----------------------------|----------------------------|------|
| (1) Phosphorous? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 505 |
| (2) Copper? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 506 |
| (3) Selenium? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 507 |
| (4) Zinc? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 508 |
| (5) Magnesium? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 509 |
| (6) Some other mineral? (Specify: _____) | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 510 |

- | | Yes | No | Code |
|--|----------------------------|----------------------------|------|
| 5. Was a magnesium supplement (such as magnesium oxide) provided to any of this operation's beef cattle during 1996? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 511 |
| 6. During 1996, were any of this operation's beef cattle dewormed ? | <input type="checkbox"/> 1 | <input type="checkbox"/> 3 | 512 |

[If NO cattle dewormed during 1996 (Item 6 Is NO), go to Item 7.]

DEWORMING FACTOR CODE LIST FOR ITEM 6a						
1	TRADITION	3	PRESENCE OF DIARRHEA	5	ADVERTISING	7
2	VETERINARIAN RECOMMENDATION	4	ANIMAL APPEARANCE (ROUGH HAIR COAT, WEIGHT LOSS)	6	RECOMMENDATION OF ANOTHER PRODUCER	OTHER (Specify: _____)

- | | | |
|---|-----------------------|-----|
| 6a. [Refer to Respondent Booklet.] Which one of these factors is most important to you for deciding when to deworm cattle on this operation? | Deworming Factor Code | 513 |
|---|-----------------------|-----|

	Yes	No	Code
7. During 1996, did this operation implant any calves with a growth promotant prior to weaning ?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	514

[If NO calves implanted prior to weaning (Item 7 is NO), go to Item 8.]

	Number
7a. Prior to weaning, how many times were heifers intended for replacement implanted?	515

	Number
7b. Prior to weaning, how many times were all other calves implanted?	516

	Yes	No	Code
8. During 1996, did this operation implant any heifers intended for replacement at weaning ?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	517

	Yes	No	Code
9. During 1996, did this operation implant any other calves at weaning ?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	518

	Yes	No	Code
10. During 1996, did a veterinarian give injections to any of this operation's beef cattle, such as vaccines, antibiotics, injectable dewormers, injectable minerals or vitamins?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	519

[If NO injections given by veterinarian (Item 10 is NO), go to Item 11.]

INJECTION LOCATION CODE LIST FOR ITEM 10a									
1	NECK	2	SHOULDER	3	SIDE OR RIB	4	UPPER REAR LEG OR HIP	5	LOWER REAR LEG

	Percent	[If Percent > 0, ask:] <i>[Refer to Respondent Booklet.]</i> What was the usual location for these injections? Injection Location Code
10a. What percent of the injections given by a veterinarian were given--		
(1) In the muscle or IM?	520	521
(2) Under the skin or SQ?	522	523
(3) By another route? (Specify: _____)	524	525
(4) [Add numbers by route. Total should equal 100 percent.]	100%	

	Yes	No	Code
11. During 1996, did you (the operator), or any unpaid or hired workers , give injections to any of this operation's beef cattle (vaccines, antibiotics, injectable dewormers, injectable minerals or vitamins)?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	526

[If NO injections given by operator or workers (Item 11 is NO), go to Section E.]

INJECTION LOCATION CODE LIST FOR ITEM 11a

1 NECK 2 SHOULDER 3 SIDE OR RIB 4 UPPER REAR LEG OR HIP 5 LOWER REAR LEG

11a. What percent of the injections given by **you** (the operator), and unpaid or hired workers, were given--

- (1) In the muscle or IM? +
- (2) Under the skin or SQ? +
- (3) By another route? (*Specify: _____*) +
- (4) [*Add numbers by route. Total should equal 100 percent.*] =

Percent	[If Percent > 0, ask:] [Refer to Respondent Booklet.] What was the usual location for these injections?
	Injection Location Code
527	528
529	530
531	532
100%	

1. Next, I would like to know about sources of information you may use for operating this cow-calf operation. I have a list of information sources I'll read to you. For each one, I need you to tell me whether it's **Not Important, Somewhat Important or Very Important.** As a source of information for this cow-calf operation, how important are--

	Not Important	Somewhat Important	Very Important	Code
1a. Extension Service, University or Vo-Ag Instructors (personal contact or through publications)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	601
1b. Veterinarians?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	602
1c. Beef magazines or agricultural journals or publications?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	603
1d. Producer associations?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	604
1e. Other producers?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	605
1f. Salespersons (of feed, vaccines, etc.)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	606
1g. Consultants of any kind? (Specify type: _____)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	607
1h. Radio, TV or newspapers?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	608

2. During 1996, did this operation consult a veterinarian for--

	Yes	No	Code
2a. Disease diagnosis or treatment?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	609
2b. Disease prevention?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	610
2c. Information on nutrition?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	611
2d. Information on production management practices (other than health)?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	612
2e. Production or financial analysis, such as "standardized performance analysis (SPA)"?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	613

NUTRITION INFORMATION CODE LIST FOR ITEM 3

1 PRIVATE NUTRITIONISTS	3 VETERINARIANS	5 OTHER PRODUCERS	7 OTHER (Specify: _____)
2 FEED SALESPERSONS OR RETAILERS	4 EXTENSION AGENTS OR SPECIALISTS	6 PRODUCER MAGAZINES	

3 [Refer to Respondent Booklet.] Other than your own personal knowledge or education, which **one** of these sources of information on animal nutrition is **most important** to you?

Nutrition Information Code
614

E - INFORMATION AND IDENTIFICATION

4. For keeping records for this cow/calf operation, do you (the operator) use--

	Yes	No	Code
4a. Hand-written records such as a ledger, notebook or pocket diary?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	615
4b. A computer, located on the operation?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	616
4c. A computer, located off the operation?	<input type="checkbox"/> 1	<input type="checkbox"/> 3	617

5. Do you (the operator) operate this cow-calf operation as your **primary** source of income, as a **supplemental** source of income, or for some other reason, such as for pleasure?

	Primary Source	Supplemental Source	Other Reason	Code
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	618

6. Considering all the hours you work on and off-farm, what percent of your (the operator's) work time is devoted to this cow-calf operation?

Percent
619

IDENTIFICATION CODE LIST FOR ITEM 7		
1 HOT IRON BRAND	5 BRUCellosIS EAR TAG	9 SOME OTHER METHOD (such as neck chain, horn brand, brisket tag, etc.) (Specify: _____)
2 FREEZE BRAND	6 OTHER METAL EAR TAG	
3 EAR NOTCH	7 PLASTIC EAR TAG	
4 MICROCHIP TRANSPONDER OR ELECTRONIC ID	8 EAR TATTOO (other than for brucellosis vaccination)	10 NO ID USED

7. [Refer to Respondent Booklet.]
Now I need to know about the methods you use for identifying this operation's beef cattle. HERD IDENTIFICATION means all animals have the same ID. INDIVIDUAL IDENTIFICATION means individual animals have unique IDs. Which of these methods do you use for--

7a. Herd identification?

7b. Individual calf identification?

7c. Individual cow identification?

IDENTIFICATION CODE			
[Enter codes for up to 4 methods. If more than 4 methods used, probe for 4 most used methods.]			
Method 1 Code	Method 2 Code	Method 3 Code	Method 4 Code
620	621	622	623
624	625	626	627
628	629	630	631

[If NO individual cow identification methods used (Item 7c is Code 10), go to Section F.]

8. On how many of this operation's beef cows do you use some form of individual identification?

%	OR	Head
632		633

1. Now I'd like you to tell me about other animals that may have had physical contact with this operation's female breeding herd during 1996. The other animals may have been located on this operation or on adjacent land. Physical contact is nose-to-nose contact or sniffing, touching or licking each other, including through a fence.

			[Ask for all:]		
			In 1996, were there [category] on this operation?		
During 1996, did beef cows, beef replacement heifers or their feed, minerals or water supply have any physical contact with [category]?					
Yes	No	Code	Yes	No	Code
<input type="checkbox"/> 1	<input type="checkbox"/> 3	701	<input type="checkbox"/> 1	<input type="checkbox"/> 3	702
1a. Pigs?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	703	<input type="checkbox"/> 1	<input type="checkbox"/> 3	704
1b. Sheep?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	705	<input type="checkbox"/> 1	<input type="checkbox"/> 3	706
1c. Goats?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	707	<input type="checkbox"/> 1	<input type="checkbox"/> 3	708
1d. Dairy cattle?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	709	<input type="checkbox"/> 1	<input type="checkbox"/> 3	710
1e. Chickens, other poultry or their litter?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	711	<input type="checkbox"/> 1	<input type="checkbox"/> 3	712
1f. Horses or other equine (such as ponies, donkeys, mules, burros, etc.)?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	713	<input type="checkbox"/> 1	<input type="checkbox"/> 3	714
1g. Exotic species (such as llamas, alpacas, etc.)?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	715	<input type="checkbox"/> 1	<input type="checkbox"/> 3	716
1h. Dogs?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	717	<input type="checkbox"/> 1	<input type="checkbox"/> 3	718
1i. Cats?					
<input type="checkbox"/> 1	<input type="checkbox"/> 3	719			
1j. Wild deer or other members of the deer family (such as elk, moose, etc.)?					

2. Now I am going to be asking you about this operation's entire cattle herd, including beef stockers and feeders and all dairy cattle (if any). During 1996, were any Beef OR Dairy Cattle brought onto this operation?

Yes = 1 No = 3 Code

720

[If NO cattle brought onto operation (Item 2 Is NO), go to Section G.]

2a. How many cattle (both beef and dairy) were brought onto this operation during 1996?

Head

721

2b. [Record Item 2a number of head by category and ask about quarantine practices for each.]

	[If Yes, ask:]	[If > 0, ask:]	[If any quarantined, ask:]
Were any [category] brought onto this operation during 1996?	How many [category] were brought onto this operation?	How many were quarantined or separated upon arrival at the operation?	How long were they quarantined or separated?
	Head	Head	Days
(1) Unweaned calves (all types)? <input type="checkbox"/> Yes <input type="checkbox"/> No	722	723	724
(2) Beef heifers weaned, but not bred? <input type="checkbox"/> Yes <input type="checkbox"/> No	725	726	727
(3) Bred beef heifers? <input type="checkbox"/> Yes <input type="checkbox"/> No	728	729	730
(4) Beef cows? <input type="checkbox"/> Yes <input type="checkbox"/> No	731	732	733
(5) Weaned bulls (all types)? <input type="checkbox"/> Yes <input type="checkbox"/> No	734	735	736
(6) Weaned steers (all types)? <input type="checkbox"/> Yes <input type="checkbox"/> No	737	738	739
(7) Dairy heifers and cows? <input type="checkbox"/> Yes <input type="checkbox"/> No	740	741	742
(8) [Add Items (1) - (7). Total should equal Item 2a.]	743		

1. **IF TOTAL BEEF COWS ON HAND (SECTION A, ITEM 1a) ARE 5 HEAD OR MORE, ASK RESPONDENT TO SIGN VMO CONSENT FORM.**

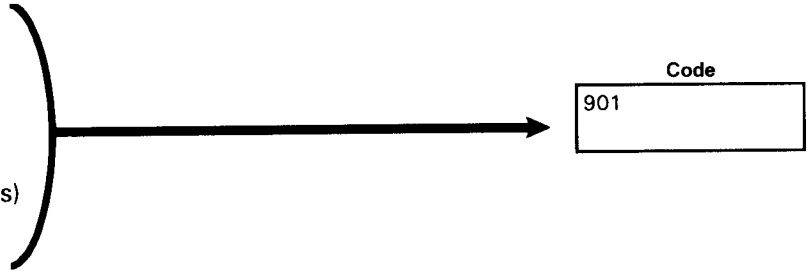
That concludes the interview. Thank you so much for your time.

[Go to back page. Complete response codes and provide directions for VMO if consent form signed.]

Respondent's Name: _____ Phone: (_____) _____ - _____ Date: _____

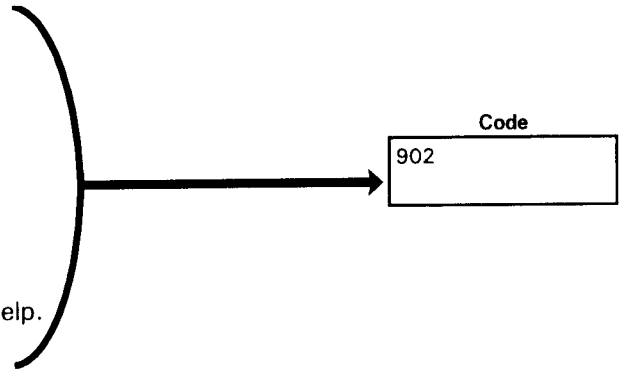
[Interview response code - check one and enter code.]

- 2 - Zero Beef Cows on Hand
- 3 - Not Operating Farm/Ranch
- 4 - Refused
- 5 - Complete, VMO Consent Signed
- 6 - Complete, VMO Consent Refused
- 7 - Complete, Ineligible for VMO Stage (< 5 cows)
- 8 - Out of Scope
- 9 - Inaccessible



[If response code is 4 or 6, check the reason below that best fits and enter code.]

- 1 - Does not want to commit time to the project.
- 2 - Does not want involvement with government veterinarian, or has had previous bad experience with veterinarian.
- 3 - Does not have necessary records available.
- 4 - Has participated in too many surveys.
- 5 - Does not want outside people on the beef cattle operation.
- 6 - A bad time of year.
- 7 - Currently has or recently had disease problem with herd.
- 8 - Believes that surveys and reports hurt the farmer more than help.
- 9 - Other, no reason given or miscellaneous reason.



If VMO consent form signed, please provide directions to this operation for VMO:

Respondent		Enum.	Eval.
1-Op/Ptnr	101	098	100
2-Sp			
3-Acct/Bkpr			
4-Oth			
S/E Name			

Public reporting burden for this survey is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Federal agencies may not conduct or sponsor, and a person is not required to respond to, information collection unless it displays a currently valid OMB number. Send comments regarding this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, to USDA Clearance Officer, Stop 7602, Project Code 0579-0079, 1400 Independence Ave SW, Washington, DC 20250-7602.