Dairy 2007
VS Initial Visit
(February 26 – April 30, 2007)

Section A—Inventory

1. How many dairy cattle of the following types are housed on this operation today?
   a. Lactating cows ........................................................................................................... V001 _____
   b. Dry cows .................................................................................................................... V002 _____
   c. Bred heifers ............................................................................................................. V003 _____

2. How many dairy heifer calves were weaned (removed from a liquid ration) while on this operation in the last 12 months? ................................................................ V004 _____

State FIPS:    Operation #:    Interviewer:    Date:
2 digits        4 digits        Initials        (mm/dd/yy)
Section B—Biosecurity

3. Which of the following categories best describes how familiar you are with the listed diseases?

<table>
<thead>
<tr>
<th>Disease Description</th>
<th>V005</th>
<th>V006</th>
<th>V007</th>
<th>V008</th>
<th>V009</th>
<th>V010</th>
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<th>V026</th>
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</thead>
<tbody>
<tr>
<td>Fairly knowledgeable</td>
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<td>Know some basics</td>
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<tr>
<td>Recognized the name, not much else</td>
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<tr>
<td>Haven’t heard of it before</td>
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<td>a. Foot-and-mouth disease .......</td>
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<td>b. Heartwater                                                               ............</td>
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<td>c. Bovine spongiform encephalopathy (BSE or mad cow disease) ...............</td>
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<td>d. Screwworm ...........                                                   ..........</td>
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<td>e. Johne’s disease (paratuberculosis) ..................................</td>
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<td>f. Bluetongue ......................................</td>
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<td>g. Vesicular stomatitis ..........</td>
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<td>h. Anthrax ...........................................</td>
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<td>i. Mycoplasma mastitis...............</td>
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<td>j. Hemorrhagic bowel syndrome (HBS) (Jejunal hemorrhage syndrome) ..........</td>
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<td>k. Bovine viral diarrhea (BVD) .............</td>
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<td>l. <em>Leptospira hardjo bovis</em> .................</td>
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</table>

4. If an outbreak of foot-and-mouth disease (or other foreign animal disease) occurred in the U.S., how likely would you be to use the following sources to get information about the disease?

<table>
<thead>
<tr>
<th>Source Description</th>
<th>Very likely</th>
<th>Somewhat likely</th>
<th>Not likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Other dairy producers ..................................</td>
<td>☐</td>
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<tr>
<td>b. Private veterinarian ....................................</td>
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<td>c. Extension agent .........................................</td>
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<td>d. Dairy organization or cooperative ......................</td>
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<tr>
<td>e. Magazines ................................................</td>
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<td>f. Internet ..................................................</td>
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<tr>
<td>g. State Veterinarian’s office ................................</td>
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<tr>
<td>h. U.S. Department of Agriculture ..........................</td>
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<td>i. Television/newspapers ...................................</td>
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<td>j. Other (specify: ___________)</td>
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</table>
5. If you had an animal you suspected of having foot-and-mouth disease (or other foreign animal disease) on your operation, would you contact the following resources?

a. Extension agent/university ................................................................. V027 □ 1 Yes □ 3 No
b. State Veterinarian’s office .................................................................... V028 □ 1 Yes □ 3 No
c. U.S. Department of Agriculture ............................................................... V029 □ 1 Yes □ 3 No
d. Private veterinarian ............................................................................... V030 □ 1 Yes □ 3 No
e. Feed company or milk cooperative representative ............................... V031 □ 1 Yes □ 3 No
f. Other (specify: ______________________) V032OTH ................................ V032 □ 1 Yes □ 3 No

6. For each of the following signs associated with a potential herd disease problem, at what level of change (percentage or number) would you contact a veterinarian for assistance? (Enter N/A if you would never contact a veterinarian for assistance.)

<table>
<thead>
<tr>
<th>Sign</th>
<th>%</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>a. Decline in total daily milk production (pounds)</td>
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<td>OR</td>
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<td>b. Milk cows exhibiting fever within a short time period</td>
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<td>OR</td>
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<tr>
<td>c. Milk cows dying within a short time period</td>
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<td>OR</td>
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<tr>
<td>d. Milk cows aborting within a short time period</td>
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<td>OR</td>
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<td>e. Other (specify: ______________________)</td>
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<td>OR</td>
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</table>

7. On average, how many paid and unpaid people, including owners and family members, are assigned duties directly related to operation of the dairy? (Exclude people that work exclusively with crop activities.)

<table>
<thead>
<tr>
<th>Role</th>
<th>Number</th>
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<tbody>
<tr>
<td>a. Full-time</td>
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<tr>
<td>b. Part-time</td>
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</tbody>
</table>

8. Are you using any of the following biosecurity practices?

a. Guidelines to determine which visitors are allowed in animal areas ........................................... V040 □ 1 Yes □ 2 No visitors allowed □ 3 No
b. Guidelines regarding foreign travel by employees .......... V041 □ 1 Yes □ 2 No employees □ 3 No
c. Written standard operating procedures (SOPs) (other than milking procedures) ......................................................... V042 □ 1 Yes □ 3 No
d. Training for employees in performing these practices? .. V043 □ 1 Yes □ 2 No employees □ 3 No

9. During an average week, how many visits were made by people who came onto your operation, including employees, veterinarians, neighbors, nutritionists, milk haulers, etc.? ........................................ V044 ______ visits/week

Of the visits made above, how many involved contact with animals on your operation? ........................................... V065 ______ animal contact visits
10. If this operation sends heifers off site and cattle are not commingled with cattle from other operations, then consider “no incoming cattle” for this animal class. If heifers are commingled off site, consider incoming cattle and answer appropriately.

In the last 12 months, were you aware of the source and geographic origin of all, some, or none of the cattle coming onto this operation? .................................................. □ 1 All □ 2 Some □ 3 No incoming cattle □ 4 None

11. Have you used any of the following practices in the last 12 months?
   a. Footbaths for visitors entering animal areas ................. □ 1 Yes □ 2 No visitors □ 3 No
   b. Disposable or clean boots for visitors entering animal areas .................................................. □ 1 Yes □ 2 No visitors □ 3 No
   c. Insect control (such as sprays, foggers, treated ear tags, products administered to animals [topical/oral], etc.) .................................................. □ 1 Yes □ 3 No
   d. Rodent control (such as cats, traps, chemical/bait, etc.) .................................................. □ 1 Yes □ 3 No
   e. Bird control (such as traps, noise, chemical/bait, etc.) .................................................. □ 1 Yes □ 3 No
   f. Limit cattle contact with other livestock, elk, and deer .................................................. □ 1 Yes □ 3 No
   g. Control access to cattle feed by other livestock and wildlife, such as elk, deer, and raccoons .................................................. □ 1 Yes □ 3 No
   h. Closed herd (all replacements are from this operation, no contact with cattle from other operations) .................................................. □ 1 Yes □ 3 No
   i. Restrictions on vehicles entering animal area .................................................. □ 1 Yes □ 3 No
   j. Restrictions on employee livestock ownership outside this operation .................................................. □ 1 Yes □ 2 No employees □ 3 No

12. In the last 12 months, how often did this operation use the same equipment to handle both manure and cattle feed? ........................................ □ 1 Routinely □ 2 Rarely □ 3 Never

   If Routinely or Rarely, which best describes cleaning procedures usually done with equipment after handling manure and prior to handling feed? (Check one only.)
   □ 1 Wash equipment with water or steam only
   □ 2 Chemically disinfect only
   □ 3 Wash equipment and chemically disinfect
   □ 4 Other (specify: _________________________) □ 057OTH
   □ 5 No procedures done □ 057

13. In the last 12 months, did this operation share any heavy equipment with other livestock operations (i.e., tractors, feeding equipment, manure spreaders, trailers)? .................................................. □ 1 Yes □ 3 No

   [If Item 13 = NO, SKIP to Item 16.]

14. In the last 12 months, how many times did this operation share equipment with other operations? .................................................. □ 059
15. Which of the following best describes this operation’s cleaning procedures usually done with shared equipment prior to use on your operation? (Check one only.)

- □ 1 Wash equipment with water or steam only
- □ 2 Chemically disinfect only
- □ 3 Wash equipment and chemically disinfect
- □ 4 Other (specify: _________________________)
- □ 5 No procedures done

16. Does this operation participate in any of the following kinds of Johne’s disease control or certification programs?

a. A unique program developed specifically for this operation ..................... V061 □ Yes □ No
b. A State-sponsored program...................................................................... V062 □ Yes □ No
c. Other (specify: ______________________________) V063 □ Yes □ No

17. Do cows on this operation usually calve in:

a. Multiple animal area/pen? ......................................................................... V064 □ Yes □ No
b. Individual animal area/pen cleaned between each calving?..................... V065 □ Yes □ No
c. Individual animal area/pen cleaned after two or more calvings?.............. V066 □ Yes □ No
d. Other (specify: ______________________________) V067 □ Yes □ No

18. How many hours are cows in the usual calving area/pen:

a. Prior to calving? (Enter 0 if moved immediately; answer to nearest quarter hour if less than 1 hour.) .......................... V068 □ Yes □ No
b. After calving? (Enter 0 if removed immediately; answer to nearest quarter hour if less than 1 hour.) ............................... V069 □ Yes □ No

19. Do any of the following cows enter the usual calving area/pen?

a. Sick cows ............................................................................... V070 □ Yes □ No
b. Lame cows ............................................................................. V071 □ Yes □ No
c. Johne’s test-positive cows ..................................................... V072 □ Yes □ Don’t test □ No
d. Other (specify: __________________________) V073 □ Yes □ No

20. What percentage of calves are born in the usual calving area/pen? .............. V074 □ Yes □ No

21. Is colostrum from Johne’s test-positive cows fed to calves?........ V075 □ Yes □ Don’t test □ No

Section C—Source of Replacements

22. How many dairy cow replacements entered the milking herd in the last 12 months? V076 □ Yes □ No
23. A shipment refers to movement of one or a group of animals at one time, regardless of how many trailers or trucks were used.

Of the dairy cow replacements that entered the milking herd in the last 12 months from the following sources, how many were obtained and how many shipments were required to move the animals to your operation?

<table>
<thead>
<tr>
<th>Head</th>
<th>Shipments</th>
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</thead>
<tbody>
<tr>
<td>a. Born on this operation and raised on the operation? ....................... V077</td>
<td>N/A</td>
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<tr>
<td>b. Born on this operation and raised by off-site heifer grower? ...... V078/084</td>
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<tr>
<td>c. Purchased directly from other dairies ......................................... V079/085</td>
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<td>d. Purchased from a dealer............................................................. V080/086</td>
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<td>e. Purchased from auction markets ................................................... V081/087</td>
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<td>f. Purchased from other source (specify: __________) V082OTH ....... V082/088</td>
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Total (should equal Item 22) ..................................................... V083

24. Were any of the following diseases confirmed via laboratory testing of cattle on this operation in the last 12 months, and if “Yes,” which diagnostic samples were used to confirm the disease(s)? If “Other” is marked, write specifics in margin.

<table>
<thead>
<tr>
<th>Disease</th>
<th>Animals with Confirmed Disease (Y/N)</th>
<th>Aborted Fetus</th>
<th>Blood</th>
<th>Ear Notch</th>
<th>Feces</th>
<th>Milk</th>
<th>Tissues at Necropsy</th>
<th>Urine</th>
<th>Other</th>
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<tbody>
<tr>
<td>Example Disease</td>
<td>Y</td>
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<td>X</td>
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<tr>
<td>Bovine Leukosis Virus (BLV)</td>
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<td>V119</td>
</tr>
<tr>
<td>Bovine Viral Diarrhea (BVD)</td>
<td>V090</td>
<td>V095</td>
<td>V100</td>
<td>V105</td>
<td>V106</td>
<td>V109</td>
<td>V113</td>
<td></td>
<td>V120</td>
</tr>
<tr>
<td>Leptospirosis</td>
<td>V091</td>
<td>V096</td>
<td>V101</td>
<td></td>
<td></td>
<td></td>
<td>V114</td>
<td>V118</td>
<td>V121</td>
</tr>
<tr>
<td>Neospora</td>
<td>V092</td>
<td>V097</td>
<td>V102</td>
<td></td>
<td></td>
<td></td>
<td>V115</td>
<td></td>
<td>V122</td>
</tr>
<tr>
<td>Salmonella</td>
<td>V093</td>
<td>V098</td>
<td>V103</td>
<td></td>
<td></td>
<td></td>
<td>V107</td>
<td>V110</td>
<td>V116</td>
</tr>
</tbody>
</table>

| | Johne’s disease (Mycobacterium paratuberculosis) | (If No, see next row) V094 |  |  |  |  |  |  |  |
| | | | | | | | | | |

If Johne’s disease was confirmed on this operation more than 12 months ago, did any cows show clinical signs in last 12 months? V094A □ Yes □ No

25. How many abortions occurred in the last 12 months? ..................................................... V125
26. How many of the following types of samples were submitted to determine the cause of abortion? (Samples could be collected and submitted by a veterinarian or submitted directly to a lab by the producer.)

<table>
<thead>
<tr>
<th>Sample Type</th>
<th>Code</th>
<th>Number submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placenta</td>
<td>V126</td>
<td>_____</td>
</tr>
<tr>
<td>Entire fetus</td>
<td>V127</td>
<td>_____</td>
</tr>
<tr>
<td>Serum of dam</td>
<td>V128</td>
<td>_____</td>
</tr>
<tr>
<td>Other (specify: ___________________)</td>
<td>V129OTH</td>
<td>V129 _____</td>
</tr>
</tbody>
</table>

27. For any aborted fetuses that were not submitted for diagnosis, which of the following best describes the reason for not doing so? (Check one only.)

□ 1 Cost
□ 2 Lack of information obtained from previous abortion submissions
□ 3 Inconvenience (e.g., getting fetus to the laboratory)
□ 4 Abortion not perceived as a problem on this operation
□ 5 Other (specify: ___________________) V130OTH V130

28. If abortion diagnostics were performed at no cost, what percentage of aborted fetuses would you submit to a veterinary diagnostic lab for diagnosis? ................................................................. V131 _____ %

Section E—General Management

**NOTE: In Items 29 and 30, “outside area” refers to areas without permanent roof structures.**

29. Which of the following best describes the primary outside area that lactating cows routinely have access to during the summer and winter seasons? (Enter one code only for each season. If no outside access, enter 4.)

<table>
<thead>
<tr>
<th>Area</th>
<th>Code</th>
<th>Summer Code</th>
<th>Winter Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pasture</td>
<td>V132</td>
<td>code</td>
<td>code</td>
</tr>
<tr>
<td>Concrete alleyway or pen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dry lot</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td></td>
<td>code</td>
<td>code</td>
</tr>
<tr>
<td>Other (specify: ______________)</td>
<td>V132OTH</td>
<td>V132/133 code</td>
<td>code</td>
</tr>
</tbody>
</table>

30. Which of the following best describes the primary outside area that dry cows routinely have access to during summer and winter seasons? (Enter one code only for each season. If no outside access, enter 4.)

<table>
<thead>
<tr>
<th>Area</th>
<th>Code</th>
<th>Summer Code</th>
<th>Winter Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pasture</td>
<td>V134</td>
<td>code</td>
<td>code</td>
</tr>
<tr>
<td>Concrete alleyway or pen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dry lot</td>
<td></td>
<td>code</td>
<td>code</td>
</tr>
<tr>
<td>None</td>
<td></td>
<td>code</td>
<td>code</td>
</tr>
<tr>
<td>Other (specify: ______________)</td>
<td>V134OTH</td>
<td>V134/135 code</td>
<td>code</td>
</tr>
</tbody>
</table>
31. Which of the following is the predominant flooring type lactating cows stand or walk on when not being milked, excluding concrete feed pad? (Check one only.)

☐ 1 Concrete–groove/textured
☐ 2 Concrete–slat
☐ 3 Concrete–smooth
☐ 4 Rubber mats over concrete
☐ 5 Pasture
☐ 6 Dirt
☐ 7 Other (specify: ___________________________) V136OTH

If Item 31 = 5, 6, or 7, SKIP to Item 33.

32. Did any of the following cow areas have rubber belting or similar flooring that reduced the time cows spent standing directly on concrete?

a. Immediately in front of feed bunk ................................................................. V137  ☐ 1 Yes ☐ 3 No
b. Walkway to parlor ..................................................................................... V138  ☐ 1 Yes ☐ 3 No
c. Holding pen............................................................................................... V139  ☐ 1 Yes ☐ 3 No
d. Other (specify: ____________________) V140OTH ....................................... V140  ☐ 1 Yes ☐ 3 No

33. How would you best characterize the surface moisture of the ground or flooring lactating cows stand on most of the time in summer and winter seasons? (Enter one code only for each season.)

(1) Usually dry
(2) Wet about half the time
(3) Almost always wet, but no standing water
(4) Usually standing water or slurry .......................................... V141/142 _____ code _____ code

34. If covered freestall barns are used to house lactating cows, which type of barn setup houses the majority of those cows? (Check one only.)

☐ 1 2-row
☐ 2 3-row
☐ 3 4-row
☐ 4 6-row
☐ 5 Other (specify: ___________________________) V143OTH
☐ 6 Not housed in a covered freestall barn V143
35. During the summer months, were the following heat abatement methods provided to lactating and dry cows?

<table>
<thead>
<tr>
<th>Method</th>
<th>Lactating</th>
<th>Dry</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Shade (other than inside building)</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>b. Sprinklers or misters</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>c. Fans</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>d. Tunnel ventilation</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>e. Other (specify: ________________)</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
</tbody>
</table>

36. During the last 90 days, did you use any of the following bedding types for lactating and dry cows?

<table>
<thead>
<tr>
<th>Bedding Type</th>
<th>Lactating</th>
<th>Dry</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Straw and/or hay</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(2) Sand</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(3) Sawdust/wood products</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(4) Composted/dried manure</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(5) Rubber mats</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(6) Rubber tires</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(7) Shredded newspaper</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(8) Mattresses</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(9) Corn cobs and stalks</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(10) Waterbeds</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
<tr>
<td>(11) Other (specify: ________________)</td>
<td>□ 1 Yes</td>
<td>□ 3 No</td>
</tr>
</tbody>
</table>

37. Enter the number of the bedding type (1-11) from Item 36 above that was used primarily during the last 90 days for both lactating and dry cows?

(Enter N/A if no bedding used.) □ □

Lactating | Dry
38. During the last 90 days, did this operation feed **lactating** and **dry** cows:

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Lactating</th>
<th>Dry</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Alfalfa hay/haylage?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>b. Corn silage?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>c. Clover as forage or pasture?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>d. Whole cottonseed?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>e. Cottonseed meal or hulls?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>f. Whole soybeans or soybean meal?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>g. Bakery byproducts?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>h. Brewery byproducts?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>i. Corn?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>j. Barley?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>k. Wheat? (not silage)</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>l. Oats? (not silage)</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>m. Green chop?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>n. Feather/poultry meal?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>o. Fish meal?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>p. Fat/tallow?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>q. Porcine meat and bone meal?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
<tr>
<td>r. Blood meal?</td>
<td>1 Yes</td>
<td>3 No</td>
</tr>
</tbody>
</table>

39. For the majority of **lactating** cows, which best describes the feed line? *(Check one only.)*

- 1 Tie stall
- 2 Stanchion
- 3 Post and rail
- 4 Head locks
- 5 Elevated feed bunk in pen
- 6 Other (specify: ________________________)
40. In the last 12 months, did any cows ever drink from:

   a. A single cup/bowl waterer used by one cow only?... V215/220 □ 1 Yes □ 3 No
   b. A single cup/bowl waterer used by multiple cows?... V216/221 □ 1 Yes □ 3 No
   c. A water tank or trough (covered or uncovered)? V217/222 □ 1 Yes □ 3 No
   d. A lake, pond, stream, river, etc.? V218 □ 1 Yes □ 3 No N/A
   e. Another source? (specify: ___________) V219OTH... V219/223 □ 1 Yes □ 3 No

41. Is the water that cows drink usually chlorinated? V224 □ 1 Yes □ 2 Don’t know □ 3 No

42. Which of the following best describes how lactating cows are fed? (Check one only.)
   □ 1 Feed all lactating cows the same ration
   □ 2 Feed individuals or groups based on production/stage of lactation
   □ 3 Feed individuals or groups based on lactation number
   □ 4 Feed individuals or groups based on criteria other than production/stage of lactation or lactation number

43. Does this operation feed anionic salts (e.g., BioChlor, SoyChlor, ammonium chloride, etc.), to prevent milk fever, to:
   a. Close-up cows (cows that are close to calving)? V226 □ 1 Yes □ 3 No
   b. Springing heifers? V227 □ 1 Yes □ 3 No

44. Does this operation separate close-up cows from other dry cows? V228 □ 1 Yes □ 3 No

45. Which of the following best describes this operation’s use of milk urea nitrogen (MUN) testing to determine ration composition? (Check one only.)
   □ 1 Use routinely
   □ 2 Use only if have a problem
   □ 3 Never use

46. Permanent removals are defined as cows removed from the herd for reasons other than death. These include cows sent to other dairies, auction markets, or slaughter plants.

   How many cows were permanently removed in the last 12 months? V230

47. During an average month, how many shipments of cows does this operation make to transport permanently removed cows to:
   a. Another dairy? V231
   b. Market, auction, or stockyard? V232
   c. Packer or slaughter plant? V233
   d. Other? (specify: ___________) V234OTH
48. During the last 12 months, what percentage or how many of these permanently removed cows were:

<table>
<thead>
<tr>
<th>Percentage/Number Removed</th>
<th>%</th>
<th>OR</th>
<th># removed</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Less than 50 days in milk? (early lactation)</td>
<td></td>
<td>V235/239</td>
<td></td>
</tr>
<tr>
<td>b. 50 to 199 days in milk? (mid lactation)</td>
<td></td>
<td>V236/240</td>
<td></td>
</tr>
<tr>
<td>c. 200 days or more in milk? (late lactation)</td>
<td></td>
<td>V237/241</td>
<td></td>
</tr>
<tr>
<td>d. Dry cows</td>
<td></td>
<td>V238/242</td>
<td></td>
</tr>
<tr>
<td>Total (should equal 100% or Item 46)</td>
<td></td>
<td>V243</td>
<td>100%</td>
</tr>
</tbody>
</table>

49. During the last 12 months, what percentage or how many of these permanently removed cows were:

<table>
<thead>
<tr>
<th>Percentage/Number Removed</th>
<th>%</th>
<th>OR</th>
<th># removed</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. First lactation?</td>
<td></td>
<td>V244/247</td>
<td></td>
</tr>
<tr>
<td>b. 2 to 4 lactations?</td>
<td></td>
<td>V245/248</td>
<td></td>
</tr>
<tr>
<td>c. 5 lactations or more?</td>
<td></td>
<td>V246/249</td>
<td></td>
</tr>
<tr>
<td>Total (should equal 100% or Item 46)</td>
<td></td>
<td>V250</td>
<td>100%</td>
</tr>
</tbody>
</table>

Section F—Milk Quality and Milking Procedures

50. Which of the following best describes the average bulk tank somatic cell count for milk shipped during the last 12 months? (Check one only.)

- ☐ 1. Less than 100,000 cells/ml
- ☐ 2. 100,000 to 199,000 cells/ml
- ☐ 3. 200,000 to 299,000 cells/ml
- ☐ 4. 300,000 to 399,000 cells/ml
- ☐ 5. 400,000 to 499,000 cells/ml
- ☐ 6. 500,000 to 599,000 cells/ml
- ☐ 7. 600,000 cells/ml or greater

51. Who milks the majority of cows on this operation? (Check one only.)

- ☐ 1. Owner/operator
- ☐ 2. Family member(s) of owner
- ☐ 3. Hired worker(s) (non-family member)
52. How frequently are milkers trained?  
(Check one only.)
- □ 1 No milker training
- □ 2 Trained as new employees only
- □ 3 1 to 2 times per year for all milkers
- □ 4 3 to 4 times per year for all milkers
- □ 5 More than 4 times per year for all milkers
- □ 6 Other (specify: __________________________) V253OTH

If Item 52 = 1 (No milker training), SKIP to Item 54.

53. Which of the following training methods are used on this operation for training milkers?
   a. Video training ............................................................................................ V254 □ 1 Yes □ 3 No
   b. Discussion/lecture ..................................................................................... V255 □ 1 Yes □ 3 No
   c. On-the-job training .................................................................................... V256 □ 1 Yes □ 3 No
   d. Other training (specify: ___________________) V257OTH............................ V257 □ 1 Yes □ 3 No

54. How many times per day are the majority of fresh cows milked?  
(Check one only.)
- □ 1 Once a day
- □ 2 Twice a day
- □ 3 Three times a day
- □ 4 More than three times a day ................................................................. V258

55. How many times per day are the majority of cows, other than fresh cows, milked?  
(Check one only.)
- □ 1 Once a day
- □ 2 Twice a day
- □ 3 Three times a day
- □ 4 More than three times a day ................................................................. V259

56. Which of the following best describes how frequently forestripping occurs on this operation?  
(Check one only.)
- □ 1 Forestrip all cows
- □ 2 Forestrip some cows (i.e., with mastitis or fresh cows)
- □ 3 Do not forestrip any cows V260

If Item 56 = 3, SKIP to Item 58.

57. When is forestripping performed?  
(Check one only.)
- □ 1 Prior to teat disinfection
- □ 2 After teat disinfection but prior to drying teats
- □ 3 After disinfection and/or drying V261
58. Ask the Producer to briefly describe his/her premilking teat preparation routine and determine the General Method used. After the General Method is determined, pick the Specific Procedure(s) that are typically used. It is likely that only one Specific Procedure will be checked.

If more than one procedure is checked, indicate the order in the overall routine. “Single-use” and “multiple-use” refer to cows, not teats.

<table>
<thead>
<tr>
<th>General Method</th>
<th>Specific Procedure</th>
<th>Check all that apply</th>
<th>Order in routine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wash pen</td>
<td>Wash animals in pen prior to entering parlor</td>
<td>V262</td>
<td>V283</td>
</tr>
<tr>
<td></td>
<td><em>With disinfectant</em></td>
<td>V263</td>
<td>V284</td>
</tr>
<tr>
<td></td>
<td><em>Without disinfectant</em></td>
<td>V264</td>
<td>V285</td>
</tr>
<tr>
<td>Water hose</td>
<td>Single-use cloth towel</td>
<td>V265</td>
<td>V286</td>
</tr>
<tr>
<td></td>
<td>Multi-use cloth towel</td>
<td>V266</td>
<td>V287</td>
</tr>
<tr>
<td></td>
<td>Single-use paper towel</td>
<td>V267</td>
<td>V288</td>
</tr>
<tr>
<td></td>
<td>Multi-use paper towel</td>
<td>V268</td>
<td>V289</td>
</tr>
<tr>
<td>Dry wipe</td>
<td><em>Commercial teat wipes, single use</em></td>
<td>V269</td>
<td>V290</td>
</tr>
<tr>
<td></td>
<td><em>Commercial teat wipes, multiple use</em></td>
<td>V270</td>
<td>V291</td>
</tr>
<tr>
<td></td>
<td><em>Towel using labeled disinfectant, single use</em></td>
<td>V271</td>
<td>V292</td>
</tr>
<tr>
<td></td>
<td><em>Towel using labeled disinfectant, multiple use</em></td>
<td>V272</td>
<td>V293</td>
</tr>
<tr>
<td></td>
<td><em>Towel using nonlabeled/homemade disinfectant, single use</em></td>
<td>V273</td>
<td>V294</td>
</tr>
<tr>
<td></td>
<td><em>Towel using nonlabeled/homemade disinfectant, multiple use</em></td>
<td>V274</td>
<td>V295</td>
</tr>
<tr>
<td>Wet wipe</td>
<td><em>Multiple use sponge with disinfectant</em></td>
<td>V275</td>
<td>V296</td>
</tr>
<tr>
<td>Predip</td>
<td>Applied with sprayer using labeled disinfectant</td>
<td>V276</td>
<td>V297</td>
</tr>
<tr>
<td></td>
<td>Applied with sprayer using nonlabeled/homemade disinfectant</td>
<td>V277</td>
<td>V298</td>
</tr>
<tr>
<td></td>
<td>Applied with predip cup using labeled disinfectant</td>
<td>V278</td>
<td>V299</td>
</tr>
<tr>
<td></td>
<td>Applied with predip cup using nonlabeled/homemade disinfectant</td>
<td>V279</td>
<td>V300</td>
</tr>
<tr>
<td></td>
<td>Applied as foam using labeled disinfectant</td>
<td>V280</td>
<td>V301</td>
</tr>
<tr>
<td></td>
<td>Applied as foam using nonlabeled/homemade disinfectant</td>
<td>V281</td>
<td>V302</td>
</tr>
</tbody>
</table>

59. Which of the following best describes how teats are dried prior to milking in both summer and winter seasons? (Enter one code only for each season.)

(1) Not applicable—teats not wet prior to milking
(2) Air dry
(3) Single-use cloth towel
(4) Single-use paper towel
(5) Multi-use cloth towel
(6) Multi-use paper towel
(7) Other (specify: _________________________) V304OTH V305 code V306 code
60. Which of the following best describes postmilking procedures regarding teat disinfection in both summer and winter seasons? 
(Enter one code only for each season.)

(1) Dip teats with labeled postdip product
(2) Dip teats with nonlabeled/homemade solution
(3) Spray teats with commercial postdip product
(4) Foam teats with commercial postdip product
(5) Teats covered in commercial powder product
(6) None
(7) Other (specify: __________________________) V306OTH

Summer: V306/307 Winter: __ code __ code

61. What premilking and postdip teat disinfectants does this operation use primarily during both summer and winter seasons? 
(Write in one code for each response for each season. (See attached VS Initial Visit Reference Card for brand names.)

Codes:
1 = Iodophor (iodine containing)
2 = Chlorhexidine
3 = Fatty acid based
4 = Quaternary ammonium
5 = Phenols
6 = Chlorine product
7 = Other (specify: _________________) V308OTH
8 = None

Summer: V308/310 Winter: __ code __ code

a. Premilking teat disinfectant................................. V308/310 __ code __ code
b. Postdip teat disinfectant................................. V309/311 __ code __ code

62. Which of the following best describes this operation’s use of a barrier teat dip (Blockade™, Uddergold™ 5-star)?
(Check one only.)
☐ 1 Used on all cows on this operation all the time
☐ 2 Used on all cows during winter or adverse weather
☐ 3 No barrier teat dip used on this operation
☐ 4 Other (specify: _________________) V312OTH

V312

63. Do milkers wear latex or nitrile gloves when milking all cows? ................. V313 ☐ 1 Yes ☐ 3 No

64. Does this operation use a backflush system in milking units? ................. V314 ☐ 1 Yes ☐ 3 No

If Item 64 = NO, SKIP to Item 66.

65. Is the backflush system currently used for every milking? ................. V315 ☐ 1 Yes ☐ 3 No

66. Does this operation use automatic takeoffs? ................. V316 ☐ 1 Yes ☐ 3 No

67. Are clinical mastitis cows generally milked:
   a. Using a separate milking unit from healthy cows? ................. V317 ☐ 1 Yes ☐ 3 No
   b. In a separate string from healthy cows? ................. V318 ☐ 1 Yes ☐ 3 No
68. In the last 12 months, how many cows—all, some, or none—have been vaccinated for:

a. Coliform mastitis?  
   Vaccines include Master Guard® J5; J5 Shield™; J-5 bacterin™; J-5 E. coli bacterin; J-vac®
   □ 1 All  □ 2 Some  □ 3 None  

b. Salmonella?  
   Vaccines include LeukoTox® MTD; SDT-Guard; Pro-Bac®; Bo-Bac 2x; Pulmo-guard™ PH-M/SDT; Cattle-val salmo; Salmonella Dublin-Typhimurium Bacterin Endovac-Bovi®; Poly-sal™ B; Salmo shield® T; Salmo shield® TD  
   □ 1 All  □ 2 Some  □ 3 None  

c. Siderophore receptors and porins (SRPs) vaccines?  
   Vaccines include Salmonella Newport Bacterial Extract SRP  
   □ 1 All  □ 2 Some  □ 3 None  

d. Mycoplasma?  
   Vaccines include Pulmo-guard PH-M/SDT; Myco-Bac B; Mycomune  
   □ 1 All  □ 2 Some  □ 3 None  

e. Staphylococcus aureus?  
   Vaccines include Lysigin®; Samato-Staph®;  
   □ 1 All  □ 2 Some  □ 3 None  

f. Any disease using autogenous vaccines?  
   □ 1 All  □ 2 Some  □ 3 None  

[If Item 68f = NONE, SKIP to Item 70]

69. Were autogenous vaccines administered for the following mastitis pathogens?

a. Mycoplasma  
   □ 1 Yes  □ 3 No  

b. Staph. aureus  
   □ 1 Yes  □ 3 No  

c. E. coli  
   □ 1 Yes  □ 3 No  

d. Strep. spp  
   □ 1 Yes  □ 3 No  

e. Other (specify: _________________________)  
   □ 1 Yes  □ 3 No  

70. Were any of the following milk cultures performed during the last 12 months?

a. Individual cows  
   □ 1 Yes  □ 3 No  

b. Bulk-tank milk  
   □ 1 Yes  □ 3 No  

c. String samples  
   □ 1 Yes  □ 3 No  

[If Items 70a-c are all NO, SKIP to Item 74]

71. In the last 12 months, were any of the milk cultures performed by:

a. Farm personnel, done on farm?  
   □ 1 Yes  □ 3 No  

b. A State or university diagnostic laboratory?  
   □ 1 Yes  □ 3 No  

c. A commercial lab  
   □ 1 Yes  □ 3 No  

d. A private veterinary lab (veterinary clinic)  
   □ 1 Yes  □ 3 No  

[If Item 70a = NO (no individual cow milk cultures performed), SKIP to Item 73]
72. In the last 12 months, which cows were typically selected for milk culturing?
   a. Fresh cows ................................................................. V337  □ 1 Yes □ 3 No
   b. All clinical cases .......................................................... V338  □ 1 Yes □ 3 No
   c. Chronic clinical cases .................................................... V339  □ 1 Yes □ 3 No
   d. Clinical cases that did not respond to treatment ............... V340  □ 1 Yes □ 3 No
   e. High somatic cell count cows .......................................... V341  □ 1 Yes □ 3 No
   f. Other (specify: ____________________________) V342OTH ...... V342  □ 1 Yes □ 3 No

73. Which of the following organisms were identified from milk cultured in the last 12 months?
   a. Strep. agalactiae ............................................................. V343  □ 1 Yes □ 3 No
   b. Staph. aureus ................................................................. V344  □ 1 Yes □ 3 No
   c. Mycoplasma ...................................................................... V345  □ 1 Yes □ 3 No
   d. E. coli / Klebsiella / other gram negative ......................... V346  □ 1 Yes □ 3 No
   e. Coagulase neg staph (Staph. spp.) non-aureus ................. V347  □ 1 Yes □ 3 No
   f. Environmental strep (Strep. spp.) non-agalactiae ............. V348  □ 1 Yes □ 3 No

74. Does this operation perform on-farm antibiotic residue testing of milk? ...... V349  □ 1 Yes □ 3 No

   [If Item 74 = NO, skip to Item 77.]

75. Which test is most commonly used on this operation to screen for antibiotic residues in milk?
   (Check one only.)
   □ 1 Snap® kit (beta lactam or tetracycline)
   □ 2 Delvotest®
   □ 3 CITE Probe®
   □ 4 Charm Farm
   □ 5 Penzyme® Milk Test
   □ 6 Other (specify: ______________________) V350OTH ............. V350

76. Are milk samples evaluated for antibiotic residues from:
   a. Fresh cows? ................................................................. V351  □ 1 Yes □ 3 No
   b. Individual cows recently treated for mastitis? ..................... V352  □ 1 Yes □ 3 No
   c. Bulk tank prior to processor pickup? ................................. V353  □ 1 Yes □ 3 No
   d. Other? (specify: _______________________) V354OTH ............. V354  □ 1 Yes □ 3 No

77. Does this operation use an external teat sealant (e.g., Stronghold™) at the time of dry off?
   [Check one only.]
   □ 1 On all cows at drying off
   □ 2 Cows with chronic mastitis
   □ 3 Use on all cows at drying off but only during winter or adverse weather
   □ 4 No external teat sealant used on this operation
   □ 5 Other (specify: ________________________) V355OTH ............. V355
78. Does this operation use an internal teat sealant (Orbeseal™) at the time of drying off? [Check one only.]
☐ 1 On all cows at drying off
☐ 2 Cows with chronic mastitis
☐ 3 Use on all cows at drying off but only during winter or adverse weather
☐ 4 No internal teat sealant used on this operation
☐ 5 Other (specify: _____________________) 

79. During the last 12 months, approximately what percentage of cows were treated with dry cow intramammary antibiotics at drying off? ................. V357 ____ %

[If Item 79 = 0, SKIP to Item 81]

80. Of those cows treated during the last 12 months with dry cow intramammary antibiotics, what percentage were given the following antibiotics? (See attached VS Initial Visit Reference Card.)

a. Ceftiofur hydrochloride (Spectramast DC) ................................................................. V358 ____ %
b. Cephapirin (benzathine) (Cefa-Dri®/Tomorrow) .................................................. V359 ____ %
c. Cloxacillin (benzathine) (Boviclox; Dry-Clox®; Dry-Clox® Intramammary Infusion; Orbenin-DC®)............. V360 ____ %
d. Erythromycin (Gallimycin®-Dry) .................................................................................. V361 ____ %
e. Novobiocin (Biodry®) ................................................................................................. V362 ____ %
f. Penicillin G (procaine) (Hanford's/US Vet Go Dry) .................................................. V363 ____ %
g. Penicillin G (procaine)/Dihydrostreptomycin (Quartermaster® Dry Cow Treatment) .................................................. V364 ____ %
h. Penicillin G (procaine)/ Novobiocin (Albadry® Plus Suspension) ..................... V365 ____ %
i. Other (specify: __________________________________) V366OTH .......................... V366 ____ %

Total (should equal 100%) ................................................................................................. 100%
Section G—Antibiotic Use

81. In the last 12 months, did this operation use antibiotics for disease prevention or growth promotion in rations for weaned dairy heifers that have not yet calved? (Check one only.)

☐ 1  Weaned dairy heifers not housed on this operation

☐ 2  Yes; antibiotics in heifer ration

☐ 3  Don't know if antibiotics were in heifer rations

☐ 4  No; antibiotics were not in heifer rations

If YES, which of the following antibiotics were used? (See attached VS Initial Visit Reference Card.)

a. Bacitracin methylene disalicylate ............................................................ V368  ☐ 1 Yes ☐ 3 No

b. Bambermycins ......................................................................................... V369  ☐ 1 Yes ☐ 3 No

c. Chlortetracycline compounds ................................................................. V370  ☐ 1 Yes ☐ 3 No

d. Neomycin sulfate ..................................................................................... V371  ☐ 1 Yes ☐ 3 No

e. Ionophores (e.g., Rumensin®, Bovatec®, Deccox®)............................................ V372  ☐ 1 Yes ☐ 3 No

f. Neomycin-oxytetracycline ........................................................................ V373  ☐ 1 Yes ☐ 3 No

g. Oxytetracycline compounds ..................................................................... V374  ☐ 1 Yes ☐ 3 No

h. Sulfamethazine ........................................................................................ V375  ☐ 1 Yes ☐ 3 No

i. Tylosin phosphate ..................................................................................... V376  ☐ 1 Yes ☐ 3 No

j. Virginiamycin ........................................................................................... V377  ☐ 1 Yes ☐ 3 No

k. Other antibiotics (specify: __________________) V378OTH .................................. V378  ☐ 1 Yes ☐ 3 No
82. Complete the table below on antibiotics used in the last 12 months to treat diseases or disorders in unweaned heifers, heifers weaned but not yet calved, and all cows. (This does NOT apply to dry cow treatments and to preventive treatments.)
(See attached VS Initial Visit Reference Card.)
If antibiotic is not listed, please write in name and active ingredient.

<table>
<thead>
<tr>
<th>Disease or disorder</th>
<th>Number of affected animals in the last 12 months</th>
<th>Number of affected animals treated with ANTIBIOTICS</th>
<th>Primary ANTIBIOTIC used (Enter 1 code from attached list.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiratory</td>
<td>V379</td>
<td>V392</td>
<td>V405</td>
</tr>
<tr>
<td>Diarrhea or other digestive</td>
<td>V380</td>
<td>V393</td>
<td>V406</td>
</tr>
<tr>
<td>Navel infection</td>
<td>V381</td>
<td>V394</td>
<td>V407</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>V382OTH</td>
<td>V382</td>
<td>V395</td>
</tr>
<tr>
<td>Respiratory</td>
<td>V383</td>
<td>V396</td>
<td>V409</td>
</tr>
<tr>
<td>Diarrhea or other digestive</td>
<td>V384</td>
<td>V397</td>
<td>V410</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>V385OTH</td>
<td>V385</td>
<td>V398</td>
</tr>
<tr>
<td>Respiratory</td>
<td>V386</td>
<td>V399</td>
<td>V412</td>
</tr>
<tr>
<td>Diarrhea or other digestive</td>
<td>V387</td>
<td>V400</td>
<td>V413</td>
</tr>
<tr>
<td>Reproductive</td>
<td>V388</td>
<td>V401</td>
<td>V414</td>
</tr>
<tr>
<td>Mastitis</td>
<td>V389</td>
<td>V402</td>
<td>V415</td>
</tr>
<tr>
<td>Lameness</td>
<td>V390</td>
<td>V403</td>
<td>V416</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>V391OTH</td>
<td>V391</td>
<td>V404</td>
</tr>
</tbody>
</table>

83. Of lactating cows treated for mastitis in the last 12 months with intramammary antibiotics, were treatments based on:

a. Veterinary recommendation?................................................................. V418 □ 1 Yes □ 3 No
b. Historical effectiveness?........................................................................V419 □ 1 Yes □ 3 No
c. Historical culture and antimicrobial sensitivity results?........................ V420 □ 1 Yes □ 3 No
d. Individual cow culture results prior to therapy?.................................... V421 □ 1 Yes □ 3 No
e. Other? (specify: _____________________) V422OTH................................V422 □ 1 Yes □ 3 No

84. If the Producer is currently enrolled in DHIA or similar record-keeping system, please ask for a copy of their herd summary sheet. Either mark out or cut off the Producer’s identification and replace it with the NAHMS ID number. Submit the sheet with the questionnaire. Data from the herd summary sheet will be used to collect additional information that isn’t gathered during the interview, e.g., reproductive parameters. Providing the herd summary reduces the amount of interview time required to obtain this additional information.

Did the Producer agree to provide a copy of the herd summary sheet?.................................................. V423 □ 1 Yes □ 2 N/A □ 3 No
State/Operation #: __________________________

Office Use Only

State FIPS: __________ Operation #: _______ Interviewer: __________ Date: ______/_____/____

<table>
<thead>
<tr>
<th>2-digits</th>
<th>4-digits</th>
<th>Initials</th>
<th>(mm/dd/yy)</th>
</tr>
</thead>
</table>

1. Total time for interview (include time to discuss the program and complete the questionnaire). If more than one data collector present, enter the combined time: ____________________________ min VTIME

2. Total travel time (round trip). If more than one data collector present, enter the combined time: ____________________________ min VTTIME

3. Data collector(s): (Enter the number for each category.)
   - _____ Federal VMO
   - _____ Federal AHT
   - _____ State personnel
   - _____ Other (specify)

4. Enter response code 99 if questionnaire is completed or enter one code of 0-7 that best describes the reason why the owner is not participating: ____________________________ code VRRC
   - 99 = Survey completed
   - 00 = Producer not contacted by VMO
   - 01 = Poor time of year or no time
   - 02 = Does not want anyone on operation
   - 03 = Bad experience with government veterinarians
   - 04 = Does not want to do another survey or divulge information
   - 05 = Told NASS they did not want to be contacted
   - 06 = Ineligible (no dairy cows)
   - 07 = Other reason (explain below)

5. Producer data quality: ____________________________ □ 1 Good to Excellent □ 2 OK □ 3 Poor VPDQ

6. Did the Producer use written or computerized records to assist in answering this survey?: ____________________________ □ 1 Yes □ 3 No VREC

7. Did the Producer provide a copy of the DHIA summary sheet?: □ 1 Yes □ 2 Not on DHIA □ 3 No VDHIA

8. Which of the following best describes the respondent’s position with this operation?: ____________________________ code VPOS
   - 1 = Owner
   - 2 = Manager
   - 3 = Family member (other than owner or manager)
   - 4 = Other hired employee
   - 5 = Other (specify: ____________________________ ) VPOSOTH

Comments regarding this questionnaire or operation:

VMO or AHT Signature: _______________________________________________________________________

TO BE COMPLETED BY THE COORDINATOR:

Field data quality: ____________________________ □ 1 Good to Excellent □ 2 OK □ 3 Poor VFDQ

Dairy 2007 VS Initial Visit Questionnaire