



Animal and Plant Health Inspection Service

Veterinary Services

Sheep 2011 Enteric Pathogen Collection Record

National Animal Health Monitoring System

2150 Centre Ave, Bldg B Fort Collins, CO 80526

Form Approved OMB Number 0579-0188 Expires: 6/30/2013

FULL COLLECTION KIT 30 individual fecal samples and 5 composite samples.

You will be collecting 30 individual fecal samples from any type of sheep except rams. From those samples, you will be making 1 composite sample from every 6 individual sheep samples.

You need to adhere to the collection schedule.

Kit Contents:

35 WhirlPak bags 3 ice packs 3 liner bags
Paperwork that includes submission form, labels, and UPS airbill addressed to ARS in Athens, GA.

Fresh samples are a must. Collect rectally or immediately off the ground while still warm. Collect **AT LEAST 6 fecal pellets** from each animal.

Two pellets from each animal (up to 6 animals) are used to make the composite sample. The remaining pellets will be bagged as an individual sample and labeled with the animal ID. Each individual sample must be at least 4 pellets. See the information page in the Training Manual regarding the Enteric Pathogens.

The composite sample must be 2 pellets each from 6 sheep for a total of 12 pellets in a bag. **DO NOT submit more than 2 pellets per animal per composite** as that can skew the test results.

We need to identify which 6 individual samples make up the composite; therefore, labels have been colored-coded.

What if you can't get 5 complete sets of samples (e.g., only 22 sheep)? Make as many complete composites as you can and then make a partial composite if you have 2-5 sheep remaining. Indicate on both the bag and submission form that the composite is a partial. In this example, you will submit three complete composite samples and a partial that contains the pellets of 4 sheep. (Can not have a partial of just one sheep). Write on both the form and label the number of animals represented in the partial sample. For the above example, you will write PARTIAL – 4 sheep. (example on back)

What if during the collection I can't get 6 pellets? The individual samples need to have at least 4 pellets and the composite must have 2 per animal. If you can only get 5 pellets, do not include the animal in the composite sample. Indicate the partial on the bag and form.

SEE THE SPECIFIC SHIPPING INSTRUCTIONS ON THE BACK as ARS needs the samples packed a certain way

<p>According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0188. The time required to complete this information collection is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collected.</p>	<p>NAHMS-253 Jan 2011</p>
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Shipping:

Ideally, collect and ship the same day. Keep samples cool and ship within 24 hours of collection. Wednesday collections must be shipped the same day. Thursday through Saturday collections and shipments are not allowed.

Express air from whirlpak bags, twist down twice, and secure. Do not use label to secure bag closed.

Write the State, Operation, and Animal ID on each label. Use the color coding to correspond the composite with the individual samples.

Cool down samples with ice packs. Keep cool and, if necessary, replace ice packs with frozen ones before shipping.

Divide the samples between two liner bags, express air, and tie or tape shut.

ARS wants an ice pack on top, bottom and in between the samples. Therefore, in the remaining liner bag, layer the ice packs and sample bags in the following order:

- Ice pack
- bag of samples
- ice pack
- bag of samples
- last ice pack.

Tie shut. Add filler to box if necessary, and place the copy of the submission form on top of the samples.

Secure box and ship to ARS in Athens, Georgia within 24 hours.

Send the original submission form to your NAHMS Coordinator.

Example of partial composite

Sample Number	Sheep ID	Check box for the animal type NL - Nursing lamb EwN - Ewes nursing lamb P - Pregnant ewe Rpl - Replacement ewes Mkt – Weaned market lambs O – Other (specify)	COMPOSITE Bag Number
A 1	Suzy 2011a	<input checked="" type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	A
A 2	Suzy	<input type="checkbox"/> ₁ NL <input checked="" type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 3	Monica	<input type="checkbox"/> ₁ NL <input checked="" type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 4	Georgia	<input type="checkbox"/> ₁ NL <input checked="" type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 5	Suzy 2011b	<input checked="" type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 6	Phyllis	<input type="checkbox"/> ₁ NL <input checked="" type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
↓			
E 25	Rose	<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input checked="" type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	E
E 26	Iris	<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input checked="" type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 27	Clover	<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input checked="" type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 28		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 29	PARTIAL - 3 LAMBS	<input type="checkbox"/>₁ NL <input type="checkbox"/>₂ EwN <input type="checkbox"/>₃ P <input type="checkbox"/>₄ Rpl <input type="checkbox"/>₅ Mkt <input type="checkbox"/>₆ O	
E 30		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	

NAHMS Sheep 2011 - Enteric Pathogen Submission Form

State FIPS:	Operation #:	Primary Collector:	Date:	Kit # on labels:
2 digits	5 digits	Initials	(mm/dd/yy)	

Sample Number	Sheep ID	Check box for the animal type NL - Nursing lamb EwN - Ewes nursing lamb P - Pregnant ewe Rpl - Replacement ewes Mkt – Weaned market lambs O – Other (specify)	COMPOSITE Bag Number
A 1		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	A 31
A 2		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 3		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 4		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 5		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
A 6		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
B 7		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	B 32
B 8		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
B 9		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
B 10		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
B 11		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
B 12		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
C 13		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	C 33
C 14		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
C 15		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
C 16		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
C 17		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
C 18		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
D 19		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	D 34
D 20		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
D 21		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
D 22		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
D 23		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
D 24		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 25		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	E 35
E 26		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 27		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 28		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 29		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	
E 30		<input type="checkbox"/> ₁ NL <input type="checkbox"/> ₂ EwN <input type="checkbox"/> ₃ P <input type="checkbox"/> ₄ Rpl <input type="checkbox"/> ₅ Mkt <input type="checkbox"/> ₆ O	

Were samples ₁ stored overnight Or ₂ shipped the same day as collected?

How many people in each category helped with the collection of the individual fecal samples?

_____ Fed VMO _____ Fed AHT _____ State Gov't _____ Producer _____ Other,specify:

Not counting Producer time, how many hours did it

take everyone to collect and prepare the samples for shipping: _____ hours

How many round-trip hours did it take for everyone to get to the farm and back: _____ hours