



Certificate/Serial No: _____

VETERINARY HEALTH CERTIFICATE FOR EXPORT OF PORCINE SEMEN FROM THE UNITED STATES OF AMERICA TO NIGERIA

Exporting country: **United States of America**

Ministry of: **U.S. Department of Agriculture (USDA)**

Department: **Animal and Plant Health Inspection Service (APHIS)**

PART A:

I. Information concerning the donor animal(s) and semen for export

Registered Name	Official Identification	Breed	Age	Date of Collection	Collection Code	Number of Straws

Note: If more than 10 animals are shipped, a separate table is made, signed by the USDA accredited veterinarian and becomes part of this certificate.

II. Origin of the semen

Name and address of exporter (semen collection center or exporting owner):

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III. Destination of the semen

Name and address of consignee:

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Name and identification of means of transport:

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Port of arrival:

Port of embarkation:

Expected date of shipment:



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PART B: Sanitary Information

General Requirements:

- a) The centre should be officially approved by USDA APHIS;
- b) The centre should be under the direct supervision and sanitary control of a USDA Accredited Veterinarian who is responsible for routine visits to check the health and welfare of animals;
- c) The centre should be approved by the Veterinary Authority, USDA APHIS, which reviews the procedures and records at the centre, annually;
- d) Only animals associated with semen production should be permitted to enter the centre. Other species of livestock may exceptionally be resident on the centre, provided that they are kept physically apart;
- e) Animals on the centre should be adequately isolated from farm livestock on adjacent land or buildings for instance by natural or artificial means;
- f) The entry of visitors should be strictly controlled. Personnel at a centre should be technically competent and observe high standards of personal hygiene to preclude the introduction of pathogenic organisms. Protective clothing and footwear for use only on the centre should be provided;
- g) Individual semen containers and storage rooms should be capable of being disinfected;
- h) Animals must be clinically healthy and physiologically normal and must pass pre-entry tests within the 30 days prior to entry into the artificial insemination centre. The prescribed diseases and tests are listed in part C below;
- i) Whenever milk, egg yolk or any other animal protein is used in preparing the semen diluents, the product must be free of pathogens or sterilized; milk heat-treated at 92°C for 3-5 minutes, eggs from SPF flocks when available. The inclusion of penicillin, streptomycin, polymixin etc, is permitted, provided that this is declared in the Veterinary Health Certificate for Export;
- j) Semen straws or pellets shall be code marked in line with national standards;
- k) Containers must be sealed before export and accompanied by a Veterinary Health Certificate listing the contents.

PART C:

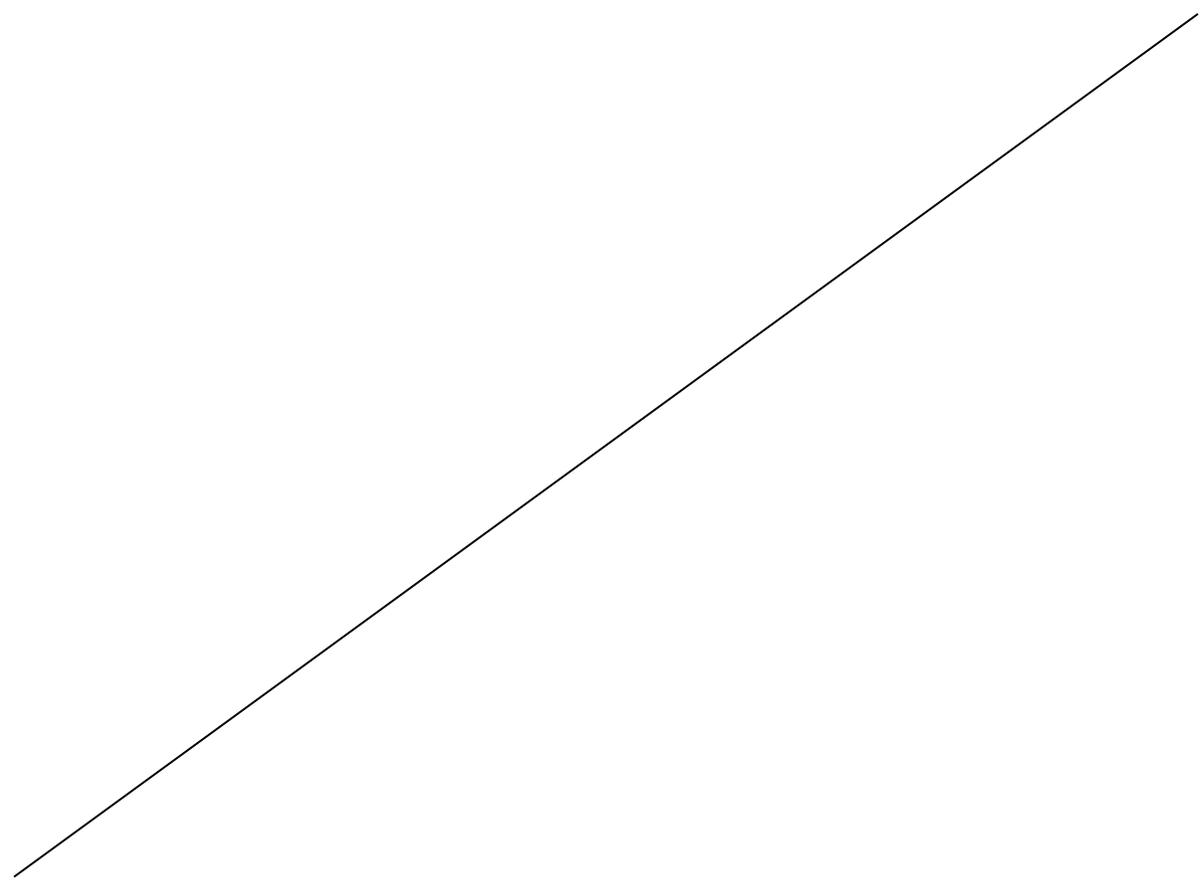
- a) **Aujeszky's Disease (AD) (pseudorabies)**
The donor animals:
 - i. Showed no clinical sign of AD on the day of collection of the semen;
 - ii. Were kept in an establishment or artificial insemination centre located in a state with a USDA Stage V status as Free of AD, at the time of semen collection;
 - iii. Have been kept for at least four months prior to semen collection in an artificial insemination centre which has had no clinical cases of AD for the previous 12 months, and where all boars are subjected to a serological test to the whole AD virus, with negative results, every 4 months;
 - iv. The semen was collected, processed and stored in accordance with the OIE.



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- b) **Foot and Mouth Disease (FMD)** – N/A - The United States is recognized by the OIE as free of FMD.
- c) **Rinderpest** – N/A - Rinderpest was declared as eradicated worldwide by the OIE and FAO in May and June 2011.

NOTE: Diseases that are recognized as OIE free, should be captured in the health certificate.



Signature of USDA Accredited Veterinarian.....

Name of USDA Accredited Veterinarian.....

Address.....

NAN No..... Date.....

Signature of APHIS Endorsing Veterinarian.....

Name of APHIS Endorsing Veterinarian

Office Address.....

Date.....