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| ***Diagnostics*** |
| Have any diagnostics been performed? |
| If not, skip to Outbreak Information |
| Profile of animals used for diagnosis: |
| Were these animals acute untreated cases? |
| Have you done the following:   1. Deep nasal pharyngeal swab? |
| 1. Trans tracheal wash |
| 1. Necropsy |
| Results: |
| Management/Treatment changes due to diagnostics: |
| **See Cornell University NYS Veterniary Diagnostic Laboratory website for detailed information on Diagnostic Plans:**  **http://ahdc.vet.cornell.edu/docs/Bovine\_Diagnostic\_Plans\_Panels.pdf** |
| ***UW Calf Health Scoring Criteria – See Appendix I*** |
| Have you used the scoring system? If yes, what is the result? |
| ***Acute Outbreak – one or more animals scoring 5 or greater on UW scoring sheet or clinically sick and untreatable.*** |
| Any significant negative environmental event, e.g. curtains left open during windstorm? Consider weather conditions and management breaks. |
| Have new animals been introduced to the farm? |
| Have vaccines been used in response to outbreak?  If yes, what? |
| ***Chronic Outbreak – low level over time or recurring bouts of high morbidity at herd level (>15%) treated with antibiotics)*** |
| Have you analyzed affected calf records? |
| Are there seasonal episodes? |
| Have you reviewed the vaccine protocol, including handling, storage and route of administration? |

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| ***General*** |  |
| Have you used the NYSCHAP Calf Base Health Risk Assessment to review general calf health, weaning management and facility issues? |  |
| Are there written treatment protocols? |  |
| What are the criteria for treatment to begin? |  |
| How often are calves looked at for respiratory disease? |  |
| What signs are they looking for? |  |
| Does this person choose treatment & assess response |  |
| If not, who does, and how quickly are they notified? |  |
| How often does someone other than above (owner, manager, consultant, etc) look at calves? |  |
| Are individual cases, including treatment, reported and recorded on individual health records? If yes, are records retained for at least 2 years? |  |
| ***Identification – when do you hear coughing?*** |  |
| Age or pen #: |  |
| At Rest Moving Animals After feeding |  |
| After bedding AM before curtains are up |  |
| ***Outbreak Investigation*** |  |
| Age of onset (range): Oldest Youngest |  |
| What are the signs? Fever, dehydration, lethargy, appetite, |  |
| Duration of the illness with fatalities? |  |
| What percent of calves are affected? |  |
| What percent of calves die? |  |
| Predisposing factors in affected calves, such as enteritis or naval ill? |  |
| Has failure of passive transfer been assessed? |  |
| What management practices/treatments have been used thus far? |  |