

Dairy Herds: Assessment for Risks for *Salmonella* Dublin Entry and Spread

Herd owner's name: _____ Herd/Farm name: _____

FARM Premise Identification Number (PID): _____

Herd veterinarian: _____ Vet email: _____

Number of milking cows today: _____

Number of dry cows today: _____

Number of heifers, weaned to calving: _____

Number of heifers, pre-weaned: _____

Number of bulls: calves _____ mature (breeding) _____

Herd Bulk tank SCC for March 2016: _____

Herd disease status:

1. Has there ever been a diagnosis of *Salmonella* Dublin in this herd? Yes No

Calves:

2. **SINCE Jan 1 2016** what percent of calves have been affected before weaning by:

Respiratory disease (pneumonia) _____%

Diarrhea (scours) _____%

Cows

3. **SINCE Jan 1 2016** what percent of cows have been affected by:

Respiratory disease (pneumonia) _____%

Diarrhea (scours) _____%

Abortion _____%

OVER the last 12 months:

4. How many cows died on this farm? _____

How many pre-weaned calves (male or female) died on this farm? _____

How many post-weaned heifers died on this farm? _____

How many calves have been still born (born dead or died within 24 hrs of birth)? _____

5. Are there any other notable cattle health problems on this operation? Please describe:

Cattle movement

OVER the last 5 years:

6. Have you added to the herd by purchase or entry from another herd, either permanently or temporarily, owned, leased or loaned:

Cows (>24 months)?	Yes	No	If yes, how many? _____
Heifers (0 to 24 months)?	Yes	No	If yes, how many? _____
Bulls/Steers (0 to mature)?	Yes	No	If yes, how many? _____
How many breeding bulls have been on this farm? _____			

7. Were the heifers born on this farm raised (check all that apply):

- On the same farm site as the cow herd
- By the same owner but at a different location from the cow herd
- By someone not the owner, at a different location, but kept only with cattle from this farm (no contact with any cattle of any kind that were not from this farm)
- By someone not the owner at a different location, mixed with cattle from at least one other farm
- Other? Please describe: _____

8. Have any cattle come onto this farm from outside Ontario? Yes No

If yes where have they come from? (Province, State) _____

Approximately when did they come? (Month, Year) _____

9. Have you sold any cattle of any age intended for dairy purposes? Yes No

10. Have cattle (cows, heifers, calves) from this herd participated as:

Donors for embryo transfer (ET)	Yes	No
Recipients for embryo transfer (ET)	Yes	No
Donors for In Vitro Fertilization programs (IVF)	Yes	No
Cattle shows, fairs, 4H programs or exhibits	Yes	No

11. Have any recipient heifers or cows been added to this herd at any time? (Whether they are present now or not) Yes No

12. Do you have a protocol for testing or quarantining returning or new cattle coming onto the farm? Yes No

If yes, briefly describe: _____

Colostrum feeding:

13. **SINCE Jan 1 2016**, what percent of calves received colostrum:
- Only from their own mother _____ %
 - From their mother and from only one other cow _____ %
 - From multiple cows (pooled colostrum) _____ %
 - Powdered colostrum _____ %
 - From a cow not from this farm _____ %

Milk Feeding

14. **SINCE Jan 1 2016** what percent of calves were fed
- Whole milk (non-pasteurized) _____ %
 - Whole milk (pasteurized) _____ %
 - Waste milk (non-pasteurized) _____ %
 - Waste milk (pasteurized) _____ %
 - Only Milk Replacer _____ %
 - Combination of whole/waste milk and milk replacer _____ %

15. How much milk is fed to calves?
- Age 7 to 14 days _____ litres/day
 - Age 15 to 28 days _____ litres/day
 - Age 28 days to weaning _____ litres/day

Risk for with-in farm infection spread:

Maternity pen

16. What percent of cows calve alone in a pen? _____ %
 If using a group maternity pen, how many cows are usually in the pen when a cow is calving?

17. Do any other cattle have contact (nose to nose, via shared feed are or water etc.) with cows in the maternity pen? Yes No

If yes, please describe: _____

18. Where are sick cows housed on this farm? _____

19. How are pre-Weaned Calves housed?

- Individual pens or hutches with no ability to contact (touch) other calves or cattle
- Individual pens or hutches but can contact (touch) other calves or cattle
- In group pens of containing (number) _____ calves

20. Do heifers post-weaning to 24 months ever have any direct contact with mature cows (dry or milking)? Yes No

21. Do heifers and any mature cows share water or feed mangers? Yes No

If yes, please describe _____

Manure handling

22. Cow manure is stored (please check all that apply):

- Solid pile Reservoir under the barn (slatted floor barn)
 Liquid lagoon Other: _____

Disease and treatment monitoring:

23. Are records of calf treatments and diseases kept permanently? Yes No

24. Are records of cow treatments and diseases kept permanently? Yes No

Cleaning

25. How often are calf feeding utensils cleaned?

- Nipples: N/A daily weekly other? _____
Bottles: N/A daily weekly other? _____
Pails: N/A daily weekly other? _____

26. Is disinfectant or soap used to clean feeding utensils?

- Nipples: None used Use (product name) _____
Bottles: None used Use (product name) _____
Pails: None used Use (product name) _____

Vaccination:

27. What vaccines do you routinely administer to calves?
(Please list product names or diseases you vaccinate for)

Antibiotic use (prophylactically):

28. Do you prophylactically administer antibiotics to calves? Yes No
If yes please list antibiotic and protocol (i.e. via feed/water/injection and when)

- Antibiotic: _____ Route: _____ Time when given: _____
Antibiotic: _____ Route: _____ Time when given: _____
Antibiotic: _____ Route: _____ Time when given: _____

Water

29. Water for cattle on this farm comes from: *(please check all that apply)*

- | | |
|---|--|
| <input type="checkbox"/> Drilled well | <input type="checkbox"/> Surface water – river or stream |
| <input type="checkbox"/> Dug well | <input type="checkbox"/> City or town water |
| <input type="checkbox"/> Surface water – pond | |

30. Water for cattle on this farm goes through a disinfection process? Yes No

If yes, please describe: _____

Risk to people from *Salmonella* Dublin:

31. Does anyone drink raw milk (milk from the bulk tank, unpasteurized, on this farm?	Yes	No
If yes, is it by family members?	Yes	No
If yes, is it by people other than family members?	Yes	No

If yes to any above, how often does someone drink raw milk on this farm?

Daily	Weekly	Rarely	Never
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32. Has anyone associated with this farm (i.e. work or live here) been sick with illness that could be Salmonellosis (i.e. diarrhea, fever)?

Final Questions:

33. Is there anything else you would like to add that was not covered in this questionnaire that you think might be important regarding the risk of *S. Dublin*?

34. Do you have any questions about *S. Dublin* or the project you would like to relay to the project team?