Secure Sheep and Wool Supply (SSWS) Plan Practice Questionnaire for FMD Exposure



During a foot and mouth disease (FMD) outbreak, producers in a regulatory Control Area will need to provide information to Regulatory Officials about 1) any unusual health events or possible clinical signs of FMD in their animals; 2) biosecurity steps put in place to prevent exposure to the disease; and 3) possible direct or indirect contact with other animals or operations that may have infected animals. The information you provide is critical to determine the scope and extent of the outbreak. However, it can be daunting to provide a lot of detail on short notice.

This document provides a short example of the type of information that may be requested. Additional steps from the Secure Sheep and Wool Supply (SSWS) Plan will need to be completed in order to request an animal or animal product (wool, wool products, semen, embryos) movement permit.

National Premises Identification Number (Prem ID or PIN):		Date:			
Pre	Premises Name:				
Pre	Premises Address:				
	(Street)	(City)	(County)	(State) (Zip)	
Pre	mises GPS Coordinates*; Latitude:Longitude:				
Na	Name of person filling out this questionnaire:	de:Longitude: tionnaire: email): ep: one and email): d coincide with the entrance to where animals are loaded/unloaded. G(SURVEILLANCE) on this premises been submitted to a diagnostic laboratory to test for foot and Yes No sitive, then this premises is considered an Infected Premises and you will be steps from officials managing the outbreak. tive, or if NO, please complete the questions below. s have any linical signs? Yes No e caused by an FMD virus infection? Yes No OR increase in mortalities, particularly lambs? Yes No			
	Contact information (phone and email):				
Ov	Owner Name (if different than above):				
*G	Owner contact information (phone and email): _*GPS coordinates for public land should coincide with the	e entrance to whe	ere animals are loaded/unloa	aded.	
D.	DISEASE MONITORING (SURVEIL	LANCE)			
	*	,	l to a diagnostic laborato	ry to test for foot and	
	If YES, and the results were positive, then this p given specific guidance on next steps from offic			ses and you will be	
	If YES, and the results are negative, or if NO, pl	lease complete t	he questions below.		
2.	2. Do the animals on this premises have any a. unexplained or unusual clinical signs?		Yes No		
	b. clinical signs that may be caused by an FN	MD virus infect	ion?		
	c. unexplained mortalities OR increase in me	ortalities, partic	ularly lambs? Yes	No	
	d. unexplained changes in production param	eters such as fe	ed intake? Yes	No	

March 2023 1 | P a g e

During an actual FMD outbreak, producers should observe animals daily for signs of infection, record their findings or the lack thereof, and promptly report any abnormal findings to officials managing the outbreak.

Bl	OSECURITY
3.	Do you have a Biosecurity Manager(s) for this premises?
	If YES, please list their name(s) and contact information (phone and email):
4.	Does your operation-specific biosecurity plan describe how you have implemented, or will implement, each item in the enhanced biosecurity checklist in the event of an FMD outbreak?
	If NO to questions #3 or #4, please read the Biosecurity materials at www.securesheepwool.org
Th sho wil	ONTACT WITH OTHER PREMISES is section of the document reviews the types of external contacts that may expose your animals. Producers ould practice recording external contacts over the past 7 days (at least) to get a feel for the information that I be needed in an outbreak. During an actual outbreak, Regulatory Officials may ask to review records from the st 28 days.
5.	Has this premises been exposed to $\frac{\text{manure from another premises}}{\text{Implies}}$ (applied on the ground near areas where animals are housed or graze)? $\frac{\text{Implies}}{\text{Implies}}$ Yes $\frac{\text{Implies}}{\text{Implies}}$ No
	If YES, please list the premises names, contact information (phone or email), and date (if known) from which manure originated or the company that hauled the manure
6.	Has this premises received <u>live animals</u> ?
7.	Has this premises moved <u>live animals</u> to another premises (e.g., production site, sale barn, packing plant)? Yes No If YES, please list the species of animals, premises names, contact information (phone or email), and date (if known)

March 2023 2 | P a g e

8.	Has this premises received semen or embryos? Yes No			
	If YES, please list premises names, contact information (phone or email), and date (if known) from which			
	semen or embryos were received			
9.	Has this premises moved <u>semen or embryos</u> to another premises?			
	If YES, please list premises names, contact information (phone or email), and date (if known) where semen or embryos were sent			
10.	Has this premises received wool products? Yes No			
	If YES, please list premises names, contact information (phone or email), and date (if known) from which			
	wool or wool products were received			
11.	Has this premises moved <u>wool or wool products</u> to another premises?			
	If YES, please list premises names, contact information (phone or email), and date (if known) where wool or			
	wool products were sent			
12.	Has this premises used or had contact with equipment used on another premises with live or dead animals, manure, or animal products (wool, semen, embryos)? Yes No I don't know			
	Examples may include:			
	 Trucks/trailers used to transport live animals Gates/panels/animal handling equipment 			
	 Wool shearing/handling/storage equipment 			
	 Manure handling/hauling/application equipment Rendering or compost handling/hauling/application equipment 			
	 Forklifts, skid-steers, tractors, loaders 			
	 Hoof-trimming equipment, chutes 			
	 Vaccination supplies (syringes, coolers, etc.) Pressure sprayers/washers 			
	Pressure sprayers/washersCoolers, semen or embryo containers			
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March 2023 3 | P a g e

• Any other shared equipment

If YES, please list premises names and contact information (phone, email) from which the equipment came
 13. Has anyone on this premises had contact with live or dead animals, manure, or animal products (lamb meat, mutton, wool, semen, embryos) that could have been infected with FMD? Yes No I don't know
 Exposure may occur through the following activities: International travel Caring for animals Contact with wildlife, including hunting

- Living or associating with someone who works at other premises with animals that can get FMD
- Visiting other premises with animals that can get FMD, including livestock markets, fairgrounds, zoos
- Visiting a processing plant, rendering plant, or landfill

Working at other animal production premises

• Other contact with infected animals or infectious materials

14. Have any of the following animals been seen on this premises, around animal buildings, or via fence-line contact in the last 7 days? Note: During an actual outbreak, Regulatory Officials may ask to see records for 28 days. (Mark all that apply)

Animal Type	Yes	No	I don't know
Sheep (not part of your flock)			
Goats (domestic or wild)			
Beef Cattle			
Dairy Cattle			
Imported cattle (steers, rodeo stock)			
Chickens or other poultry			
Horses, donkeys, mules, etc.			
Pigs (domestic or feral)			
Dogs (domestic or feral)			
Cats (domestic or feral)			
Deer (mule, white tailed), elk, moose, pronghorn (captive or wild)			
Bison (captive or wild)			
Bears (brown/grizzly), wolves, coyotes, foxes, raccoons, or			
other predators			
Rodents (rats, mice)			
Other (describe)			

For more information on the Secure Sheep and Wool Supply Plan, please visit

www.securesheepwool.org

March 2023 4 | P a g e