



Premium Sheep and Goat Health Schemes MV/CAE and  
Johne's Disease **Monitoring Schemes** Submission Form



Please return samples to:  
SRUC Health Schemes, Greycrook, St Boswells, TD6 0EQ

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Information on this form will be stored and processed on a computer. SRUC Veterinary Services complies with the standards set by  
The Data Protection Act 2018 and GDPR.

Date of Test: .....

<b>Veterinary Practice Name and Address</b>	<b>Client Name and Postal Address</b>
<b>Clinician:</b>	<b>CPH: NUMBER(S)</b>

**Summary of Sample Numbers in this Test**

		Number of samples			Number of samples
Sheep	MV (Bloods)		Goats	MV (Bloods)	
Sheep	Johne's (Faeces)		Goats	Johne's (Faeces)	

**Please note if you require any non Health Scheme tests we require a separate blood sample and a completed farm animal submission form**

**Breeds of Animals**

Please list ALL BREEDS in your Accredited (or accrediting) flock/herd	SHEEP:
	GOATS:

**Certificates cannot be issued if the tables below are incomplete**

<b>Stock aged 18 Months and over</b>			
<b>Sheep</b>		<b>Goats</b>	
<b>Females</b>	<b>N°</b>	<b>Female</b>	<b>N°</b>
<b>Males</b>		<b>Males</b>	

All Samples must be collected by a Veterinary Surgeon

A full vacutainer will be sufficient for testing Maedi Visna

For Johne's disease we require at least 10g / one tablespoon per animal

*NOTE: Faeces must be in sample pots, not gloves*

<b>The tests must be performed on EACH separately managed breeding flock on the holding – see definition on page 3</b>	<b>No of animals tested</b>
<p><b>Annual Screening test for MV and Johne's disease Ewes And Tups</b></p> <p>Flock size less than 500 breeding ewes: <b>Test 12 thin ewes</b></p> <p>Flock size more than 500 breeding ewes: <b>Test 20 thin ewes</b></p> <p><b>ADDITIONALLY</b></p> <p>Test <b>5 stock tups</b> or ALL if there are fewer than 5</p> <p><b>Added animals to be tested after first year of membership</b></p> <p>Test replacement ewes purchased within the last 12 months: <b>Test 12</b>  <i>If bought from multiple holdings test 12 from each source.</i>  <i>If fewer than 12 purchased, test all.</i></p> <p>AND</p> <p>Test <b>All tups</b> purchased in the previous 12 months</p>	

## Biosecurity Checklist

These rules must be adhered to in order for a Certificate to be issued.

<b>Mandatory Elements – MV and Johne’s Disease Monitoring Schemes</b>
1. Testing of 12 or 20 thin ewes (depending on flock size) must be carried out on an annual basis.
2. 5 stock tups must be tested on an annual basis. If there are less than 5 eligible tups on the holding they must all be tested.
3. All tups purchased must be tested following the first year of membership.
4. 12 female replacements <i>from each source</i> purchased in the previous 12 months must be tested following the first year of membership.
5. Any positive animals must be isolated until either follow up testing is carried out or they are removed from the flock.
6. Reactors must be removed from the flock as soon as possible.
7. Any sheep that is losing condition for no apparent reason should be reported to your veterinary surgeon for investigation.
<b>Recommended Elements – General</b>
1. Farm boundaries should be secure and ideally prevent nose to nose contact.
2. Equipment and clothing should be cleaned and disinfected between farms.
3. Quarantine all added animals in accordance with your flock health plan.
4. Consider testing all added animals for MV and/or Johne’s disease.
<b>Recommended Elements – MV Monitoring Scheme</b>
1. Any identifiable offspring of a reactor should not be sold/retained as breeding animals.
2. Added animals (including pet lambs), colostrum, embryos and semen should be sourced from MV accredited or monitored flocks where possible.
3. Avoid nose to nose contact with other sheep at shows and sales where possible.
<b>Recommended Elements – Johnes Disease Monitoring Scheme</b>
1. Any identifiable offspring of a reactor born during the previous 2 lambing seasons should not be sold/retained as breeding animals.
2. The lambing area should be kept as clean as possible.
3. There should be a gap of at least 12 months between spreading slurry/manure on pasture and using it for grazing youngstock.
4. Faecal contamination of feed and water sources should be reduced.
5. Mains water should be provided where possible.
6. Natural water sources should be fenced off where possible.
7. Co-grazing with other ruminants should be avoided where possible.

## Declaration by Owner and Veterinary Surgeon

<b>Number of flocks (see definition below) on holding</b>	
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### Definitions

**'Flock'** A batch of animals that are managed in complete isolations and have had no contact with any other animals on the holding for 12 months or more, including other flocks of accredited animals.

- 1 The correct number of animals have been tested
- 2 I have followed the rules and conditions of membership since joining the Scheme and agree to continue to abide by these rules and conditions. All information is a correct and true record.
- 3 I allow these samples to be used in the development of additional serological tests. Testing would be done on an anonymous basis and results will remain confidential.
- 4 I agree that a summary of the overall results will be provided when the results are reported. Individual results will only be reported for any sheep or goats that are found to be positive on individual testing.

**Signed:** ..... **Owner/Manager**

- 1 I have explained the rules of the Scheme(s) regarding farm security to my client who, to the best of my knowledge, is complying with the Rules and Conditions of the Monitoring Scheme(s).
- 2 The correct number of animals have been tested.
- 3 I have examined the movement book(s) and all sheep and goats entering the premises are recorded on this form or attached sheet.
- 4 I have blood sampled the appropriate number of sheep/goats per the Rules.

**Signed:** ..... **MRCVS**

**THIS FORM IS INVALID IF THIS SECTION IS NOT SIGNED BY THE OWNER AND VETERINARY SURGEON**

## Blood Sample Submission Form for MV/CAE and Johne's Disease Monitoring

Details Required for MV and/or Johne's disease						MV (✓)	Johne's disease (✓)	For Office Use
Please submit the bloods in their boxes in the same order as listed below, there will be an Administration charge if we have to re-order the bloods.								
Tube N°	Ear N°	Age	Breed	Sex	MV ✓	Jd ✓	N°	
					✓		1	
							2	
							3	
							4	
							5	
							6	
							7	
							8	
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Details Required for MV and/or Johne's disease						MV (✓)	Jd	Official use
Tube N°	Ear N°	Age	Breed	Sex	MV ✓		N°	
					✓		21	
							22	
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