



Animal and Plant Health Inspection Service
U.S. DEPARTMENT OF AGRICULTURE

NAHMS Sheep 2024 Training

December 18, 2023





NAHMS Sheep Background

The 2024 National Animal Health Monitoring Service (NAHMS) Sheep Survey Phase I takes place in January – February 2024. The purpose of the survey is to describe the following: management and biosecurity practice; antimicrobial stewardship on sheep operations; management practices use to control internal parasites, changes in animal health, nutrition, and management practices in the US sheep industry from 1996 to current; and provide a serologic bank for future research. The NAHMS Sheep Phase II will be conducted by the NAHMS staff.

The NASS component of the NAHMS Sheep 2024 study focuses on sheep health and management practices used on sheep operations. It will allow us to evaluate sheep health and management practices relating to the control of infectious diseases and other management strategies. Background information, including sheep inventory, will allow us to evaluate the health and management of the U.S. sheep industry at the national and regional levels.

The previous NAHMS Sheep survey was conducted in 2011. Therefore



NAHMS Sheep Consent Form

- Why should I participate?
 - Biological Testing
 - Fecal Parasite Test **\$600 value**
 - Enteric Microbe Test **\$1500 value**
 - Lameness Pathogens Test **\$1100 value**

Thank you for completing the first phase of this study. Phase II of this study includes a follow-up questionnaire and the chance to test your sheep for gastrointestinal parasites, pathogens that could cause foot rot or digital dermatitis, and enteric pathogens (*E. coli*, *Salmonella*, and *Campylobacter*).

See the Informed Consent Form included in this mailing or at https://www.aphis.usda.gov/animal_health/naahms/sheep2024-nassconsent.pdf for more information about Phase II of this study.

1. If you have 20 or more ewes, would you like the opportunity to participate in Phase II of this study?

8001 ☐ Yes [Continue] ☐ No [Go to Item 4 on page 24] ☐ Fewer than 20 ewes [Go to Item 4 on page 24]

2. Please record the name, phone number, address, and email address for the best person to contact for Phase II of the study.

Name 8002	Phone Number 8003
Address 8004	
Email Address 8005	

Operations agree to the consent by answering 'Yes' to Section H, Question 1.



NAHMS Sheep Data Collection Plan

- Data Collections will begin on December 30th and end on February 29th.
- Two Phases
 - Phase I: Larger Operations and Coordinated with January Sheep
 - This will follow the January Sheep data collection period beginning December 30th and ending on January 16th.
 - Phase II: Remainder of the Sample
 - Data Collection will begin on January 22nd and end on February 29th. Collection will be completed by DCC.



NAHMS Sheep Data Collection and Due Dates

Data Collection Dates: **December 30th through January 16th**

Data Collection Method: **CAPI only**

Project Code: **930-APHIS NAHMS**

All questionnaires and materials with PII must be sent back to Austin after data collection ends

Enumerator Packets include:

- Interviewers Manual
- Copies of the Questionnaire
- Promotional Materials
- Copies of the Consent Form



Questionnaire Outline

Section A- Inventory

Section B- General Management

Section C- Feed and Housing Management

Section D- Shearing and Wool Marketing

Section E- Movement and Marketing

Section F- Identification

Section G- Biosecurity and Health Management

Section H- Conclusion



Section A- Inventory

1. On January 1, 2024, were any sheep or lambs, regardless of ownership, on this operation?
INCLUDE Barbados and all hair breed sheep

0564

1 ☐ Yes

3 ☐ No [Go to Section H, Item 5 on page 24]

← Screener for whole questionnaire





2. On January 1, 2024, of the total sheep and lambs on this operation, how many were in each of the following categories?

DO NOT INCLUDE sheep or lambs that you own that are custom fed on another operation.

- a. Breeding ewes 1 year and older.....
- b. Breeding rams 1 year old and older.....
- c. Replacement lambs for breeding less than 1 year old (including unweaned lambs kept for breeding).....
- d. Market lambs less than 1 year old and:
 - i. Under 65 pounds (including unweaned market lambs).....
 - ii. 65 to 84 pounds.....
 - iii. 85 to 105 pounds.....
 - iv. Over 105 pounds.....
- e. Market sheep 1 year old and older (not used for breeding).....



Head

0836



0280

3. [Add Items 2a - 2e and verify total]

Then the total sheep and lambs on hand on January 1, 2024 was?.....



4. On January 1, 2024, of the total sheep and lambs on the operation (Item 3), how many sheep were the following breeds?

INCLUDE all sheep only once.

- a. Black face wool breeds (for example, Hampshire, Suffolk, Shropshire, Romanov, Oxford).....
- b. Fine wool white face (for example, Rambouillet, Merino, Targhee).....
- c. Medium wool white face (for example, Columbia, Corriedale, Cheviot, Finn, Polypay).....
- d. Long wool (for example, Border Leicester, Coopworth, Romney).....
- e. Colored wool (for example, Black Welsh, Jacob, Navajo Churro, CVM, Shetland).....
- f. Hair sheep (for example, Barbados, Katahdin, Dorper, St. Croix).....
- g. Milk sheep (for example, East Friesian, Rideau Arcott).....
- h. Mottle-faced, brockle, or speckle-faced crossbred.....
- i. Other crossbred (Specify: 0109_____).
- j. Other (Specify: 0110_____).
- k. Unknown.....

Head

1001
1002
1003
1004
1005
1006
1007
1008
1009
1010
1011
Item 3

[Total must equal Item 3]

Should equal the
total of item 3



Section B- General Management

2. Compared to your inventory on January 1, 2024, how many sheep do you expect to have in 5 years? [Select one]

2002

- 1 ☐ None
- 2 ☐ Fewer [Go to Item 5 on page 5]
- 3 ☐ About the same [Go to Item 5 on page 5]
- 4 ☐ More [Go to Item 5 on page 5]

3. What is your main reason for expecting to have no sheep in 5 years? [Select one]

2003

- 1 ☐ Retirement, lack of a successor, or another personal or family situation
- 2 ☐ Low price of wool
- 3 ☐ Low price of lambs
- 4 ☐ Market volatility
- 5 ☐ Predator loss
- 6 ☐ Labor shortage
- 7 ☐ Government regulations (Specify:0201_____)
- 8 ☐ Sheep disease (Specify:0202_____)
- 9 ☐ Other (Specify:0203_____)



7. During 2023, what was your operation's primary system for maintaining sheep production records?
[Select one]

2007

- ☐ 1 Livestock or sheep management software (Specify: 0206 _____)
- ☐ 2 Other electronic record-keeping (spreadsheets, Word documents, etc.)
- ☐ 3 Handwritten records
- ☐ 4 Any other method (Specify: 0207 _____)
- ☐ 5 Did not maintain sheep and lamb production records [Go to Item 9 on page 6]

8. During 2023, did your operation keep records for the following? [Select all that apply]

a. Individual animal disease events.....	2008	<input type="checkbox"/>
b. Laboratory test results.....	2009	<input type="checkbox"/>
c. Preventive practices (vaccinations, deworming, or similar).....	2010	<input type="checkbox"/>
d. Number of animals culled.....	2011	<input type="checkbox"/>
e. Number of animals that died.....	2012	<input type="checkbox"/>
f. Individual ewe breeding history (pregnancy, diagnosis/ultrasound).....	2013	<input type="checkbox"/>
g. Number of abortions.....	2014	<input type="checkbox"/>
h. Date of lambing.....	2015	<input type="checkbox"/>
i. Individual birth weights.....	2016	<input type="checkbox"/>
j. Number of lambs born.....	2017	<input type="checkbox"/>
k. Number of lambs weaned.....	2018	<input type="checkbox"/>
l. Individual weaning weights.....	2019	<input type="checkbox"/>
m. Hoof health management (lameness, trimming, or similar).....	2020	<input type="checkbox"/>
n. None of the above production records were kept.....	2021	<input type="checkbox"/>

This is a long list. If they don't maintain any records, check only n. 'None of the above records were kept.'





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9. During 2023, what types of formal training were provided by outside parties to anyone who had duties related to raising sheep? Outside parties could include extension, veterinarians, presenters, and sheep organizations.

[Select all that apply]

a. Identifying sick or injured animals.....	2022	1 <input type="checkbox"/>
b. Animal handling.....	2023	1 <input type="checkbox"/>
c. Euthanasia.....	2024	1 <input type="checkbox"/>
d. Lamb rearing practices.....	2025	1 <input type="checkbox"/>
e. Husbandry procedures (such as castration, tagging, shearing, milking).....	2026	1 <input type="checkbox"/>
f. Transportation of sheep.....	2027	1 <input type="checkbox"/>
g. Feeding and nutrition.....	2028	1 <input type="checkbox"/>
h. Sheep behavior.....	2029	1 <input type="checkbox"/>
i. Protocols for antibiotic use and withdrawal times.....	2030	1 <input type="checkbox"/>
j. Sheep quality assurance training.....	2031	1 <input type="checkbox"/>
k. Worker safety training.....	2032	1 <input type="checkbox"/>
l. Zoonotic disease prevention.....	2033	1 <input type="checkbox"/>
m. Sustainable parasite control.....	2034	1 <input type="checkbox"/>
n. Other (Specify: 0235.....)	2035	1 <input type="checkbox"/>
o. No training was provided.....	2036	1 <input type="checkbox"/>

If no trainings were provided, select only letter o. 'No training was provided'





10. During 2023, did your operation complete any genetic selection, genetic testing, or participate in any genetic improvement programs?

2037

1 ☐ Yes

3 ☐ No [Go to Section C on page 8]



**Screener question-
If they say 'No' you
skip to Section C.**

Genetic Selection- Ex. We only keep our ewes with that have the highest wool quality.

Genetic Testing- Ex. We test our sheep for scrapie susceptibility.

Genetic Improvement Programs- Ex. We participate in the National Sheep Improvement program (NSIP).



11. Did your operation use genetic testing to control for scrapie or select scrapie-resistant sheep?

2038

1 ☐ Yes

3 ☐ No [Go to Item 13]

12. Which of the following selection practices did your operation use to control for scrapie or select scrapie resistant sheep?

[Select all that apply]

a. Using genetically less susceptible rams (such as RR alleles).....

2039

1 ☐

b. Selecting genetically less susceptible ewes (such as QR or RR alleles).....

2040

1 ☐

c. Culling ewes that are genetically more susceptible (such as QQ alleles).....

2041

1 ☐

d. Other (Specify: 0242 _____).

2042

1 ☐

13. Did your operation use genetic selection or testing for any of the following purposes?

[Select all that apply]

a. Improve lamb or meat production.....

2043

1 ☐

b. Improve wool quality or wool production.....

2044

1 ☐

c. Improve the resistance of your sheep to internal parasites.....

2045

1 ☐

d. Other (Specify: 0246 _____).

2046

1 ☐



Section C- Feed and Housing Management

4. During 2023, were the following feed sources or supplements used for any sheep or lambs on this operation?
[Select all that apply]

- a. Cut hay (grass or legume).....
- b. Commercial complete feed (for example, "lamb chow").....
- c. Concentrate/grain rations (for example, corn, milo, barley, wheat, oats, rye).....
- d. High protein feed (for example, soybean meal, fish meal, or other protein).....
- e. Crop residue/by-product feed (for example, fat, soy hulls, wheat middlings).....
- f. Salt or mineral blocks or loose salt/mineral.....
- g. Other (Specify: 0319.....)
- h. None of the above types of feed sources or supplements were used.....

3013	1 <input type="checkbox"/>
3014	1 <input type="checkbox"/>
3015	1 <input type="checkbox"/>
3016	1 <input type="checkbox"/>
3017	1 <input type="checkbox"/>
3018	1 <input type="checkbox"/>
3019	1 <input type="checkbox"/>
3020	1 <input type="checkbox"/>

Dollars

5. What was the total cost spent on feed sources or supplements used during 2023?.....

3021

It's okay to estimate the money question!



Section D- Shearing and Wool Marketing

1. During 2023, were any of your operation's lambs or sheep shorn?

4001 1 ☐ Yes 3 ☐ No [Go to Section E on page 11]

**Screeners question- If they say
'No' you skip to Section E.**



2. During 2023, how many lambs and sheep were shorn?.....

Head

4002

3. During 2023, what percentage of the lambs and sheep shorn (Item 2) were sheared by the following individuals?

Percent

a. Employees (including owners).....

4003

b. Hired individual(s), not regularly employed by the operations.....

4004

c. Contracted shearing crew.....

4005

d. Other (Specify: 0406 _____)

4006

[Total must equal 100 percent]

100 %



10. What percentage of wool, including wool products that were sold (Items 8a - 8b), were marketed by the following methods?

- a. Warehouse.....
- b. Commercial buyer.....
- c. Cooperative pools.....
- d. Direct sales to consumers locally (within 400 miles from your farm)
- e. Direct sales to consumer not considered local.....
- f. Direct sales to a small mill.....
- g. Other (Specify: 0421 _____)
- h. Not sold.....

Percent

4015
4016
4017
4018
4019
4020
4021
4022
100%

[Total must equal 100 percent]

**If 8a and 8b = 0 lbs in previous question,
then you would put 100% in 10h. (No
wool or wool products sold)**



Section E- Movement and Marketing


1. During 2023, were any sheep or lambs permanently added to this operation from outside sources?

5001

1 ☐ Yes [Continue to Item 2]

3 ☐ No - In what year were any sheep last added to this operation?..... 5002
[Go to Item 7 on page 13]

Year (yyyy)



If no new additions in the past year,
you will skip to the questions about
sheep that left and returned to the
operation



2. Did your operation always require the following prior to arrival, or before commingling, for these newly added sheep or lambs before introducing them to the rest of your flock? [Select all that apply in both columns]

	Required prior to arriving on the operation?	Done on your operation before commingling with the rest of the flock?
a. Veterinarian examinations.....	5003 1 <input type="checkbox"/>	5013 1 <input type="checkbox"/>
b. Any vaccinations.....	5004 1 <input type="checkbox"/>	5014 1 <input type="checkbox"/>
c. Foot trim.....	5005 1 <input type="checkbox"/>	5015 1 <input type="checkbox"/>
d. Medicated footbath.....	5006 1 <input type="checkbox"/>	5016 1 <input type="checkbox"/>
e. Internal parasite fecal exam.....	5007 1 <input type="checkbox"/>	5017 1 <input type="checkbox"/>
f. Internal parasite treatment (deworming).....	5008 1 <input type="checkbox"/>	5018 1 <input type="checkbox"/>
g. External parasite treatment.....	5009 1 <input type="checkbox"/>	5019 1 <input type="checkbox"/>
h. Inspect sheep for abscesses and/or scars from previous abscesses.....	5010 1 <input type="checkbox"/>	5020 1 <input type="checkbox"/>
i. Preventive antibiotic treatment (oral bolus or injectable).....		5021 1 <input type="checkbox"/>
j. Other inspections or treatments (Specify: 0511.....)	5011 1 <input type="checkbox"/>	5022 1 <input type="checkbox"/>
k. No procedures required or completed.....	5012 1 <input type="checkbox"/>	5023 1 <input type="checkbox"/>

**ANSWER BOTH
COLUMNS**

Check here if
nothing is
required/done



5. How many of the following types of sheep that were added to the operation in 2023 (Item 4) came from the following sources? If none of the given type of sheep was permanently added, check the box at the top of the column.

	Number of head		
	Lambs (under 1 year old) EXCLUDE lambs born on the operation	Ewes	Rams
Check none if the sheep type was not permanently added	5035 <input type="checkbox"/> None	5041 <input type="checkbox"/> None	5047 <input type="checkbox"/> None
a. Sheep wholesaler or dealer.....	5036	5042	5048
b. Directly from another premises.....	5037	5043	5049
c. Livestock market or auction.....	5038	5044	5050
d. Fair or show.....	5039	5045	5051
e. Other (Specify: 5038.....)	5040	5046	5052
[Total must equal the total for that age class from Item 4]	[Item 4a]	[Item 4b]	[Item 4c]

This is a matrix question. The best way to answer this is to start with the first column and work your way down, then move onto the next column.

This should match what was reported in question 4

This is only for sheep that were purchased directly from another premises (row B above) or through a market or auction (row C above)

[If Item 5b = 0 or is missing and Item 5c = 0 or is missing for all three types of sheep (no additions directly from another premises or from a livestock market or auction), go to Item 7 on page 13]

6. For the sheep added to the operation directly from another premises (Item 5b) or through a livestock market or auction (Item 5c), what percentage of those additions were made through online contacts or purchases?.....

Percent
5053



Section F- Identification

1. Has this operation been assigned a unique flock identification (ID) as a part of the National Scrapie Eradication Program, such as a Flock Identification Number/Scrapie premises identification number (PIN)?

6001 1 ☐ Yes 2 ☐ Don't know 3 ☐ No

2. Do any of the sheep currently on this operation have an ear tag, tattoo, collar, ear notch, leg band, brand, microchip, or other device that identifies them?

6002 1 ☐ Yes 3 ☐ No [Go to Item 6 on page 16]

← **Screeners for
identification questions**



Start here and work your way across for each ID type



3. Were each of the following types of ID used for the sheep and lambs on your operation? If yes, how many head had this type of ID, and what information was on the ID?

[Flock identification uses a tag, brand, or other marker that indicates a sheep is a member of your organization's flock. Individual identification is unique and applied to each animal so it can be distinguished.]

[An official APHIS ear tag has the U.S. shield logo, State code, and a unique flock number.]

Check one only

ID type	Did your operation use this type of ID for sheep and lambs?	If Yes, how many head of sheep and lambs had this type of ID? Head	If Yes, what information was included on the ID?		
			Individual animal only	Flock only	Both
a. Tattoo.....	6003 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6012	6021 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Collar or leg band.....	6004 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6013	6022 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Ear notch.....	6005 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6014	6023 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Hot iron or freeze brand.....	6006 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6015	6024 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Paint brand.....	6007 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6016	6025 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Electronic ID or microchip.....	6008 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6017	6026 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Unofficial plastic ear tag.....	6009 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6018	6027 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Official APHIS ear tag with U.S. Shield logo (including metal scrapie ear tags, plastic scrapie ear tags, and other official ear tags)	6010 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6019	6028 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Other (Specify: 0620 _____).....	6011 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	6020	6029 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>



[If Item 3h equals No (no official APHIS ear tags), go to Item 6 on page 16]



Only for operations that did not use official APHIS ear tags (3h = No)

7. Which of the following describes why your operation does not use official APHIS ear tags in your flock?

[Select all that apply]

a. I only sell slaughter lambs, so am not required to apply official APHIS ear tags.....

6033	1 <input type="checkbox"/>
------	----------------------------

b. I do not move sheep off my farm, so I am not required to apply official APHIS ear tags.....

6034	1 <input type="checkbox"/>
------	----------------------------

c. I did not know I was required to officially identify my sheep before they leave the farm.....

6035	1 <input type="checkbox"/>
------	----------------------------

d. I use official flock ID tattoos instead of official APHIS ear tags.....

6036	1 <input type="checkbox"/>
------	----------------------------

e. I use registry tattoos instead of official APHIS ear tags.....

6037	1 <input type="checkbox"/>
------	----------------------------

f. I use registry recorded electronic identification implants instead of official APHIS ear tags..

6038	1 <input type="checkbox"/>
------	----------------------------

g. I use another type of official identification instead of official APHIS ear tags
(Specify: 6039 _____).....

6039	1 <input type="checkbox"/>
------	----------------------------

h. Official APHIS ear tags are no longer free so I stopped using them

6040	1 <input type="checkbox"/>
------	----------------------------

i. I do not use official APHIS ear tags for another reason
(Specify: 6041 _____).....

6041	1 <input type="checkbox"/>
------	----------------------------



Branching ID questions for official APHIS ear tags

If they used any official APHIS ear tags, they answer the rest of the columns in row h of item 3, then answer 4, 5, and 6, and then skip 7 to proceed to Section G

If they DIDN'T use official APHIS ear tags, they skip the rest of the columns in row h of item 3, then skip 4 and 5, answer 6 and 7, and proceed to Section G

Everyone answers 6 (ID at concentration points)

with U.S. Shield logo (including metal scrapie ear tags, plastic scrapie ear tags, and other official ear tags)					
i. Other (Specify: 0620 _____)	6011	6020	6029		
	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No		1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

[If Item 3h equals No (no official APHIS ear tags), go to Item 6 on page 16]

head had this	
's flock.	
he flock.]	
s included on	
only	Both
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	
3 <input type="checkbox"/>	

16

Head

4. During 2023, how many of the (Item 3h, column 2) sheep that had an official APHIS ear tag had that tag 6030

5. Who applies the majority of your operation's official APHIS tags? [Select one]

6031

1 ☐ You or another farm worker

2 ☐ Veterinarian

3 ☐ Market

4 ☐ Other (specify: 0631 _____)

6. During 2023, of the sheep that were permanently removed through a concentration point (slaughter, auction markets, fairs) approximately what percent had an official flock identification (ear tags, tattoos, or other official identification) when they left this operation or when they arrived at the concentration point?

NA - no sheep removed through concentration point	Percent
0632	6032
1 <input type="checkbox"/>	

[If Item 3h, column 1, equals Yes (used any official APHIS ear tags), go to Section G on page 17]

Which of the following describes why your operation does not use official APHIS ear tags in your flock? [Select all that apply]

a. I only sell slaughter lambs, so am not required to apply official APHIS ear tags.....	6033	1 <input type="checkbox"/>
b. I do not move sheep off my farm, so I am not required to apply official APHIS ear tags.....	6034	1 <input type="checkbox"/>
c. I did not know I was required to officially identify my sheep before they leave the farm.....	6035	1 <input type="checkbox"/>
d. I use official flock ID tattoos instead of official APHIS ear tags.....	6036	1 <input type="checkbox"/>
e. I use registry tattoos instead of official APHIS ear tags.....	6037	1 <input type="checkbox"/>
f. I use registry recorded electronic identification implants instead of official APHIS ear tags..	6038	1 <input type="checkbox"/>
g. I use another type of official identification instead of official APHIS ear tags (Specify: 0639 _____)	6039	1 <input type="checkbox"/>
h. Official APHIS ear tags are no longer free so I stopped using them	6040	1 <input type="checkbox"/>
i. I do not use official APHIS ear tags for another reason (Specify: 0641 _____)	6041	1 <input type="checkbox"/>



Section G- Biosecurity and Health Management

1. Does your operation have a written flock health management plan?

7001

1 ☐

Yes

3 ☐

No [Go to Item 4]

2. Were any of the following resources used in the development of the flock health management plan?

[Select all that apply]

a. Veterinarian.....

7002

1 ☐

b. Extension (university).....

7003

1 ☐

c. Other producers.....

7004

1 ☐

d. Reference materials (online or book).....

7005

1 ☐

e. Other types (Specify: 7006 _____)

7006

1 ☐

f. No resources used.....

7007

1 ☐

3. How frequently is the flock health management plan reviewed and updated if needed? [Select one]

7008

1 ☐

More frequently than yearly

2 ☐

Yearly

3 ☐

Less frequently than yearly

4 ☐

Not reviewed and updated



8. During 2023, did this operation normally require or perform individual animal testing for any of the following diseases?
[Select one in each row]


		Testing performed in			
		Resident sheep in flock only	New flock additions only	Both resident sheep and new additions	No testing performed
a. OPP (ovine progressive pneumonia).....	7033	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Johne's disease (paratuberculosis).....	7034	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Brucellosis (<i>B. ovis</i> , Epididymitis).....	7035	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Q fever (coxiellosis).....	7036	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Caseous lymphadenitis (boils, CL, abscesses).....	7037	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Scrapie genotype (DNA).....	7038	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Tuberculosis.....	7039	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Other (Specify: 0704.....).....	7040	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

➡ [If Items 8c equals No testing performed (no testing for brucellosis), go to Item 12, on page 20]

If they do not test for
brucellosis, you skip



12. At any time during the previous 3 years, have any of the following been suspected or confirmed in your flock by a veterinarian or laboratory? [Select one in each row]

For each disease, select one 		Not suspected	Suspected, but not confirmed	Confirmed by a veterinarian or laboratory
a. Johne's disease (paratuberculosis).....	7050	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Scrapie.....	7051	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Ovine progressive pneumonia (OPP).....	7052	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Foot rot.....	7053	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Caseous lymphadenitis (lumpy jaw, abscesses, CL).....	7054	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Enterotoxemia/overeating disease (clostridium C&D, not grain overload, pulpy kidney disease).....	7055	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Other clostridial diseases (for example, blackleg, malignant edema, braxy, tetanus, botulism, big head).....	7056	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Coccidiosis.....	7057	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Sore mouth (contagious ecthyma) [orf].....	7058	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Ring worm or club lamb fungus.....	7059	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. Blue tongue.....	7060	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
l. Toxoplasmosis.....	7061	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
m. Q fever (coxiellosis).....	7062	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
n. Chlamydiosis (enzootic abortion).....	7063	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
o. Campylobacteriosis (vibrio abortion).....	7064	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
p. Lamb pneumonia (<i>Mycoplasma</i>).....	7065	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
q. Cysticercosis.....	7066	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>



16. Are you a veterinarian?

7076 1 ☐ Yes 3 ☐ No

17. During 2023, did this operation consult a veterinarian for any reason related to sheep health, productivity, or management?

7077 1 ☐ Yes 3 ☐ No [Go to Item 20]  **Skip if they haven't used a vet**

18. During 2023, for which of the following reasons was a veterinarian consulted? [Select all that apply]

- a. Regular or routine visits (for example, pregnancy checks, flock health visits, breeding soundness, exams, health certificate)
- b. Emergency visits (for example, birthing difficulty, sick sheep, lameness).....
- c. Veterinary Feed Directives or antibiotic prescriptions.....
- d. Diagnose parasite infections.....
- e. Make decisions about dewormer treatment.....
- f. Other (Specify:0783 _____).....

7078	1 <input type="checkbox"/>
7079	1 <input type="checkbox"/>
7080	1 <input type="checkbox"/>
7081	1 <input type="checkbox"/>
7082	1 <input type="checkbox"/>
7083	1 <input type="checkbox"/>

19. During 2023, how did you consult your veterinarian? [Select all that apply]

- a. In person or on-farm visit.....
- b. By phone, text, or email.....
- c. Other (Specify:0786 _____).....

7084	1 <input type="checkbox"/>
7085	1 <input type="checkbox"/>
7086	1 <input type="checkbox"/>



20. How would you describe your operation's Veterinarian-Client-Patient Relationship (VCPR) for your sheep?
[Select one]

7087

- 1 ☐ A written agreement between my veterinarian and me
- 2 ☐ A verbal agreement between my veterinarian and me
- 3 ☐ My veterinarian has not formally mentioned a VCPR for my sheep but I consider that I have one based on his/her relationship with my operation
- 4 ☐ No VCPR

Everyone answers this question, regardless of their vet use status in the previous 12 months.





**This question is
only for operations
that did not use a
vet**



[If Item 17 equals Yes (consulted a veterinarian for sheep in 2023), go to Item 22]

21. During 2023, if no veterinarian was used, which of the following best describes why not? [Select one]
7088

- 1 ☐ Veterinarian available in the local area but not knowledgeable about sheep
- 2 ☐ No veterinarian available in the local area
- 3 ☐ Too expensive
- 4 ☐ No veterinarian needed on this operation - no health-related problems
- 5 ☐ No veterinarian needed on this operation - animals treated by farm personnel
- 6 ☐ No veterinarian needed on this operation - other reason (Specify: 0788_____)
- 7 ☐ Other (Specify: 0789_____)



Branching veterinarian use questions

If they used a vet in 2023, they answer 18 and 19 (on vet use), 20 (on VCPR), skip 21 (on why they didn't use a vet), and then proceed to 22 (on the new FDA regulation)

If they DIDN'T use a vet in 2023, they skip 18 and 19 and then answer 20 and 21 and then proceed to 22

Everyone answers the 20 (VCPR) and 22 (on the new FDA regulation)

17. During 2023, did this operation consult a veterinarian for any reason related to sheep health, productivity, or management?
1 ☐ Yes 3 ☐ No [Go to Item 20]

18. During 2023, for which of the following reasons was a veterinarian consulted? [Select all that apply]

a. Regular or routine visits (for example, pregnancy checks, flock health visits, breeding soundness, exams, health maintenance)	7078	1 <input type="checkbox"/>
b. Emergency visits (for example, birthing difficulty, sick sheep, lameness)	7079	1 <input type="checkbox"/>
c. Veterinary Feed Directives or antibiotic prescriptions	7080	1 <input type="checkbox"/>
d. Diagnose parasite infections	7081	1 <input type="checkbox"/>
e. Make decisions about dewormer treatment	7082	1 <input type="checkbox"/>
f. Other (Specify: 0783 _____)	7083	1 <input type="checkbox"/>

19. During 2023, how did you consult your veterinarian? [Select all that apply]

a. In person or on-farm visit	7084	1 <input type="checkbox"/>
b. By phone, text, or email	7085	1 <input type="checkbox"/>
c. Other (Specify: 0786 _____)	7086	1 <input type="checkbox"/>

20. How would you describe your operation's Veterinarian-Client-Patient Relationship (VCPR) for your sheep? [Select one]

7087

1 <input type="checkbox"/> A written agreement between my veterinarian and me
2 <input type="checkbox"/> A verbal agreement between my veterinarian and me
3 <input type="checkbox"/> My veterinarian has not formally mentioned a VCPR for my sheep but I consider that I have one based on his/her relationship with my operation
4 <input type="checkbox"/> VCPR

21. During 2023, if no veterinarian was used, which of the following best describes why not? [Select one]

7088

1 <input type="checkbox"/> Veterinarian available in the local area but not knowledgeable about sheep
2 <input type="checkbox"/> No veterinarian available in the local area
3 <input type="checkbox"/> Too expensive
4 <input type="checkbox"/> No veterinarian needed on this operation - no health-related problems
5 <input type="checkbox"/> No veterinarian needed on this operation - animals treated by farm personnel
6 <input type="checkbox"/> No veterinarian needed on this operation - other reason (Specify: 0788 _____)
7 <input type="checkbox"/> Other (Specify: 0789 _____)

22. One goal of these studies is to understand availability and barriers to accessing animal health products, including antibiotics. Were you aware that on June 11, 2023, a new FDA regulation was put in place prohibiting the sale of medically important antibiotics (antibiotics important for human use) over-the-counter?

7090

1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No [Go to Item 24]
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Section H- Conclusion

Thank you for completing the first phase of this study. Phase II of this study includes a follow-up questionnaire and the chance to test your sheep for gastrointestinal parasites, pathogens that could cause foot rot or digital dermatitis, and enteric pathogens (*E. coli*, *Salmonella*, and *Campylobacter*).

See the Informed Consent Form included in this mailing or at https://www.aphis.usda.gov/animal_health/nahms/sheep2024-nassconsent.pdf for more information about Phase II of this study.

1. If you have 20 or more ewes, would you like the opportunity to participate in Phase II of this study?

8001 1 ☐ Yes [Continue] 3 ☐ No [Go to Item 4 on page 24] 4 ☐ Fewer than 20 ewes [Go to Item 4 on page 24]

2. Please record the name, phone number, address, and email address for the best person to contact for Phase II of the study.

Name 8002	Phone Number 8003
Address 8004	
Email Address 8005	



WIX Website

<https://brchitt.wixsite.com/usdanassspr/nahms>

NAHMS

NAHMS Interviewers Manual

NAHMS Questionnaire

NAHMS Timeline and Biologics Benefits

NAHMS Cover Letter

NAHMS Informed Consent

NAHMS Study Launch Sheet



Questions?

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