

Biosecurity Pre Purchase Checklist

| Ask your agent or supplier to confirm the following infor | mation. | | |
|--|--|----------------------------------|--|
| Number and class of animals to be purchased: | | | |
| Vendor details: | | | |
| Trading name: | NAIT number: | | |
| Address: | | | |
| Phone number: Ema | il: | | |
| Will the animals pass through saleyards prior to arrival? | | Yes / No | |
| - If yes: Saleyards: | Date: | | |
| Name of trucking company transporting animals: | | | |
| Vendor's vet's business name and phone number: | | | |
| General | | | |
| Ask your agent or supplier to provide a list of the animals identification. Ensure you are provided with the movement born on, and where have they been since, including any g | nt history of all the animals, including where | - | |
| Before the animals leave the farm of origin or saleyo | ırds, have they been checked for: | | |
| Visually healthy and fit to be transported? (no sign no discharges from eyes, nose or mouth; and look | - | ve mastitis; Yes / No | |
| - Do they meet the agreed body condition score or l | iveweight targets in the contract? | Yes / No | |
| - Have any of the animals been disbudded, dehorn | - Have any of the animals been disbudded, dehorned, or castrated in the last 7 days? | | |
| If the animals are pregnant, have you been advised. | of expected calving dates? | Yes / No | |
| Animal Health | | | |
| Mycoplasma bovis (<i>M. bovis</i>) – notifiable bacterial o | disease of cattle. | | |
| Have you checked the <i>M. bouis</i> history of the animal the source herds they come from, and the area they | | Yes / No | |
| Bovine Tuberculosis (TB) – notifiable bacterial disec | ase that can also affect people | | |
| • Have you checked the TB status of the animals? | | Yes / No | |
| Bovine Viral Diarrhoea (BVD) – viral disease causin and decreased immunity. Calves born to infected de | | | |
| • What is the BVD testing status of the source herd? | Bulk milk te | est / Animal testing | |
| • What is the BVD status of the purchased animals? | Positive / No | Positive / Not tested / Negative | |
| Have they been tested to confirm they are not PI carr | riers of the virus? | Yes / No | |
| - If yes, ask your agent or supplier to provide a certifi | cate of this. | | |
| Have the purchased animals been vaccinated again | st BVD? | Yes / No | |
| - If yes: Vaccine: | Date given: | | |



Johnes - an incurable bacterial disease which causes chronic diarrhoea and progressive weight loss.

| • | Has the source herd been Johnes tested? | | Yes / No |
|-----|--|-----------------------------------|------------|
| • | What is the Johnes status of the purchased animals? | Positive / Not-detected / | ' Unknown |
| • | When was the last Johnes test completed? | Date: | |
| | ptospirosis – bacterial disease, a health and safety risk for people or lure in cattle and a decrease in milk production. | n farm, and a cause of reprodu | ctive |
| • | Is the source herd vaccinated against Leptospirosis? | | Yes / No |
| • | Have the purchased animals been vaccinated against Leptospirosis? | | Yes / No |
| | - If yes: Vaccine: | Date given: | |
| Ot | her vaccinations – for example Salmonella, Rotavirus, IBR, clostridio | al diseases (e.g. 5-in-1, 7-in-1) | |
| • | Have the purchased animals been vaccinated against any other diseases | ? | Yes / No |
| | Vaccine: | Date given: | |
| Ot | her treatments | | |
| • | Have the purchased animals received any mineral (eg magnesium, copper, calcium, selenium) or vitamin supplements? | | Yes / No |
| | - If yes: Vaccine: | _Date most recently given: | |
| • | Have the purchased animals received any zinc treatment (for facial eczema)? Yes / No | | |
| | - If yes: Vaccine: | _Date most recently given: | |
| Dre | enching and pour-on treatments | | |
| • | Have the purchased animals been treated for internal or external parasite | es? | Yes / No |
| | - If yes: Product: | Date given: | |
| • | Does the source herd have any history of drench resistance? | Yes / No / | Don't know |
| Мс | estitis | | |
| • | Have you viewed dry cow treatment records for the purchased animals? | | Yes / No |
| • | Have you viewed the Somatic Cell Count (SCC) and mastitis records of the | purchased animals? | Yes / No |
| | | | |

Other animal health information

Is there any other health information that is important for the purchaser of the animals from this herd to know about? For example, other diseases on farm e.g. incidence of lameness, arthritis, pneumonia, general calf health, slips and abortions, Theileria, Digital Dermatitis.

For more information see dairynz.co.nz/animal-health