

RAMP WORKBOOK



Herd Code:	
Date Due:	

Vermont Cattle Health Improvement Program Herd information, owner goals and general biosecurity

Lameness Incidence and Level of Concern

				3
Other:	U	1	2	3

Milk Production, Quality / Udder Health								
Bulk Tank SCC []	U	1	2	3		
Bacteria Count / SPC	[]	U	1	2	3		
Mastitis cases per mo.	[]	U	1	2	3		
Milk culture protocols (b	oulk tank,	cases, f	resh	n, otl	ner?):		
Recent culture and sensitivity results:								
Milk/cow/day	Fat%	P	rotei	n%				
EMC DMC 5(e6 Tm	(4 155/P <	<td></td> <td>)Tj (</td> <td>y)16</td> <td>a6 T</td>)Tj (y)16	a6 T		
Reproductive Progrve F	P002 Tc 6	256.91	911	1.4 r	e W	n 5		

 []]
 U
 1
 2
 3

 Herd Average DIM
 U
 1
 2
 3

 Abortions / year (% herd)
 U
 1
 2
 3

 Embryonic Loss?
 U
 1
 2
 3

 Al or Natural Service?
 U
 1
 2
 3

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Herd Code:	Farm Name (optional):	Date:
Veterinarian: Phone:	Facilitator (if applicable):	First or Follow -up RAMP?

Part A. Herd History

What year was this herd started or assembled? _____ (from previous if follow-up RAMP)

How long has the herd been on these premises?

What % of the current herd was not born in the herd but was acquired or purchased? _____

What % of the current herd w39ap(aw (L)Tj ET Q q 123.6 399.12 94.92 13.199 re W n BT /TT0 1 Tf -0.002 Tc 0.007

Dulla			
Dulis			
Total			

Part C. Clinical Case History of Johne's Disease

List cattle that you know or strongly suspected had Johne's disease based on clinical signs starting with the most recent and working back. Note if cattle were raised in the herd (R) or acquired (A). This will help assess disease time line and progression in the herd.

ID	Date	Age	<u>R/A</u>	Tested?	ID	Date	Age	<u>R/A</u>	Tested?

What age was the oldest animal with clinical Johne's? _____ Raised or purchased? (circle)

What age was the youngest animal with Johne's? _____ Raised or purchased? (circle)

What percent of the adult herd was clinical Johne's cases for the past year?

What percentage of total culls for the past year were clinical Johne's cases?

Case Summary : Tally the number of diagnosed and/or suspected clinical cases for the last 12 months.

	1 st lact ation or younger	2 nd lactation or older	Total	As a % of cow herd
No. raised				
No. acquired				

For any testing that has been done during the previous year, what is the estimated test prevalence? ELISA+ ____ / Total Tests ____ = Fecal+___ / Total Fecals ____ =

Part D. Herd Prevalence Estimate

None	l	Low		Moderate		
0	1	2	3	4	5	6

Place an X on the line above where you estimate herd prevalence of Johne's disease might be. Consider number, age, source, time frame of clinicals. The table below provides guidance.

Low (1 -2)	Moderate (3-4)	High (5 -6)
 x No or rare clinical cases x Cases only in purchased animals x ~< 5% test prevalence mostly in older animals x Excellent management and sanitation 	 x Occasional clinical cases in home-reared animals x Recent history of 2-5% clinicals/year x ~6-19% test prevalence overall x Management allowed for some exposure of young stock to manure of older animals 	 x Frequent cases in home-reared animals x Increasing clinical cases x Decreasing age of clinicals x ~> 20% test prevalence distributed across age groups x Severe risks exist for contact of young stock with manure of older animals

What is the relative impact of Johne's disease on the farm operation and goals? (Assess its impact on economic losses, culling, production, genetics, overall health, internal herd growth, etc.)



Describe impacts:

Part E. Johne's Disease Area Assessment Score Sheet

Place the corresponding column number in the box to the right of the management practice that most closely signifies your subjective assessment of this farm's risk for that item. <u>Consider the impact of the estimated prevalence of disease in the herd on risks (Higher prevalence</u> <u>A</u>Higher score). Also consider how & when current management conditions differ from the past that may have impacted risks. Check boxes as applicable and provide explanations in space to the right.

Calving Area Describe calving area(s) (winter/summer):

0. No Risk	1.	2. Low	3.	4.	5. Moderate	6.	7.	8. High	9.	10. Very High
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Describe calving conditions and management:

1. Multiple animal use

[Single animal/Single pen ÆGroup Pen] Avg # in group pen_____

Post -Weaned Heifers Describe housing (winter/summer):

Johne's Disease Risk Assessment Part F. Risk Summary*

Summarize the Herd's Risk Scores

1.For each area, calculate the herd's score as:

х

The herd plan is developed from the risk assessment by formulating and prioritizing management procedures to mitigate the identified risks. <u>Strategies should be as specific as possible focusing on prevention as well as control and on potential risks as well as real risks.</u> The herd plan should attempt to assign responsibilities and, when appropriate, establish written standard operating procedures for disease management as well as identify appropriate testing strategies to meet herd goals. Use any format you choose to complete the herd plan.

Recommended m anagement practices should be focused on the following objectives:

Keep calving area clean, dry and uncrowded, used preferably by one cow at a time and separate from sick cows.

Avoid feeding colostrum or unpasteurized milk from high risk animals.

Prevent exposure of calves/heifers to adult cows and their manure.

Prevent fecal contamination of feed and water, especially that fed to calves and heifers.

Prevent introduction of infected animals and animals of unknown health status to the herd.

Promptly identify, segregate, and manage or cull high-risk or infected animals.

Consider these criteria in negotiating what you want to include in your plan:

1. Do the recommended management practices:

benefit overall herd health, performance and other priorities? target your farm-specific risks, objectives and priorities (short- and long-term) for Johne's disease?

2. Are recommended practices realistic for you and employees? Are they

Herd Plan Date: _____ Herd Code: _____

Farm name (optional):

Strategy or management practice to be implemented to reduce identified risks	Priority	Person Responsible
Testing Strategy:		