

# NATIONAL GOAT HEALTH STATEMENT

Attached to accompanying NVD/Waybill No.

## SECTION 1 – CONSIGNMENT INFORMATION

Owner of goats .....

Property/place where the journey commenced (full address) .....

.....State ..... Postcode .....

Property Identification Code (PIC) of this property:

Number	Year born (month, if known)	Description (ie. Breed, sex and type)	Identification (eg. PIC/brand on ear tag if different to above)

*Please attach a list if more information is required.*

## SECTION 3 – FOOTROT

6. Have the goats in this consignment been observed for, and any suspect goats examined for, signs of **FOOTROT** during the past 14 days? Yes  No
7. To the best of your knowledge, are the goats in this consignment free of **VIRULENT FOOTROT**? Yes  No
8. To the best of your knowledge, are all sheep and goats on the consignor's property free from **VIRULENT FOOTROT**? Yes  No

## SECTION 4 - OTHER HEALTH INFORMATION

9. Is the herd **CAPRINE ARTHRITIS ENCEPHALITIS (CAE) ACCREDITED FREE**? Yes  No   
 Herd Accreditation No: ..... Expiry Date: ...../...../.....
10. The goats in this consignment are derived from a herd which has had a whole herd negative test for **CAE** within the last 90 days. Yes  No
11. To the best of your knowledge, are the goats in this consignment free from **LICE**? Yes  No
- | 12. Treatments                     | Product | Date of last treatment |
|------------------------------------|---------|------------------------|
| External Parasite Treatment        | .....   | ...../...../.....      |
| Drench                             | .....   | ...../...../.....      |
| Vaccination other than JD (Eg CLA) | .....   | ...../...../.....      |
| Other                              | .....   | ...../...../.....      |

## SECTION 2 – JOHNE’S DISEASE (JD)

1. This consignment has an assurance rating of: (*refer and complete overleaf*)
- Section A**  
Herd of Origin Rating

+

**Section B**  
Risk Management Rating

=

**TOTAL ASSURANCE RATING**
2. Were all these goats born on the above property? Yes  No   
 If no, date introduced ...../...../..... Assurance rating of goats at time of introduction:   
*Note: If goats were sourced over multiple dates or from different vendors please attach supporting information*
3. Have goats with lower assurance rating than the consigned goats been introduced into the herd in the last 2 years? Yes  No   
 If yes, what is the lowest assurance rating of those introduced goats?
4. How many different sources of goats have been introduced to the consignor's property in last 2 years? None  1-5  6+  Bucks only
5. Are all these consignment goats from a GoatMAP herd? Yes  No   
 Status..... Expiry date ...../...../.....

## SECTION 5 - DECLARATION

As the owner and /or person responsible for the husbandry of the goats in this consignment, I declare that the information in this statement is true and correct.

Signed: ..... Date:...../...../.....

Name (print): .....

Contact phone: .....

*Persons making false statements may be liable under fair trading and other relevant state legislation.*

# NATIONAL GOAT HEALTH STATEMENT

**PLEASE NOTE:** This is a rating risk and is not a quantitative risk assessment.

## SECTION A: Choose 1 Category in this section

Circle **only one** rating in this section and enter that rating at the bottom of Section A.

The herd from which the goats are consigned is:	Assurance Rating
In the Goat MAP with MN3 status	8
In the Goat MAP with MN2 status	7
In the GoatMAP with MN1 status	6
Not known infected and has no risk factors <sup>(1)</sup>	5
Not known infected, but has risk factors <sup>(1)</sup>	4
Restricted 2 status – RD2 <sup>(2)</sup>	3
Restricted 1 status – RD1 <sup>(3)</sup>	2
Infected but undertaking an approved Property Disease Management Plan <sup>(4)</sup>	1
Infected <sup>(5)</sup>	0
<b>HERD RATING FOR SECTION A</b>	

## SECTION B: Choose 1 or more categories in this section

Circle the number where applicable and add them at the bottom of Section B

The following management factors reduce the risk of Johne’s disease in this herd:	Assurance Rating
The herd is not in the GoatMAP, but has had a Check Test <sup>(6)</sup> with negative results in the past 12 months	1
The consignment of goats are Approved Vaccinated Goats <sup>(7)</sup>	1
The consignment of goats has been reared under a national approved kid rearing program <sup>(8)</sup>	1
<b>HERD RATING FOR SECTION B</b>	

ASSURANCE RATING = A + B =

## EXPLANATORY NOTES

### 1. Risk Factors:

- (a) The herd contains goats that were born or raised with dairy goats. The herd contains dairy breeds or dairy cross breed goats. Exceptions are goats that are from GoatMAP herds, or goats born and raised in WA.
- (b) The herd has grazed land in the past 5 years that is at risk of JD contamination. Land at risk of JD contamination includes land that is being grazed, or has been grazed in the preceding 12 months, by:
  - Dairy breeds or dairy cross bred goats, which are not sourced from GoatMAP herds.
  - Goat herds with RD2 or lower status.
  - Dairy cattle with a Dairy Assurance Score of less than 7.
  - Beef cattle, other than those in the CattleMAP or Beef Only.
  - Sheep which have an ABC score of less than 3.

**2. RD2:** A herd which has had a second negative herd test of all animals over 12 months of age in the herd, at least 2 years after RD1 status was achieved as part of an Approved Property Disease Management Plan.

**3. RD1:** A herd with a history of infection which has had 1 negative herd test of all animals over 12 months of age in the herd, at least 12 months after the last infected animal was removed from the herd as part of an approved Property Disease Management Plan.

**4. Infected but undertaking an approved Property Disease Management Plan:** An infected herd that has not yet progressed to RD1 status but is complying with an on-farm disease control program combining elements of testing, kid rearing and biosecurity that has been approved by Chief Veterinary Officer (CVO) of the jurisdiction.

**5. Infected: means infected with Johne’s disease.** Herds are no longer regarded as infected when a Property Disease Management Plan, which has been approved by the Chief Veterinary Officer (CVO) of the jurisdiction, has been completed.

**6. Check Test:** A test of 50 goats over 12 months of age in the herd (or all goats over 12 months of age in smaller herds) by serology or faecal culture or pooled faecal culture of two (2) pools each of 25 goats, with negative results. The animals should be selected so as to increase the probability of detecting infection, i.e. older animals, animals in poor body condition.

### 7. Approved Vaccinated Goat: A goat that is:

- vaccinated with an approved Johne’s disease vaccine by 16 weeks of age; or
- vaccinated with an approved Johne’s disease vaccine after 16 weeks of age where, in the written opinion of a GoatMAP approved veterinarian, vaccination occurred prior to exposure to Johne’s disease infection; and
- is identified by an Approved Vaccination Tag.

**8. Nationally approved kid rearing program:** A kid rearing program designed to minimise the spread of Johne’s disease in intensively managed herds, which has been documented and agreed by GICA and Animal Health Committee. (In development)