



# Pig Breeding Company Health Declaration Form - Gilts



*This form should be completed by the veterinary surgeon responsible for the unit/breeding company supplying the breeding stock or rearing stock. Please complete the form as fully as possible.*

Date completed: \_\_\_\_\_

Maidens/Weaners: \_\_\_\_\_

Frequency of routine veterinary inspection: \_\_\_\_\_

(Supply farm)

Date of last veterinary inspection: \_\_\_\_\_

Name/address of supply farm:

Breeding company name/address:

Veterinary surgeon responsible & practice address:

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### Health Information of Supply Farm

Infection	Herd health status Positive, negative or unknown/vaccinated	Date and result of last test (no. positive/no. tested) NT = not tested	Laboratory name and location	Method(s) of routine assessment S – serology, PCR, A – abattoir lesion, PM – post mortem surveillance and culture, CF – clinical freedom only, NRM – No routine monitoring. Please state other methods if applicable
PRRS ( <i>Porcine reproductive and respiratory syndrome</i> )				
Enzootic pneumonia ( <i>Mycoplasma hyopneumoniae</i> )				
Pleuropneumonia (due to <i>Actinobacillus pleuropneumoniae</i> )				
Progressive atrophic rhinitis (toxigenic <i>Pasteurella multocida</i> )				
Swine dysentery ( <i>Brachyspira hyodysenteriae</i> )				
Streptococcal meningitis ( <i>Streptococcus suis</i> ) and/or septicaemia due to <i>S.suis</i> serotypes 1, 1/14, 2, 1/2 or 9 (please state any other serotypes isolated from clinical cases)				
Sarcoptic mange ( <i>Sarcoptes scabiei var suis</i> )				
<i>Salmonella choleraesuis</i>				
Swine influenza virus (If present what serotypes)				
Clinical PMWS (Post weaning multi-systemic wasting syndrome) Associated with Porcine circovirus type 2				
PDNS incidence >0.1% (Porcine dermatitis & nephropathy syndrome)				
TGE (Transmissible Gastro Enteritis) PED (Porcine Epidemic Diarrhoea)				

P.T.O

For herds with finishing pigs

**Recent average scores of supply farm from WPS/BPHS or other abattoir monitoring programme**

Date	Av. EP-like score	Extensive pleurisy %	Pleuropneumonia %	Pericarditis %	Av. Atrophic rhinitis score	Av. Papular dermatitis score

**Latest Salmonella test results from supply farm, percentage (average percentage positive value) Meat-juice (12 month rolling) / Serum Elisa or Faecal Culture (complete sero-type if known)**

Date	Stock tested (sows or finishers)	Results Positive number/tested	Average percent positive for batch

**Any other significant health problems noted in the supplying herd within the last 12 months (with specific diagnoses, treatment used and outcome where applicable)**

Date	Clinical problem	Veterinary diagnosis	Treatment	Outcome

**Any routine medication and/or vaccinations required by the herd as a whole including parasite control, and the age/production stage when used (Please include use of acid in feed or water)**

Vaccine(s)/Medication	Age/Stage used

**Specific herd requirements - treatments given on the supply farm**

Dates	Vaccination

Any other comments:

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Print Name:

Veterinary surgeon signature:

Date:

Disclaimer: This report is intended solely for the information of the client and will be treated with due confidentiality. It is aimed to protect the health status of the recipient herd and is not intended to be used as the basis for legal proceedings.