

# Pig PME Supplementary History

WVSC reference:	WVSC USE ONLY
Date received:	WVSC USE ONLY

**PLEASE USE THIS FORM AS AN AIDE MEMOIR TO SUPPLEMENT THE HISTORY ON THE MAIN SUBMISSION FORM**

**FARMER'S NAME, FARM NAME & ADDRESS**

Postcode:	
CPHH:	

**HISTORY DETAILS**

Date	
History taken by	
History provided by	PVS <input type="checkbox"/> Farmer <input type="checkbox"/> Stockperson <input type="checkbox"/> Other <input type="checkbox"/> (please specify):
Telephone no.:	

**CLINICAL DISEASE**

Affected pigs:	Boars <input type="checkbox"/> Dry sows <input type="checkbox"/> Farrowing sows <input type="checkbox"/> Gilts <input type="checkbox"/> Finishers <input type="checkbox"/> Weaner/growers <input type="checkbox"/> Pre-weaned piglets <input type="checkbox"/> Neonatal (< 1wk) <input type="checkbox"/>
Main clinical sign in your own words:	
Other signs:	
When did the problem begin?	Is it: increasing <input type="checkbox"/> decreasing <input type="checkbox"/> no change <input type="checkbox"/>

**ANTIMICROBIAL TREATMENT OF AFFECTED PIGS**

Product(s): given for current problem:	
When did treatment commence?	Route of admin: in-feed <input type="checkbox"/> in-water <input type="checkbox"/> injected <input type="checkbox"/>
Response to treatment:	
What routine in-feed inclusions are used in the affected group?	
When were the affected pigs last treated with antimicrobials?	
What vaccines have the affected pigs received?	

**HUSBANDRY**

Pen type:	solid floor <input type="checkbox"/> part slatted <input type="checkbox"/> slatted <input type="checkbox"/> flat-deck <input type="checkbox"/> outdoors <input type="checkbox"/>	Approximate number of pigs per pen:	
All-in/all-out basis:	No – continuous stocking <input type="checkbox"/> all-in/all-out per shed <input type="checkbox"/> all-in/all-out entire unit <input type="checkbox"/>		
Feed:	wet <input type="checkbox"/> dry pellet <input type="checkbox"/> dry meal <input type="checkbox"/> homemix <input type="checkbox"/> proprietary <input type="checkbox"/>		
Water supply:	mains <input type="checkbox"/> borehole <input type="checkbox"/> well <input type="checkbox"/>	Is water tested?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Any other relevant information:			

**DISEASE STATUS OF HERD**

Tick if <u>confirmed present</u> in herd:	PRRSV <input type="checkbox"/> PMWS <input type="checkbox"/> APP <input type="checkbox"/> EP <input type="checkbox"/> Strep. suis 2 <input type="checkbox"/> Glassers <input type="checkbox"/> Other <input type="checkbox"/> (please specify)
Tick if <u>suspected</u> in herd:	PRRSV <input type="checkbox"/> PMWS <input type="checkbox"/> APP <input type="checkbox"/> EP <input type="checkbox"/> Strep. suis 2 <input type="checkbox"/> Glassers <input type="checkbox"/> Other <input type="checkbox"/> (please specify)

**VACCINES USED**

Breeding pigs:	Erysipelas <input type="checkbox"/> Parvo <input type="checkbox"/> PRRS-live <input type="checkbox"/> PRRS-dead <input type="checkbox"/> Clostridia <input type="checkbox"/> PCV2 <input type="checkbox"/> E coli <input type="checkbox"/> Other <input type="checkbox"/>
	Details (eg which ones):
	Is feedback practised? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details (what, when):
Rearing pigs:	EP (1 dose) <input type="checkbox"/> EP (2 dose) <input type="checkbox"/> PCV2 <input type="checkbox"/> PRRS <input type="checkbox"/> Glassers <input type="checkbox"/> APP <input type="checkbox"/> Other <input type="checkbox"/>
	Details (e.g. which ones, when given):

**HERD REPRODUCTION DETAILS**

Main method of breeding:	AI <input type="checkbox"/> Natural service <input type="checkbox"/> N/A <input type="checkbox"/>
Farrowing:	Weekly <input type="checkbox"/> or Batch farrowing <input type="checkbox"/> every _____ weeks N/A <input type="checkbox"/>

Please tick this box if samples cannot be used anonymously for research and/or test development

**DATA PROTECTION:** Any information given on this form regarding samples submitted for post-mortem examination may be shared with the APHA as part of the government surveillance network. For further information on how we handle personal data please read our privacy notice at [www.wvsc.wales](http://www.wvsc.wales)

**HERD DETAILS**

Number of years on site		Approx. number of growing pigs	
Approx. number of sows		Approx. replacement rate of breeding herd %	
Parity spread of herd		Average parity of herd	
Average weaning age (days)		Number of litters mixed per pen at weaning	

**REPLACEMENT DETAILS**

Semen only (no.pigs) <input type="checkbox"/> or Replacement boars <input type="checkbox"/>	Replacement: Gilts <input type="checkbox"/> Weaners <input type="checkbox"/> Finishers <input type="checkbox"/>
Source of replacement gilts: Homebred <input type="checkbox"/> Multiplier <input type="checkbox"/> Nucleus <input type="checkbox"/> Other <input type="checkbox"/>	
Have there been any changes in pig sources in the past year? When and what?	
How long since new pigs have been introduced on the unit? Type of pigs?	
Have pigs on this unit been imported from outside the UK? Yes <input type="checkbox"/> No <input type="checkbox"/> Specify country:	
Quarantine period: None <input type="checkbox"/> or time in weeks _____	
Distance and type of nearest pig unit: Distance _____ miles Breeder <input type="checkbox"/> Breeder/finisher <input type="checkbox"/> Finisher <input type="checkbox"/> What other livestock could have direct or indirect contact with pigs?	

**FOR PIGLET ISSUES**

Are affected litters normal at birth?	Yes <input type="checkbox"/> No <input type="checkbox"/> If not, what signs do they show?
As far as you can tell, are piglets taking colostrum well? Yes <input type="checkbox"/> No <input type="checkbox"/> Not known <input type="checkbox"/>	
Total numbers of litters in affected batch (es):	Total number of litters affected per batch:
Number of gilt litters in affected batch(es):	Number of gilt litters affected:
Parity range of sows with affected litters:	From which parity are litters most affected?

What was average pre-weaning mortality rate before the problem started (%)?	What is the average pre-weaning mortality now (%)?
Has there been any concurrent increase in: - Infertility <input type="checkbox"/> Abortion <input type="checkbox"/> Stillbirths <input type="checkbox"/> Mummies <input type="checkbox"/> Weak piglets at birth <input type="checkbox"/>	
What routine medication is used in piglets up to weaning?	
Farrowing accommodation: solid floor <input type="checkbox"/> part slatted <input type="checkbox"/> slatted <input type="checkbox"/> outdoors <input type="checkbox"/>	
Cleaning and disinfecting: Are farrowing pens cleaned and disinfected between batches Yes <input type="checkbox"/> NO <input type="checkbox"/>	
All-in/all-out: no – continuous production <input type="checkbox"/> yes - all in/all out on room or shed basis <input type="checkbox"/>	
If outdoors: Individual paddocks <input type="checkbox"/> Group paddocks <input type="checkbox"/>	
Is creep feed offered? No <input type="checkbox"/> Yes <input type="checkbox"/> From what age? ____ days old	
Routine interventions: Ear tagging or other ID <input type="checkbox"/> Tail docking <input type="checkbox"/> Tooth clipping <input type="checkbox"/> Iron injection <input type="checkbox"/>	

**ANY OTHER ISSUES IN THE REST OF THE HERD / ANY OTHER COMMENTS**

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