



Missouri Department of Agriculture (MDA)

Chronic Wasting Disease (CWD)

Voluntary Herd Certification Agreement for Captive Cervids

Following are the methods and rules for establishing and maintaining a CWD monitored captive cervid herd as required by the United States Department of Agriculture (USDA) and administered by MDA. This is a voluntary program for Captive Cervids in Missouri.

SECTION I. INDIVIDUAL ANIMAL IDENTIFICATION

All animals over one year of age are identified with an official ear tag and an additional approved identification device unique to that individual animal within the herd. Use the same individual animal identification on all herd inventory records. All animals less than one year of age will be identified on a change of ownership.

NATURAL ADDITIONS to the herd will be noted on the inventory record as "NA" along with their individual animal identification; and

PURCHASED ADDITIONS will be noted with the letters "PA" along with their individual animal identification.

Any animal in the herd that must be retagged or re-identified will be noted with the letters "RT" and the former identification provided.

SECTION II. SURVEILLANCE

Surveillance will be maintained on the monitored herd by collecting and submitting appropriate samples from all cases of mortality in animals over 12 months of age.

SECTION III. HERD INVENTORY RECORDS

An initial herd inventory will be performed by the veterinarian in the presence of the owner. Herd inventory records will be maintained to provide accountability for all purchases, sales, commercial slaughter, and mortality from the date of enrollment in this program.

SECTION IV. PROGRAM STATUS

A herd will gain program status based on the herd's enrollment date and the continuous number of years in the program. Once a herd is approved to participate in the program, the herd will be considered an enrolled herd with the date of approval being the enrollment date. The status will be dependent on the herd being in compliance with the program guidelines and being approved annually for advancement in the program. Non-participant refers to any herd, which is not enrolled in the program. Enrolled herds refer to any herd that has been approved to participate in the program.

Program classification will be as follows:

- Status level 0 – herd is enrolled in the program
- Status level 1 – one year of surveillance and successful completion of program requirements
- Status level 2 – two years of surveillance and successful completion of program requirements
- Status level 3, 4, 5, etc. – for each successive year of surveillance.
- Status level Certified – after six consecutive years of successive surveillance

SECTION VI. ACQUISITIONS AND COMMINGLING

- Additions may originate from herds of equal or higher status with no change in the status of the receiving herd.
- Additions may originate from herds of lower status with the receiving herd acquiring the lower status of the herd(s) involved.
- When establishing a new herd entirely from an enrolled herd, the herd of origin's status level will transfer to the new herd if the new herd owner notifies the department and submits an application for participation in the program within 90 days of the animal's arrival on the farm and before any herd additions. Applications received more than 90 days after the arrival will be reviewed by the department. The enrollment date of the new herd will be the date of the approval by the department.
- Enrolled herds may not use germ plasm from any donor found to be CWD positive. Enrolled herds may use semen from lower status or non-participating herds with no effect on program status as long as the semen is not from infected herds or trace herds at the time of collection. Embryo recipient animals must meet the program requirements for animal acquisitions.
- Maintain perimeter fencing adequate to prevent ingress or regress of cervids.

Please forward this information to my veterinarian:

NAME OF VETERINARIAN

ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

EMAIL ADDRESS

I have carefully read the foregoing and hereby agree to comply with all stipulations as set forth.

OWNER NAME

OWNER SIGNATURE

DATE

ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

EMAIL ADDRESS

MDA REPRESENTATIVE SIGNATURE