

# 2024 GENERAL SHEEP MANAGEMENT QUESTIONNAIRE

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United States  
Department of  
Agriculture



Animal and Plant Health  
Inspection Service  
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Veterinary Services  
National Animal Health Monitoring System

Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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Date: \_\_\_\_ \_\_\_\_ \_\_\_\_  
0002 MM DD YY

BEGINNING TIME (MILITARY)

0003

## Instructions

We would like to ask you some questions about your sheep operation. In order to understand important issues in the sheep industry, we need to obtain information about the health status of these sheep and any health problems they may have had, as well as productivity and management information.

You may find it easier to answer some of the questions if you have records available. Response is voluntary and not required by law. However, your report is needed to make regional and national estimates as accurate as possible.

## Section A - Inventory

1. On January 1, 2024, were any sheep or lambs, regardless of ownership, on this operation?  
INCLUDE Barbados and all hair breed sheep.

0564    <sup>1</sup> ☐ Yes                      <sup>3</sup> ☐ No [Go to Section H, Item 5 on page 24]

- a. On January 1, 2023, were any ewes 1 year and older, regardless of ownership, on this operation?  
INCLUDE Barbados and all hair breed sheep.

1564    <sup>1</sup> ☐ Yes                      <sup>3</sup> ☐ No

2. On January 1, 2024, of the total sheep and lambs on this operation, how many were in each of the following categories?

DO NOT INCLUDE sheep or lambs that you own that are custom fed on another operation.

	Head
a. Breeding ewes 1 year old and older.....	0281
b. Breeding rams 1 year old and older.....	0282
c. Replacement lambs for breeding less than 1 year old (including unweaned lambs kept for breeding).....	0285

- d. Market lambs less than 1 year old and:

	Head
i. Under 65 pounds (including unweaned market lambs).....	0836
ii. 65 to 84 pounds.....	0837
iii. 85 to 105 pounds.....	0838
iv. Over 105 pounds.....	0839
e. Market sheep 1 year old and older (not used for breeding).....	0287

3. [Add Items 2a - 2e and verify total]  
Then the total sheep and lambs on hand on January 1, 2024 was?.....

Head
0280

4. On January 1, 2024, of the total sheep and lambs on the operation (Item 3), how many sheep were the following breeds?

INCLUDE all sheep only once.

	Head
a. Black face wool breeds (for example, Hampshire, Suffolk, Shropshire, Romanov, Oxford).....	1001
b. Fine wool white face (for example, Rambouillet, Merino, Targhee).....	1002
c. Medium wool white face (for example, Columbia, Corriedale, Cheviot, Finn, Polypay).....	1003
d. Long wool (for example, Border Leicester, Coopworth, Romney).....	1004
e. Colored wool (for example, Black Welsh, Jacob, Navajo Churro, CVM, Shetland).....	1005
f. Hair sheep (for example, Barbados, Katahdin, Dorper, St. Croix).....	1006
g. Milk sheep (for example, East Friesian, Rideau Arcott).....	1007
h. Mottle-faced, brockle, or speckle-faced crossbred.....	1008
i. Other crossbred (Specify: 0109_____).	1009
j. Other (Specify: 0110_____).	1010
k. Unknown.....	1011
[Total must equal Item 3]	Item 3

5. On January 1, 2024, of the total sheep and lambs on the operation (Item 3), how many sheep had the following primary uses?

For lambs, report the uses for which they are intended. Do not report the same sheep or lambs in multiple categories.

	Head
a. Meat production.....	1012
b. Wool production.....	1013
c. Show, competition, 4-H, or club lambs.....	1014
d. Seedstock/breeding stock.....	1015
e. Milk production (include milk for cheese or other products).....	1016
f. Brush control, fire suppression, or solar grazing.....	1017
g. Other (Specify: 0118_____).	1018
[Total must equal Item 3]	Item 3

## Section B - General Management

Year (yyyy)

1. In what year did the primary operator first begin owning or managing sheep?..... 2001

<div style="text-align: center;"> <div>Year (yyyy)</div> <div> <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> <div style="border-bottom: 1px solid black; width: 20px; display: inline-block;"></div> </div> </div>
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2. Compared to your inventory on January 1, 2024, how many sheep do you expect to have in 5 years?  
[Select one]

2002

- <sup>1</sup> ☐ None
- <sup>2</sup> ☐ Fewer [Go to Item 5 on page 5]
- <sup>3</sup> ☐ About the same [Go to Item 5 on page 5]
- <sup>4</sup> ☐ More [Go to Item 5 on page 5]

3. What is your main reason for expecting to have no sheep in 5 years? [Select one]

2003

- <sup>1</sup> ☐ Retirement, lack of a successor, or another personal or family situation
- <sup>2</sup> ☐ Low price of wool
- <sup>3</sup> ☐ Low price of lambs
- <sup>4</sup> ☐ Market volatility
- <sup>5</sup> ☐ Predator loss
- <sup>6</sup> ☐ Labor shortage
- <sup>7</sup> ☐ Government regulations (Specify:0201\_\_\_\_\_)
- <sup>8</sup> ☐ Sheep disease (Specify:0202\_\_\_\_\_)
- <sup>9</sup> ☐ Other (Specify:0203\_\_\_\_\_)

4. Since you do not expect to have any sheep in the next 5 years, what do you intend to do? [Select one]

2004

- <sup>1</sup> ☐ Intend to sell farm/ranch land
- <sup>2</sup> ☐ Transition into another agricultural commodity (crops, cattle, etc.)
- <sup>3</sup> ☐ Other (Specify:0204\_\_\_\_\_)

5. Does your operation belong to a national sheep association or club?.....	2005	<sup>1</sup> <input type="checkbox"/> Yes	<sup>3</sup> <input type="checkbox"/> No
6. Does your operation belong to a state or local sheep association or club?.....	2006	<sup>1</sup> <input type="checkbox"/> Yes	<sup>3</sup> <input type="checkbox"/> No

7. During 2023, what was your operation's primary system for maintaining sheep production records?  
[Select one]

2007

- <sup>1</sup> ☐ Livestock or sheep management software (Specify:0206\_\_\_\_\_)
- <sup>2</sup> ☐ Other electronic record-keeping (spreadsheets, Word documents, etc.)
- <sup>3</sup> ☐ Handwritten records
- <sup>4</sup> ☐ Any other method (Specify:0207\_\_\_\_\_)
- <sup>5</sup> ☐ Did not maintain sheep and lamb production records [Go to Item 9 on page 6]

8. During 2023, did your operation keep records for the following? [Select all that apply]

a. Individual animal disease events.....	2008	<sup>1</sup> <input type="checkbox"/>
b. Laboratory test results.....	2009	<sup>1</sup> <input type="checkbox"/>
c. Preventive practices (vaccinations, deworming, or similar).....	2010	<sup>1</sup> <input type="checkbox"/>
d. Number of animals culled.....	2011	<sup>1</sup> <input type="checkbox"/>
e. Number of animals that died.....	2012	<sup>1</sup> <input type="checkbox"/>
f. Individual ewe breeding history (pregnancy, diagnosis/ultrasound).....	2013	<sup>1</sup> <input type="checkbox"/>
g. Number of abortions.....	2014	<sup>1</sup> <input type="checkbox"/>
h. Date of lambing.....	2015	<sup>1</sup> <input type="checkbox"/>
i. Individual birth weights.....	2016	<sup>1</sup> <input type="checkbox"/>
j. Number of lambs born.....	2017	<sup>1</sup> <input type="checkbox"/>
k. Number of lambs weaned.....	2018	<sup>1</sup> <input type="checkbox"/>
l. Individual weaning weights.....	2019	<sup>1</sup> <input type="checkbox"/>
m. Hoof health management (lameness, trimming, or similar).....	2020	<sup>1</sup> <input type="checkbox"/>
n. None of the above production records were kept.....	2021	<sup>1</sup> <input type="checkbox"/>

9. During 2023, what types of formal training were provided by outside parties to anyone who had duties related to raising sheep? Outside parties could include extension, veterinarians, presenters, and sheep organizations.

[Select all that apply]

a. Identifying sick or injured animals.....	2022 1 <input type="checkbox"/>
b. Animal handling.....	2023 1 <input type="checkbox"/>
c. Euthanasia.....	2024 1 <input type="checkbox"/>
d. Lamb rearing practices.....	2025 1 <input type="checkbox"/>
e. Husbandry procedures (such as castration, tagging, shearing, milking).....	2026 1 <input type="checkbox"/>
f. Transportation of sheep.....	2027 1 <input type="checkbox"/>
g. Feeding and nutrition.....	2028 1 <input type="checkbox"/>
h. Sheep behavior.....	2029 1 <input type="checkbox"/>
i. Protocols for antibiotic use and withdrawal times.....	2030 1 <input type="checkbox"/>
j. Sheep quality assurance training.....	2031 1 <input type="checkbox"/>
k. Worker safety training.....	2032 1 <input type="checkbox"/>
l. Zoonotic disease prevention.....	2033 1 <input type="checkbox"/>
m. Sustainable parasite control.....	2034 1 <input type="checkbox"/>
n. Other (Specify: 0235 _____).....	2035 1 <input type="checkbox"/>
o. No training was provided.....	2036 1 <input type="checkbox"/>

10. During 2023, did your operation complete any genetic selection, genetic testing, or participate in any genetic improvement programs?

2037

<sup>1</sup> ☐ Yes

<sup>3</sup> ☐ No [Go to Section C on page 8]

11. Did your operation use genetic testing to control for scrapie or select scrapie-resistant sheep?

2038

<sup>1</sup> ☐ Yes

<sup>3</sup> ☐ No [Go to Item 13]

12. Which of the following selection practices did your operation use to control for scrapie or select scrapie resistant sheep?  
[Select all that apply]

- a. Using genetically less susceptible rams (such as RR alleles).....
- b. Selecting genetically less susceptible ewes (such as QR or RR alleles).....
- c. Culling ewes that are genetically more susceptible (such as QQ alleles).....
- d. Other (Specify: 0242 \_\_\_\_\_).....

2039	<sup>1</sup> <input type="checkbox"/>
2040	<sup>1</sup> <input type="checkbox"/>
2041	<sup>1</sup> <input type="checkbox"/>
2042	<sup>1</sup> <input type="checkbox"/>

13. Did your operation use genetic selection or testing for any of the following purposes?  
[Select all that apply]

- a. Improve lamb or meat production.....
- b. Improve wool quality or wool production.....
- c. Improve the resistance of your sheep to internal parasites.....
- d. Other (Specify: 0246 \_\_\_\_\_).....

2043	<sup>1</sup> <input type="checkbox"/>
2044	<sup>1</sup> <input type="checkbox"/>
2045	<sup>1</sup> <input type="checkbox"/>
2046	<sup>1</sup> <input type="checkbox"/>

## Section C - Feed and Housing Management

1. During 2023, for how many months did your operation manage the majority of the sheep and lambs in the following primary locations during daylight hours?

Months

- |  |      |
|--|------|
| a. Open range (unfenced acreage with herder).....  | 3001 |
| b. Fenced range (uncultivated fenced acreage).....                                       | 3002 |
| c. Fenced farm (cultivated pasture or browse).....                                       | 3003 |
| d. Outdoor dry lot (pen with dirt, concrete, or other surface not used for grazing)..... | 3004 |
| e. Indoors (enclosed building).....  | 3005 |

[Total must equal 12 months]

12 months

2. During 2023, were any of this operation's sheep or lambs placed on the following types of land?

[Select all that apply]

- |  |                                 |
|--|---------------------------------|
| a. Public land, including public, industrial, and grazing association (PIGA) land..... | 3006 1 <input type="checkbox"/> |
| b. Grazing association land.....   | 3007 1 <input type="checkbox"/> |
| c. Leased, private land.....   | 3008 1 <input type="checkbox"/> |
| d. Harvested fields for grazing.....   | 3009 1 <input type="checkbox"/> |
| e. Irrigated land.....   | 3010 1 <input type="checkbox"/> |
| f. This operation's sheep are not placed on any of the above types of land.....        | 3011 1 <input type="checkbox"/> |

3. When placed on public land or other land types listed above, were any of this operation's sheep commingled with sheep or goats from other operations?.....

3012 1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
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4. During 2023, were the following feed sources or supplements used for any sheep or lambs on this operation?

[Select all that apply]

- |   |                                 |
|---|---------------------------------|
| a. Cut hay (grass or legume).....   | 3013 1 <input type="checkbox"/> |
| b. Commercial complete feed (for example, "lamb chow").....                           | 3014 1 <input type="checkbox"/> |
| c. Concentrate/grain rations (for example, corn, milo, barley, wheat, oats, rye)..... | 3015 1 <input type="checkbox"/> |
| d. High protein feed (for example, soybean meal, fish meal, or other protein).....    | 3016 1 <input type="checkbox"/> |
| e. Crop residue/by-product feed (for example, fat, soy hulls, wheat middlings).....   | 3017 1 <input type="checkbox"/> |
| f. Salt or mineral blocks or loose salt/mineral.....                                  | 3018 1 <input type="checkbox"/> |
| g. Other (Specify: 0319 _____).....   | 3019 1 <input type="checkbox"/> |
| h. None of the above types of feed sources or supplements were used.....              | 3020 1 <input type="checkbox"/> |

Dollars

5. What was the total cost spent on feed sources or supplements used during 2023?.....

3021



## Section D - Shearing and Wool Marketing

1. During 2023, were any of your operation's lambs or sheep shorn?

4001    1 ☐ Yes    3 ☐ No [Go to Section E on page 11]

Head

4002

2. During 2023, how many lambs and sheep were shorn?.....

3. During 2023, what percentage of the lambs and sheep shorn (Item 2) were sheared by the following individuals?

Percent

4003

a. Employees (including owners).....

4004

b. Hired individual(s), not regularly employed by the operation.....

4005

c. Contracted shearing crew.....

4006

d. Other (Specify: 0406 \_\_\_\_\_) .....

[Total must equal 100 percent]

100 %

4. During 2023, did the person who sheared the majority of your sheep clean and disinfect the handpiece, cutters, or combs between operations?

4007    1 ☐ Yes    2 ☐ Don't know    3 ☐ No    4 ☐ NA - Shearing equipment not used on another operation

4008

5. During 2023, prior to shearing, did you withhold your sheep from feed and water?.....

1 ☐ Yes    3 ☐ No

6. During 2023, were you able to contract a shearer?

4009    1 ☐ Yes    3 ☐ No    4 ☐ NA - Did not try to contract a shearer

4010

7. During 2023, was any of your wool measured by a wool testing lab?.....

1 ☐ Yes    3 ☐ No

8. During 2023, how many pounds of total wool produced were either sold as wool, sold as other products, or not sold?

Pounds

4011

a. Sold as wool.....

4012

b. Sold as other products that used the wool.....

4013

c. Not sold.....

[If Item 8a equals zero (no wool sold as wool), go to Item 10 on page 10]

9. During 2023, was the majority of wool sold (Item 8a) on a clean or greasy basis? [Select one]

4014

1 ☐ Clean basis

2 ☐ Greasy basis

10. What percentage of wool, including wool products that were sold (Items 8a and 8b), were marketed by the following methods?

	Percent
a. Warehouse.....	4015
b. Commercial buyer.....	4016
c. Cooperative pools.....	4017
d. Direct sales to consumers locally (within 400 miles from your farm) .....	4018
e. Direct sales to consumer not considered local.....	4019
f. Direct sales to a small mill.....	4020
g. Other (Specify: 0421 _____) .....	4021
h. Not sold.....	4022
[Total must equal 100 percent]	100%

11. What did your operation do with the majority of its unsold wool? [Select one]

4023

- 1 ☐ Stored in bags or bales on the farm or at a warehouse
- 2 ☐ Given away (included if given to the shearer)
- 3 ☐ Thrown away
- 4 ☐ Used for alternative purposes (such as bedding, mulch, insulation, spinning)
- 5 ☐ Other (Specify: 0423 \_\_\_\_\_)
- 6 ☐ NA - This operation did not have any unsold wool

12. Does your operation have any unsold wool from the following years? [Select all that apply]

a. 2022.....	4024 1 <input type="checkbox"/>
b. 2021.....	4025 1 <input type="checkbox"/>
c. 2020.....	4026 1 <input type="checkbox"/>
d. Prior to 2020.....	4027 1 <input type="checkbox"/>

[If Item 12d is not checked (no unsold wool from prior to 2020), go to Item 13]

Year (yyyy)

i. What is the earliest year for which you have unsold wool?.....

4028	_____
------	-------

13. During 2023, did your operation participate in certification programs specifically for wool?.....

4029	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
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## Section E - Movement and Marketing

1. During 2023, were any sheep or lambs permanently added to this operation from outside sources?

5001 <sup>1</sup> ☐ Yes [Continue to Item 2]

Year (yyyy)

<sup>3</sup> ☐ No - In what year were any sheep or lambs last added to this operation?..... 5002  
[Go to Item 7 on page 13]

<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <span></span> <span></span> <span></span> <span></span> </div>
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2. Did your operation always require the following prior to arrival, or before commingling, for these newly added sheep or lambs before introducing them to the rest of your flock? [Select all that apply in both columns]

	Required prior to arriving on the operation?	Done on your operation before commingling with the rest of the flock?
a. Veterinarian examinations.....	5003 <sup>1</sup> <input type="checkbox"/>	5013 <sup>1</sup> <input type="checkbox"/>
b. Any vaccinations.....	5004 <sup>1</sup> <input type="checkbox"/>	5014 <sup>1</sup> <input type="checkbox"/>
c. Foot trim.....	5005 <sup>1</sup> <input type="checkbox"/>	5015 <sup>1</sup> <input type="checkbox"/>
d. Medicated footbath.....	5006 <sup>1</sup> <input type="checkbox"/>	5016 <sup>1</sup> <input type="checkbox"/>
e. Internal parasite fecal exam.....	5007 <sup>1</sup> <input type="checkbox"/>	5017 <sup>1</sup> <input type="checkbox"/>
f. Internal parasite treatment (deworming).....	5008 <sup>1</sup> <input type="checkbox"/>	5018 <sup>1</sup> <input type="checkbox"/>
g. External parasite treatment.....	5009 <sup>1</sup> <input type="checkbox"/>	5019 <sup>1</sup> <input type="checkbox"/>
h. Inspect sheep for abscesses and/or scars from previous abscesses.....	5010 <sup>1</sup> <input type="checkbox"/>	5020 <sup>1</sup> <input type="checkbox"/>
i. Preventive antibiotic treatment (oral bolus or injectable).....		5021 <sup>1</sup> <input type="checkbox"/>
j. Other inspections or treatments (Specify: 0511.....)	5011 <sup>1</sup> <input type="checkbox"/>	5022 <sup>1</sup> <input type="checkbox"/>
k. No procedures required or completed.....	5012 <sup>1</sup> <input type="checkbox"/>	5023 <sup>1</sup> <input type="checkbox"/>

3. During 2023, were any of the newly added sheep or lambs quarantined (prevent nose-to-nose contact with other sheep from this operation and prevent sharing of feed, drinking water, and equipment) to prevent the spread of disease?

5024 <sup>1</sup> ☐ Yes    <sup>3</sup> ☐ No [Go to Item 4 on page 12]

a. How many of the newly added sheep were quarantined?.....

5025	head
------	------

b. How many days on average were sheep quarantined?.....

5026	days
------	------

4. During 2023, were any of the following types of sheep added to this operation? If Yes, how many were added to the operation?

	Any added to the operation?	If Yes, how many were added?
		Head
a. Lambs (under 1 year old)..... EXCLUDE lambs born on the operation	5027 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	5031
b. Ewes.....	5028 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	5032
c. Rams.....	5029 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	5033
d. Wethers (castrated rams).....	5030 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	5034

5. How many of the following types of sheep that were added to the operation in 2023 (Item 4) came from the following sources? If none of the given type of sheep was permanently added, check the box at the top of the column.

	Number of head		
	Lambs (under 1 year old) EXCLUDE lambs born on the operation	Ewes	Rams
Check none if the sheep type was not permanently added	5035 1 <input type="checkbox"/> None	5041 1 <input type="checkbox"/> None	5047 1 <input type="checkbox"/> None
a. Sheep wholesaler or dealer.....	5036	5042	5048
b. Directly from another premises.....	5037	5043	5049
c. Livestock market or auction.....	5038	5044	5050
d. Fair or show.....	5039	5045	5051
e. Other (Specify: 5038 _____).....	5040	5046	5052
[Total must equal the total for that age class from Item 4]	[Item 4a]	[Item 4b]	[Item 4c]

[If Item 5b = 0 or is missing and Item 5c = 0 or is missing for all three types of sheep (no additions directly from another premises or from a livestock market or auction), go to Item 7 on page 13]

6. For the sheep added to the operation directly from another premises (Item 5b) or through a livestock market or auction (Item 5c), what percentage of those additions were made through online contacts or purchases?.....

Percent

5053

7. During 2023, did any sheep or lambs leave this operation, attend an event (for example, fair, show, sale, rodeo, or visit to another operation for breeding), and then return to this operation?

5054    <sup>1</sup> ☐ Yes                      <sup>3</sup> ☐ No [Go to Item 9]

8. During 2023, when sheep or lambs temporarily left and returned, did you quarantine them (prevent nose-to-nose contact with other sheep from this operation and prevent sharing of feed, drinking water, and equipment) for any period prior to reintroduction to the flock?

[Select one]

5055

- <sup>1</sup> ☐ Never quarantine - [Go to Item 9]  
<sup>2</sup> ☐ Only quarantine for a specific reason such as exposure to disease - [Go to Item 9]  
<sup>3</sup> ☐ Routinely quarantine after returning to operation

- a. If sheep or lambs were routinely quarantined after returning to the operation, what was the minimum number of days these returning sheep or lambs were quarantined?.....

5056

days

9. During 2023, were any live sheep or lambs permanently removed from this operation?

EXCLUDE sheep or lambs that died.

5057    <sup>1</sup> ☐ Yes                      <sup>3</sup> ☐ No [Go to Section F on page 15]

10. During 2023, how many live sheep or lambs from the following classes were permanently removed from this operation?

- a. Lambs (under 1 year old).....  
b. Cull sheep.....  
c. Breeding or other sheep.....  
d. Total [add Items 10a - 10c].....

5058
5059
5060
5061

11. Of the live sheep and lambs that were permanently removed (Item 10), how many were permanently removed through the following channels? If none of the given type of sheep was permanently removed, check the box at the top of the column.

	Number of head		
	Lambs (under 1 year old)	Cull sheep	Breeding or other sheep
Check none if the sheep type was not permanently removed.....	5062    1 <input type="checkbox"/> None	5072    1 <input type="checkbox"/> None	5082    1 <input type="checkbox"/> None
a. Direct sales to consumer or ethnic market.....	5063	5073	5083
i. Of these direct sales, how many were slaughtered on the operation?.....	5064	5074	5084
b. Direct sales to slaughter plant/packer.....	5065	5075	5085
c. Moved to a feedlot separate from this operation.....	5066	5076	5086
d. Direct sale to a backgrounder (non feedlot feeders).....	5067	5077	5087
e. Direct sales to another sheep producer..... INCLUDE 4-H/show sales	5068	5078	5088
f. Auction/sale barn.....	5069	5079	5089
g. Buyer/dealer for resale.....	5070	5080	5090
h. Slaughtered for personal use .....	5071	5081	5091
[Total must equal the total for that age class from Item 10]	[Item 10a]	[Item 10b]	[Item 10c]

12. Of the live sheep and lambs permanently removed (Item 10d), what percentage were moved to the following final destinations?

	Percent
a. In-state.....	5092
b. Out-of-state.....	5093
c. Do not know.....	5094
[Total must equal 100 percent]	100%

## Section F - Identification

1. Has this operation been assigned a unique flock identification (ID) as a part of the National Scrapie Eradication Program, such as a Flock Identification Number/Scrapie Premises Identification Number (PIN)?

6001   1 ☐ Yes   2 ☐ Don't know   3 ☐ No

2. Do any of the sheep currently on this operation have an ear tag, tattoo, collar, ear notch, leg band, brand, microchip, or other device that identifies them?

6002   1 ☐ Yes   3 ☐ No [Go to Item 6 on page 16]

3. Were each of the following types of ID used for the sheep and lambs on your operation? If yes, how many head had this type of ID, and what information was on the ID?

[Flock identification uses a tag, brand, or other marker that indicates a sheep is a member of your operation's flock.

Individual identification is unique and applied to each animal so it can be distinguished from all other sheep in the flock.]

[An official APHIS ear tag has the U.S. shield logo, State code, and a unique flock identification number.]

ID type	Did your operation use this type of ID for sheep and lambs?	If Yes, how many head of sheep and lambs had this type of ID?  Head	If Yes, what information was included on the ID?		
			Individual animal only	Flock only	Both
a. Tattoo.....	6003   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6012	6021   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Collar or leg band.....	6004   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6013	6022   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Ear notch.....	6005   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6014	6023   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Hot iron or freeze brand.....	6006   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6015	6024   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Paint brand.....	6007   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6016	6025   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Electronic ID or microchip.....	6008   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6017	6026   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Unofficial plastic ear tag.....	6009   1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6018	6027   1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Official APHIS ear tag with U.S. Shield logo (including metal scrapie ear tags, plastic scrapie ear tags, and other official ear tags) .....	6010  1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6019	6028  1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Other (Specify:0620____ _____ _____	6011  1 <input type="checkbox"/> Yes   3 <input type="checkbox"/> No	6020	6029  1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

[If Item 3h equals No (no official APHIS ear tags), go to Item 6 on page 16]

4. During 2023, how many of the (Item 3h, column 2) sheep that had an official APHIS ear tag had that tag fall out or was otherwise lost?.....

6030

5. Who applies the majority of your operation's official APHIS tags? [Select one]

6031

- 1 ☐ You or another farm worker
- 2 ☐ Veterinarian
- 3 ☐ Market
- 4 ☐ Other (specify:0631\_\_\_\_\_)

6. During 2023, of the sheep that were permanently removed through a concentration point (slaughter, auction markets, fairs) approximately what percent had an official flock identification (ear tags, tattoos, or other official identification) when they left this operation or when they arrived at the concentration point?.....

NA - no sheep removed through concentration point	Percent
0632 1 <input type="checkbox"/>	6032

[If Item 3h, column 1, equals Yes (used any official APHIS ear tags), go to Section G on page 17]

7. Which of the following describes why your operation does not use official APHIS ear tags in your flock? [Select all that apply]

- a. I only sell slaughter lambs, so am not required to apply official APHIS ear tags.....
- b. I do not move sheep off my farm, so I am not required to apply official APHIS ear tags.....
- c. I did not know I was required to officially identify my sheep before they leave the farm.....
- d. I use official flock ID tattoos instead of official APHIS ear tags.....
- e. I use registry tattoos instead of official APHIS ear tags.....
- f. I use registry recorded electronic identification implants instead of official APHIS ear tags..
- g. I use another type of official identification instead of official APHIS ear tags (Specify:0639\_\_\_\_\_)
- h. Official APHIS ear tags are no longer free so I stopped using them .....
- i. I do not use official APHIS ear tags for another reason (Specify:0641\_\_\_\_\_)

6033	1 <input type="checkbox"/>
6034	1 <input type="checkbox"/>
6035	1 <input type="checkbox"/>
6036	1 <input type="checkbox"/>
6037	1 <input type="checkbox"/>
6038	1 <input type="checkbox"/>
6039	1 <input type="checkbox"/>
6040	1 <input type="checkbox"/>
6041	1 <input type="checkbox"/>



## Section G - Biosecurity and Health Management

1. Does your operation have a written flock health management plan?

7001    1 ☐ Yes    3 ☐ No [Go to Item 4]

2. Were any of the following resources used in the development of the flock health management plan?  
[Select all that apply]

a. Veterinarian.....	7002 1 <input type="checkbox"/>
b. Extension (university).....	7003 1 <input type="checkbox"/>
c. Other producers.....	7004 1 <input type="checkbox"/>
d. Reference materials (online or book).....	7005 1 <input type="checkbox"/>
e. Other types (Specify: 0706 _____) .....	7006 1 <input type="checkbox"/>
f. No resources used.....	7007 1 <input type="checkbox"/>

3. How frequently is the flock health management plan reviewed and updated if needed? [Select one]

7008    1 ☐ More frequently than yearly  
           2 ☐ Yearly  
           3 ☐ Less frequently than yearly  
           4 ☐ Not reviewed and updated

4. During 2023, did members of the general public come on to your operation, other than the home?

7009    1 ☐ Yes    3 ☐ No [Go to Item 6, on page 18]

5. During 2023, did those members of the general public that visited your operation, other than the home, have access to areas or facilities on your operation that house or contain animals, feed, manure, or farm equipment?

7010    1 ☐ Yes    3 ☐ No

6. During 2023, what level of interaction did each type of visitor have with the sheep on your operation?

Select one in each row		Did not come onto the operation	Came onto the operation but <b>did not</b> touch sheep or walk through areas sheep are kept on the operation	Came onto the operation and touched sheep or walked through areas sheep are kept on the operation
a. Private or company veterinarian.....	7011	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Federal/State veterinarian or animal health worker.....	7012	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Extension agent or university veterinarian.....	7013	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Nutritionist or feed company consultant.....	7014	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Agricultural tour visitors (school groups, university students, 4-H groups, agritourism, or similar).....	7015	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Customer (private individual) purchasing sheep, milk, fiber, meat, cheese, or other products.....	7016	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Sheep or wool wholesaler, buyer, or dealer.....	7017	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Renderer.....	7018	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Milk truck driver.....	7019	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Mobile slaughter team members.....	7020	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. Shearers.....	7021	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
l. Other agriculture-related visitors (volunteers, feed delivery and service personnel).....	7022	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
m. Family, friends and/or neighbors.....	7023	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
n. Other visitors (Specify: 0724 _____) .....	7024	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
o. Please check if there were no visitors on this operation	0725	1 <input type="checkbox"/>		

7. During 2023, how often were any visitors that had contact with sheep required to take the following measures?

Select one in each row		Always	Sometimes	Never
a. Change into clean clothes or overalls.....	7025	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Use a footbath before entry.....	7026	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Change into clean boots or use shoe covers.....	7027	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Scrub shoes before or immediately after entry into sheep production area.....	7028	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Wash hands before handling sheep.....	7029	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. No contact with other livestock for at least 24 hours before visiting.....	7030	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Park away from sheep area.....	7031	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Please check here if there were no visitors or no visitors had contact with sheep.....	7032	1 <input type="checkbox"/>		

8. During 2023, did this operation normally require or perform individual animal testing for any of the following diseases?  
[Select one in each row]

		Testing performed in			
		Resident sheep in flock only	New flock additions only	Both resident sheep and new additions	No testing performed
a. OPP (ovine progressive pneumonia).....	7033	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Johne's disease (paratuberculosis).....	7034	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Brucellosis ( <i>B. ovis</i> , Epididymitis).....	7035	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Q fever (coxiellosis).....	7036	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Caseous lymphadenitis (boils, CL, abscesses).....	7037	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Scrapie genotype (DNA).....	7038	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Tuberculosis.....	7039	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Other (Specify: 7040 _____).....	7040	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

[If Items 8c equals No testing performed (no testing for brucellosis), go to Item 12, on page 20]

9. During 2023, for which of the following reasons were the sheep tested for brucellosis (*B. ovis*, epididymitis)?  
[Select all that apply]

a. Movement requirement.....	7041	1 <input type="checkbox"/>
b. Show or exhibition requirement.....	7042	1 <input type="checkbox"/>
c. Veterinarian (nonregulatory, private practitioner) recommendation.....	7043	1 <input type="checkbox"/>
d. State requirement.....	7044	1 <input type="checkbox"/>
e. Concern for milk safety.....	7045	1 <input type="checkbox"/>
f. Other (Specify: 7046 _____).....	7046	1 <input type="checkbox"/>

10. During 2023, when sheep were tested for brucellosis, which of the following types of tests were used?

a. Blood test.....	7047	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No	2 <input type="checkbox"/> Don't know
b. Other (Specify: 7048 _____).....	7048	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No	2 <input type="checkbox"/> Don't know

11. Is your flock currently certified brucellosis-free?.....

7049	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
------	--------------------------------	-------------------------------

12. At any time during the previous 3 years, have any of the following been suspected or confirmed in your flock by a veterinarian or laboratory? [Select one in each row]

		Not suspected	Suspected, but not confirmed	Confirmed by a veterinarian or laboratory
a. Johne's disease (paratuberculosis).....	7050	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Scrapie.....	7051	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Ovine progressive pneumonia (OPP).....	7052	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Foot rot.....	7053	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Caseous lymphadenitis (lumpy jaw, abscesses, CL).....	7054	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Enterotoxemia/overeating disease (clostridium C&D, not grain overload, pulpy kidney disease).....	7055	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Other clostridial diseases (for example, blackleg, malignant edema, braxy, tetanus, botulism, big head).....	7056	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Coccidiosis.....	7057	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Sore mouth (contagious ecthyma,orf).....	7058	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Ring worm or club lamb fungus.....	7059	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. Blue tongue.....	7060	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
l. Toxoplasmosis.....	7061	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
m. Q fever (coxiellosis).....	7062	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
n. Chlamydiosis (enzootic abortion).....	7063	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
o. Campylobacteriosis (vibrio abortion).....	7064	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
p. Lamb pneumonia ( <i>Mycoplasma</i> ).....	7065	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
q. Cysticercosis.....	7066	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

13. Have you or any of your family members or employees ever suspected or been confirmed with the following diseases? [Select one in each row]

		Not suspected	Suspected, but not confirmed	Confirmed by a doctor or laboratory
a. Q fever.....	7067	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Sore mouth (orf).....	7068	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

14. How familiar are you with scrapie? [Select one]

7069

- 1 ☐ Very familiar                      3 ☐ Heard of name only  
 2 ☐ Somewhat familiar                      4 ☐ Never heard of

15. Who would your operation contact if a sheep showed signs of neurologic problems, such as circling, tremors, lip smacking, loss of coordination, rubbing against fences? [Select all that apply]

a. Private or university veterinarian.....	7070	1	<input type="checkbox"/>
b. State veterinary office.....	7071	1	<input type="checkbox"/>
c. USDA veterinary office.....	7072	1	<input type="checkbox"/>
d. Other sheep producers.....	7073	1	<input type="checkbox"/>
e. Other (Specify:0774 _____) .....	7074	1	<input type="checkbox"/>
f. I would not contact anyone.....	7075	1	<input type="checkbox"/>

16. Are you a veterinarian?

7076 1 ☐ Yes 3 ☐ No

17. During 2023, did this operation consult a veterinarian for any reason related to sheep health, productivity, or management?

7077 1 ☐ Yes 3 ☐ No [Go to Item 20]

18. During 2023, for which of the following reasons was a veterinarian consulted? [Select all that apply]

a. Regular or routine visits (for example, pregnancy checks, flock health visits, breeding soundness, exams, health certificate)	7078	1	<input type="checkbox"/>
b. Emergency visits (for example, birthing difficulty, sick sheep, lameness).....	7079	1	<input type="checkbox"/>
c. Veterinary Feed Directives or antibiotic prescriptions.....	7080	1	<input type="checkbox"/>
d. Diagnose parasite infections.....	7081	1	<input type="checkbox"/>
e. Make decisions about dewormer treatment.....	7082	1	<input type="checkbox"/>
f. Other (Specify:0783 _____).....	7083	1	<input type="checkbox"/>

19. During 2023, how did you consult your veterinarian? [Select all that apply]

a. In person or on-farm visit.....	7084	1	<input type="checkbox"/>
b. By phone, text, or email.....	7085	1	<input type="checkbox"/>
c. Other (Specify:0786 _____).....	7086	1	<input type="checkbox"/>

20. How would you describe your operation's Veterinarian-Client-Patient Relationship (VCPR) for your sheep? [Select one]

7087

- 1 ☐ A written agreement between my veterinarian and me
- 2 ☐ A verbal agreement between my veterinarian and me
- 3 ☐ My veterinarian has not formally mentioned a VCPR for my sheep but I consider that I have one based on his/her relationship with my operation
- 4 ☐ No VCPR

[If Item 17 equals Yes (consulted a veterinarian for sheep in 2023), go to Item 22]

21. During 2023, if no veterinarian was used, which of the following best describes why not? [Select one]

7088

- 1 ☐ Veterinarian available in the local area but not knowledgeable about sheep
- 2 ☐ No veterinarian available in the local area
- 3 ☐ Too expensive
- 4 ☐ No veterinarian needed on this operation - no health-related problems
- 5 ☐ No veterinarian needed on this operation - animals treated by farm personnel
- 6 ☐ No veterinarian needed on this operation - other reason (Specify: 0788 \_\_\_\_\_)
- 7 ☐ Other (Specify: 0789 \_\_\_\_\_)

22. One goal of these studies is to understand availability and barriers to accessing animal health products, including antibiotics. Were you aware that on June 11, 2023, a new FDA regulation was put in place prohibiting the sale of medically important antibiotics (antibiotics important for human use) over-the-counter?

7090 1 ☐ Yes 3 ☐ No [Go to Item 24]

23. How were you made aware of the new FDA regulation? [Select all that apply]

- |   |                                 |
|---|---------------------------------|
| a. Through an industry organization (such as ASI, breed association, etc.)..... | 7091 1 <input type="checkbox"/> |
| b. Through a state or federal veterinarian.....                                 | 7092 1 <input type="checkbox"/> |
| c. Through my personal veterinarian.....  | 7093 1 <input type="checkbox"/> |
| d. Through another producer.....  | 7094 1 <input type="checkbox"/> |
| e. Other (Specify: 0795 _____) .....  | 7095 1 <input type="checkbox"/> |

24. Have you purchased or acquired antibiotics from each of the sources below more frequently, about the same, or less frequently compared to the period prior to June 11, 2023, when the new FDA rules went into effect prohibiting the sale of medically important antibiotics important for human use (over-the-counter)?  
[Select one in each row]

Source		Compared to before the new FDA regulation, I have purchased or acquired antibiotics from the following sources			
		More	About the same	Less	Didn't use this source
a. Brick and mortar store with veterinary prescription.....	7096	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Direct from veterinarian.....	7097	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Online with veterinary prescription.....	7098	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Direct from distributor.....	7099	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Other (Specify: 1701 _____) ..	7101	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

25. During 2023, did you use any oral (e.g., in feed, water, or tablet), injectable, or topical antibiotics on any sheep on your operation?

7102

1 ☐ Yes      3 ☐ No [Go to Section H]

26. During 2023, how did you usually determine the withdrawal period for a given antibiotic? (The withdrawal period specifies the number of days that must pass after the last antibiotic treatment was given before any meat or milk can enter the food supply). [Select one]

7103

- 1 ☐ No withdrawal period considered  
 2 ☐ Determined by a veterinarian  
 3 ☐ Based on the antibiotic label directions  
 4 ☐ Consulted with other producers  
 5 ☐ Searched the internet  
 6 ☐ Other (Specify: 1703 \_\_\_\_\_)

27. During 2023, how often were the following recorded? [Select one in each row]

		Always	Sometimes	Never
a. Names of antibiotics used.....	7104	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Dates of antibiotic treatments.....	7105	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Antibiotic withdrawal time.....	7106	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Amount used.....	7107	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Identification of animal treated.....	7108	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Reason for treatment.....	7109	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section H - Conclusion

Thank you for completing the first phase of this study. Phase II of this study includes a follow-up questionnaire and the chance to test your sheep for gastrointestinal parasites, pathogens that could cause foot rot or digital dermatitis, and enteric microbes (*E. coli*, *Salmonella*, and *Campylobacter*).

See the Informed Consent Form included in this mailing or at [https://www.aphis.usda.gov/animal\\_health/nahms/sheep2024-nassconsent.pdf](https://www.aphis.usda.gov/animal_health/nahms/sheep2024-nassconsent.pdf) for more information about Phase II of this study.

1. If you have 20 or more ewes, would you like the opportunity to participate in Phase II of this study?

8001

1 ☐ Yes [Continue]      3 ☐ No [Go to Item 4 on page 24]      4 ☐ Fewer than 20 ewes [Go to Item 4 on page 24]

2. Please record the name, phone number, address, and email address for the best person to contact for Phase II of the study.

Name 8002	Phone Number 8003
Address 8004	
Email Address 8005	

## 3. Respondent location (specific directions) and other comments:

8006

## 4. Did you use computerized or written records to assist in answering this survey?

8007    1 ☐ Yes    3 ☐ No

## 5. Enter interview response code. [Select one]

8008

- |   |  |
|---|--|
| 1 <input type="checkbox"/> Zero sheep on January 1, 2024                                  | 6 <input type="checkbox"/> Complete, Phase II consent refused                      |
| 2 <input type="checkbox"/> Out of business  | 7 <input type="checkbox"/> Out of scope for General Sheep Management Questionnaire |
| 3 <input type="checkbox"/> Refusal of General Sheep Management Questionnaire              | 8 <input type="checkbox"/> Office hold   |
| 4 <input type="checkbox"/> Complete, fewer than 20 ewes, no Phase II consent form offered | 9 <input type="checkbox"/> Inaccessible  |
| 5 <input type="checkbox"/> Complete, Phase II consent given                               |  |

## 6. [If Item 5 is a Refusal (3), SELECT the code that best fits the reason]: [Select one]

8009

- |   |  |
|---|--|
| 1 <input type="checkbox"/> Does not want to commit time to the project            | 6 <input type="checkbox"/> Bad time of year (planting, harvesting, second job, or similar) |
| 2 <input type="checkbox"/> Does not want involvement with government veterinarian | 7 <input type="checkbox"/> Currently has or recently has had disease problem with flock    |
| 3 <input type="checkbox"/> Does not have necessary records available              | 8 <input type="checkbox"/> Believes surveys and reports hurt the farmer more than help     |
| 4 <input type="checkbox"/> Has participated in too many surveys                   | 9 <input type="checkbox"/> Could not get owner's permission                                |
| 5 <input type="checkbox"/> Does not want outside people on sheep operation        | 10 <input type="checkbox"/> No reason given, or other miscellaneous reasons                |

ENDING TIME (MILITARY)

0004

This completes the survey. Thank you for your help.

OFFICE USE ONLY											
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID		
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989		
							R. Unit				
							9921				
								Optional Use			
								9907	9908	9906	9916
S/E Name											