

Animal Health and Welfare Pathway Worming Treatment Check:



Pre-treatment sample submission form

Testing should be undertaken in lambs with a worm burden (FEC > 200epg). Samples **must not** be pooled prior to submission. Treatment with anthelmintic **must** be on the day of sample collection.

Submissions that do not meet these criteria may not be tested.

Part 1 – Essential farm information

Farmer name / farm address / email					Date of sample collection (15 samples required)
Age of sheep sampled	1-3 months <input type="checkbox"/>	4-6 months <input type="checkbox"/>	7-12 months <input type="checkbox"/>	Yearling <input type="checkbox"/>	2+ years <input type="checkbox"/>
Treatment product used					
Date of treatment (day 0)	Today <input type="checkbox"/> Other:		Tip: record the date for post-treatment collection 7 days for Yellow (2-LV), 14 days for all others)		
Vet / advisor address and post code					

Part 2 – Sheep information

Breed of sheep sampled					
Grazing group name / ID				Number in grazing group:	
Health status note (e.g. diarrhoea / poor condition)					
Time of last treatment	Less than 3 weeks ago <input type="checkbox"/>	3-6 weeks ago <input type="checkbox"/>	>6 weeks ago <input type="checkbox"/>	Never <input type="checkbox"/>	Other:
Product used for last treatment:					

Part 3 – Survey

Have you heard of or use SCOPS?	Yes – use <input type="checkbox"/>	No – don't use <input type="checkbox"/>	No – don't know <input type="checkbox"/>	
Do you think all wormers are working well in your sheep?	Yes – working <input type="checkbox"/>	No – some failing <input type="checkbox"/>	No – all failing <input type="checkbox"/>	Don't know / Not tested <input type="checkbox"/>
If no, which are failing?				
Have you previously evaluated whether worm treatments are working in your sheep?	Yes – worked well <input type="checkbox"/>	Yes – not as well as expected <input type="checkbox"/>	No – not tested <input type="checkbox"/>	
If yes, how did you assess the effect of worm treatment? FEC = Faecal Egg Count	FEC before and after treatment using pooled group samples <input type="checkbox"/>	FEC before and after treatment using individual samples <input type="checkbox"/>	FEC after treatment only, pooled or with individuals <input type="checkbox"/>	No FEC, Improvement in condition after treatment <input type="checkbox"/>
FOR BIOBEST USE ONLY	Date of receipt:		No. of samples:	
Booked in/databased by:	Request form no.:		LIMS test code:	