

TSE CLINICAL HISTORY AND POST-MORTEM REPORT

This report template should be used by registered veterinarians in accordance with NSW Department of Industry Biosecurity – Transmissible spongiform encephalopathy freedom assurance procedure, available at www.dpi.nsw.gov.au/about-us/policies-procedures.

Date examined _____ Owner/manager _____

PIC _____ Property Address _____

NLIS/RFID Number _____

Animal type: (please circle) **BOVINE** or **OVINE** Age estimate in months or years _____

Enterprise Type: (please circle) **Meat** or **Milk** or **Fibre** or **Feedlot**

Imported Animal? (please circle) **YES** or **NO** Home bred? (please circle) **YES** or **NO**

Clinical history including treatment (if administered) and post mortem findings

Provisional diagnosis

What samples have been submitted? (please tick one or more options)

- Unfixed, frozen cervical spinal cord (2 – 3 cm)
- Fresh dorsal third of cerebellum (sheep)
- Whole, undistorted brain (preferably fixed)
- Other tissue specimens (optional) — recommended to support alternate diagnosis

Tick minimum of two (2) neurological and behavioural changes consistent with BSE or scrapie shown by this case

Mental Status

- Altered consciousness
- Apprehension
- Behaviour change
- Excitability
- Frenzy
- Hesitation at doors, gates, barriers
- Herd hierarchy change
- Moribund (without infection/trauma)
- Teeth grinding
- Temperament change

Sensation

- Blindness
- Excessive licking of nose or flank
- Head rubbing or pressing
- Head shyness
- Hyperaesthesia (sound, touch)
- Hypoaesthesia (sound, touch)
- Rubbing/Itching
- Kicking persistently when milked
- Wool loss (flank & hind quarter)

Posture/Movement

- Abnormal ear position
- Abnormal head carriage
- Ataxia
- Circling
- Falling
- Fetlock knocking
- Paralysis/paresis
- Recumbency
- Tremor

Name of submitter (Veterinarian) (print) _____

Business name and address (print) _____

Incentives are not paid where:

- inadequate reports or specimens are submitted
- the animal does not meet eligibility criteria*

Maximum payment = 2 animals per disease outbreak

SUBMITTER SIGNATURE _____ DATE _____

office Use Only

Recommendation

- Clinically consistent animal (eligible for subsidy)
- Fallen (Dead) animal (NOT eligible for subsidy)
- Casualty (Down) slaughter animal (NOT eligible)

DATE FORM RECEIVED _____

NTSESP SIGNATURE _____

***Eligible cattle** are older than 30 months of age and **less than 9** years that display at least two (2) behavioural changes or neurological signs without evidence of infectious disease

***Eligible sheep** are 18 months of age or more (but preferably not more than five years old), that display at least two (2) clinical signs compatible

PRIVACY INFORMATION - This information is collected by the collecting agency identified in this form in relation to its functions under the Biosecurity Act 2015. This agency/s and the NSW Department of Industry may use and disclose this information as reasonably necessary for the purpose of performing biosecurity risk functions under, or reasonably contemplated by, the Biosecurity Act 2015.