

Epidemiological Enquiry Form

1. Name and address of the farmer / farm: _____

2. Species from which the samples collected: _____

3. Species of birds and livestock in the farm (Please write the number of animals)

Chicken	Duck	Turkey	Goose	Guinea fowl	Quail	Pig	Others (Pl Specify)

4. Type of birds (Please tick):

Layer

Broiler

5. System of rearing:

Backyard:

Commercial

6. If Commercial:

a. Method of rearing (tick the box)

Caged

Deep litter

All in all out system

Birds of various ages kept together

7. Breed / Line _____

8. Age of the birds: _____ weeks

9. Total no. of birds in the farm: _____

10. Clinical signs if any: _____

11. Date of collection of samples _____

12. Date of start of the outbreak : _____

13. Mortality pattern, if available :

No. of birds died on Day 1 Day 2 Day 3 Day 4

14. Morbidity (birds showing clinical signs / total no. of birds): _____

15. Vaccination history:

Disease	NDVF	NDVK	NDV-Lasota	IBD	IB	FPV	Marek's disease	Any other (PI specify)
Age in weeks								

16. Post mortem findings if any. : _____

17. Type and number of samples sent:

a. Tissue (Please specify):

Name of the tissue: _____ No.: _____

b. Swab (Please strike out which is not applicable):

Tracheal / Cloacal / Oropharyngeal / Nasal No.: _____

c. Serum: No.: _____

d. Dead birds No.: _____

e. Feces No.: _____

f. Eggs No.: _____

18. Name of the preservative used, if applicable _____

19. Tentative diagnosis _____