

National TSE Surveillance Program (NTSESP) laboratory submission form - sheep

Do you suspect an exotic or zoonotic disease

☐ No ☐ Yes

Disease suspected

Submission details

Your reference

Date sent

Submitted by

Code

Name

Practice name/district office

Postal address

Shire/town/suburb

State

Postcode

Landline

Mobile

Additional contact number

Email

Owner details

Owner

PIC

Trading name

Property name

Property address

Shire/town/suburb

State

Postcode

Physical address of investigation
(if different to above)

Landline

Mobile

Email

Reason for submission: NTSESP - sheep

By submitting this form, I have read and agree to the DPIRD Diagnostic Laboratory Services (DDL) terms and conditions, available at: agric.wa.gov.au/livestock-biosecurity/ddls-animal-pathology-services

Case number of any previous related investigation

Epidemiology

Species

Age (units)

Age (qualifier)

No. of animals in affected group

Breed

Sex

No. of animals dead

Property type

No. of animals alive and affected

Enterprise

Total no. of at risk animals on the property

Other species of livestock on property

Clinical syndrome

1°

2°

History

Clinical signs (specific TSE signs should be provided on page 3)

Post-mortem findings

Provisional/differential diagnosis

Date collected

Number of containers

Sample types	List animal IDs	Test(s) requested
<input type="checkbox"/> fixed tissues		
<input type="checkbox"/> fresh tissues		
<input type="checkbox"/> swabs		
<input type="checkbox"/> blood tubes		
<input type="checkbox"/> blood films/smears		
<input type="checkbox"/> ocular fluid		
<input type="checkbox"/> faeces		
<input type="checkbox"/> content/fluids		
<input type="checkbox"/> other		

Please confirm you are submitting the required TSE exclusion samples for sheep:

- ☐ Fresh dorsal cerebellum
- ☐ Fresh spinal cord, 2-3cm in length
- ☐ Fixed rest of brain whole and undistorted
- ☐ Other samples to support diagnosis (required if collecting extra significant disease investigation \$100 Department of Primary Industries and Regional Development rebate).

For details on the required brain samples, see DPIRD's [Brain removal and TSE sampling guide](#).

Note: Please ensure your submission does not contain sharps, including needles and scalpel blades.

Additional information required for TSE program submission

Sheep 1 details

Animal 1 age (estimate in years)

Is animal 1 homebred?

☐ Yes

☐ No

Sheep 2 details (if relevant)

Animal 2 age (estimate in years)

Is animal 2 homebred?

☐ Yes

☐ No

Select a minimum of two clinical signs consistent with scrapie shown by each sheep

Mental status

- ☐ Altered consciousness
- ☐ Apprehension
- ☐ Behaviour change
- ☐ Frenzy
- ☐ Moribund without infection/trauma
- ☐ Temperament change

Sensation

- ☐ Blindness
- ☐ Hyperaesthesia (sound, touch)
- ☐ Hypoaesthesia (sound, touch)
- ☐ Rubbing/itching
- ☐ Wool loss (flank & hind quarters)

Posture and movement

- ☐ Abnormal head carriage
- ☐ Ataxia
- ☐ Circling
- ☐ Falling
- ☐ Recumbency
- ☐ Tremor
- ☐ Fetlock knuckling
- ☐ Paralysis/paresis

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Sheep TSE eligibility criteria

1. Aged 18 months or more.
2. Observed alive by submitter.
3. Each sheep displayed at least two signs consistent with scrapie - see list above.
4. No more than two sheep can be submitted to NTSESP from this property, for this disease incident.

Confirmation of eligibility*

- ☐ I confirm that the animal(s) meet **all** of these TSE eligibility criteria and **all** of the required samples are being submitted.

National Transmissible Spongiform Encephalopathies Surveillance Program (NTSESP) veterinarian claim form - sheep

Tax invoice

Creditor's name

Address

Australian Business Number (ABN) 49% of rebate withheld unless ABN provided

Rebate

☐ **A** National TSE rebate: _____ animals at \$220 per animal = \$ _____ (GST inclusive)

Available for a maximum of two animals per property per disease outbreak.

☐ **B** Additional DPIRD subsidy: \$110 (GST inclusive)

Available for one sheep per property per outbreak where a full post-mortem has been conducted and a range of specimens are submitted to support a likely differential diagnosis.

☐ **C** Travel rebate: _____ kilometres (km) at **66 cents per km** = \$ _____ x 1.1 = \$ _____ (GST inclusive)

200km is the maximum total travel distance that can be claimed.

Total amount claimed (A+B+C): \$ _____ (GST inclusive)

Payment method

☐ Credit card transfer

☐ Electronic Funds Transfer (EFT)

Note: The first time a vet clinic is paid by EFT, the clinic must fill out the 'Department of Primary Industries and Regional Development Supplier creation and maintenance form' to provide bank details. Please contact your local DPIRD vet for a copy.

NTSESP veterinarian payment conditions

The submitting veterinary surgeon must be registered in the state of Western Australia and must have conducted a necropsy examination on the animal(s) indicated in this form. The claim will not be accepted where the animal does not meet the eligibility criteria or if the appropriate samples or case information have not been submitted.

☐ I agree to the NTSESP veterinarian payment conditions.

Name of submitting veterinarian: _____

Signature

Print and sign

Date _____

Reminder: Please provide your producer client with the NTSESP Producer Claim form for sheep.

Livestock producers can claim a NTSESP incentive payment for up to two animals per incident per property, provided the producer has a Property Identification Code.