Individual Ranch Herd Brucellosis Risk Assessment

If you have cattle in an area where there is wild bison, please call the WLSB Field Office at 307-857-4140 for a different risk assessment form. This assessment is for elk risk only.

Please return all pages of completed questionnaire to:
WLSB Field Office, 610 Fairground Road, Riverton, WY 82501

By having a valid Individual Brucellosis Herd Plan you may qualify for funding assistance from the state (Wyoming Livestock Board) for Yearling Heifer Booster Vaccination & Adult Vaccination.

Information obtained through this questionnaire shall be kept confidential within the Wyoming Livestock Board and will not be shared except on a need to know basis in the case of disease outbreak. Aggregate data may be used for statistical purposes after personal or identifying information is removed unless indicated otherwise at the end of this questionnaire.**
**Contact and Basic Information:**

Name of Ranch: ____________________________________________

Owner (Required): ____________________________________________

Mailing Address (Required): ____________________________________________

City, State, Zip (Required): ____________________________________________

E-mail Address: ____________________________________________

Physical Address of Ranch (Required if different from mailing): ____________________________________________

City, State, Zip: ____________________________________________

Owner Phone Numbers (At least 1 required): Home ____________________ Cell ____________________

Contact Person or Manager (if not owner): ____________________________________________

Phone Numbers: Home ____________________ Cell ____________________

Date operation started: ____________________________________________

Routine attending veterinarian: ____________________________________________

Routine brand inspector used: ____________________________________________

Do you have an Interstate Livestock Animal Health Movement Permit (commuter permit) between Wyoming and an adjacent state?  
Yes  /  No

Permit # ____________________ State ____________________

Do you have an Adjacent State Border Property Movement Permit between Wyoming and an adjacent state?  
Yes  /  No

Permit # ____________________ State ____________________

Do you have a Wyoming In-State or Out-of-State Range Movement Permit (Accustomed Range Permit or Trail Permit)?  
Yes  /  No

Permit # ____________________ Counties: ____________________

**Herd Information:**

Operation Type (check all that apply):  

- [ ] Bison
- [ ] Beef: Commercial
- [ ] Beef: Purebred
- [ ] Beef: Cow-calf
- [ ] Beef: Yearling
- [ ] Dairy

Herd Make Up:

- # of Breeding Cows: __________
- # of Yearling Heifers: __________
- # of Bulls: __________
- # of Yearling Steers: __________
- # of Spayed Yearling Heifers: __________
% of Adult cows that are official Brucellosis calfhood vaccinates: ________________
% of Adult cows that have been vaccinated as adults for Brucellosis: ________________
% of Yearling heifers that are official Brucellosis calfhood vaccinates: ________________
% of Yearling heifers that are booster vaccinated for Brucellosis: ________________
% of Heifer calves that are official Brucellosis calfhood vaccinates: ________________

Do you have any of the following at a higher rate than you expect? (Circle all that apply.)
Abortions  /  Late Calving Cows  /  Weak Calves

Do you normally have your cattle pregnancy tested?  Yes / No

Normal % Bred that are Pregnant: ________________
Normal % Pregnant that calve: ________________

Normal Calving period dates: ____________________________________________

Are your cattle mixed with other producers’ cattle during the last 3 months of pregnancy and/or during calving?  Yes / No

Do you raise your own replacement heifers? Yes / No

Do you purchase replacement heifers? Yes / No
If so, from where: ______________________________________________________

Do you purchase adult breeding females? Yes / No
If so, from where: ______________________________________________________

**Marketing and Acquisition Information:**
When your cattle leave your herd, where and when do you usually market the following?

<table>
<thead>
<tr>
<th>Where</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breeding Cows:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Bulls:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Open cows/heifers:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Yearling heifers:</td>
<td>________________________________</td>
</tr>
<tr>
<td>Heifer calves:</td>
<td>________________________________</td>
</tr>
</tbody>
</table>

**Herd Risk Information:**
Has Brucellosis ever been found in a herd that your cattle have contact with?  Yes / No
If so, when & whose cattle/property? _________________________________________

Are your hay stacks/store-feed fenced or otherwise made inaccessible to elk & wild bison? Yes / No

Do your cattle have access to an elk feedground?  Yes / No
If yes, what time of year and which feedground?

Do you or others take measures to keep elk or wild bison out of your feed sources and away from your cattle during the critical exposure risk period between February 1 and June 30?  Yes / No

What measures are taken?

Does WGFD help prevent elk or wild bison from being in the proximity of your cattle during the critical exposure period (Feb 1-Jun 30) when your cattle are on feedlines?  Yes / No

Do you run yearling steers or spayed heifers that could be fed in the potential exposure area and move the cows/heifers elsewhere that might reduce or eliminate potential exposure to elk/wild bison?  Yes / No

Do you use individual animal identification tags in your herd?  Yes / No

Are you using RFID (electronic) Brucellosis vaccination tags?  Yes / No

Do you correlate official identification tag numbers with your herd identification numbers?  Yes / No

If yes, please explain how:

What ideas specific to your operation would serve to resolve the problem of commingling your cattle with elk?

Possible Herd Management Interests:

Are you interested in testing your cattle herd annually for Brucellosis at state expense on a voluntary basis and at your convenience (i.e. at pregnancy test time)?  Yes / No

Spring _____  Fall _______

If it is determined that there is sufficient risk, are you interested in booster vaccinating your yearling heifers pre-breeding for brucellosis at a year of age at state expense?  Yes / No

If it is determined that there is sufficient risk, are you interested in adult vaccinating your cattle for Brucellosis every four years at State expense as funding allows?  Yes / No

Do you have questions regarding the Chapter 2 Rules governing Brucellosis surveillance for the State of Wyoming?  Yes / No

Would you like a copy of the Chapter 2 rules?  Yes / No
Grazing/Feeding Area Information

*Please fill out the following information for each area in which you run cattle. Pastures/locations that are contiguous and have the same risk of exposure to elk can be included together as one “area.” Be sure to include ALL areas in which you run cattle during the year. Please contact us at 307-857-4140 if you need more area sheets.

Area 1:

Name of Area (Required): __________________________________________

Please give an address, legal description, GPS coordinates and/or general directions to this area (Required):
________________________________________________________________________________________

Approx. number of Cows: __________

During what time frames do you have cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Weined Heifer Calves: __________

During what time frames do you have weined heifer calves in this area?
From __________ to __________ & __________ to __________

Approx. number of Yearling Heifers: __________

During what time frames do you have yearling heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Feeder Heifers: __________

During what time frames do you have feeder heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Cull Cows: __________

During what time frames do you have cull cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Bulls: __________

During what time frames do you have bulls in this area?
From __________ to __________ & __________ to __________

Approx. number of Steers: __________

During what time frames do you have steers in this area?
From __________ to __________ & __________ to __________

Approx. number of Spayed Heifers: __________
During what time frames do you have spayed heifers in this area?

From __________ to __________ & __________ to __________

This area is (circle all that apply): Private / BLM / Forest Service / State / Other (Specify) __________

Are your cattle run in this area with other cattle? Yes / No

If so, whose? ________________________________________________________________

How far is this area from the ranch headquarters? (Required) __________ Miles

Is this area used for (circle): Grazing / Feeding / Both

Is this area used for calving? Yes / No  Is this area used for breeding? Yes / No

This area is within (circle): The DSA / Brucellosis Area of Concern / Neither

If this area is not located in the DSA or Area of Concern, you can skip to Area 2 on page 6.

Please answer the following questions to the best of your knowledge.

How far is this area from the nearest elk feedgrounds? (Required) __________ Miles

What is the name of the nearest feedground? (Required): ______________________________

1. Are elk ever in this area? Yes / No

   *If the answer is No, skip to Area 2 on page 6.

   If yes, during what time frames are elk in this area?

   From __________ to __________ & __________ to __________

2. Elk are in this area(s) because (circle all that apply):

   Feedline / Stored feed / Traditional Elk Habitat / Migratory route / Other: (please describe)________

3. Do elk access your stored-feed/haystacks? Yes / No

4. Do elk abort in this area(s)? Yes / No

   If yes, during what time frames do elk abort in this area?

   From __________ to __________

5. Do elk calve in this area(s)? Yes / No

   If yes, during what time frame do elk calve in this area?

   From __________ to __________
Area 2:
*If there are no more areas in which you run cattle, you can skip to the Signature Page on page 14.

Name of Area (Required): ____________________________________________________________

Please give an address, legal description, GPS coordinates and/or general directions to this area (Required):
________________________________________________________________________________

Approx. number of Cows: __________
During what time frames do you have cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Weined Heifer Calves: __________
During what time frames do you have weined heifer calves in this area?
From __________ to __________ & __________ to __________

Approx. number of Yearling Heifers: __________
During what time frames do you have yearling heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Feeder Heifers: __________
During what time frames do you have feeder heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Cull Cows: __________
During what time frames do you have cull cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Bulls: __________
During what time frames do you have bulls in this area?
From __________ to __________ & __________ to __________

Approx. number of Steers: __________
During what time frames do you have steers in this area?
From __________ to __________ & __________ to __________

Approx. number of Spayed Heifers: __________
During what time frames do you have spayed heifers in this area?
From __________ to __________ & __________ to __________
This area is (circle all that apply): Private / BLM / Forest Service / State / Other (Specify)_____________

Are your cattle run in this area with other cattle?  Yes / No

   If so, whose? _________________________________________________________________

How far is this area from the ranch headquarters? (Required) __________ Miles

Is this area used for (circle): Grazing / Feeding / Both

Is this area used for calving? Yes / No

Is this area used for breeding? Yes / No

This area is within (circle): The DSA / Brucellosis Area of Concern / Neither

If this area is not located in the DSA or Area of Concern, you can skip to Area 3 on page 8.

Please answer the following questions to the best of your knowledge.

How far is this area from the nearest elk feedgrounds? (Required) __________Miles

What is the name of the nearest feedground? (Required): ______________________________

1. Are elk ever in this area?  Yes / No

   *If the answer is No, skip to Area 3 on page 8.

   If yes, during what time frames are elk in this area?

   From ____________to____________ & ____________to____________

2. Elk are in this area(s) because (circle all that apply):

   Feedline / Stored feed / Traditional Elk Habitat / Migratory route / Other: (please describe)________

3. Do elk access your stored-feed/haystacks?  Yes / No

4. Do elk abort in this area(s)?  Yes / No

   If yes, during what time frames do elk abort in this area?

   From ____________to____________

5. Do elk calve in this area(s)?  Yes / No

   If yes, during what time frame do elk calve in this area?

   From ____________to____________
Area 3:
*If there are no more areas in which you run cattle, you can skip to the Signature Page on page 14.

Name of Area (Required): ________________________________

Please give an address, legal description, GPS coordinates and/or general directions to this area (Required):
________________________________________________________________________________________

Approx. number of Cows: __________
During what time frames do you have cows in this area?
From ________ to ________ & ________ to ________

Approx. number of Weined Heifer Calves: __________
During what time frames do you have weined heifer calves in this area?
From ________ to ________ & ________ to ________

Approx. number of Yearling Heifers: __________
During what time frames do you have yearling heifers in this area?
From ________ to ________ & ________ to ________

Approx. number of Feeder Heifers: __________
During what time frames do you have feeder heifers in this area?
From ________ to ________ & ________ to ________

Approx. number of Cull Cows: __________
During what time frames do you have cull cows in this area?
From ________ to ________ & ________ to ________

Approx. number of Bulls: __________
During what time frames do you have bulls in this area?
From ________ to ________ & ________ to ________

Approx. number of Steers: __________
During what time frames do you have steers in this area?
From ________ to ________ & ________ to ________

Approx. number of Spayed Heifers: __________
During what time frames do you have spayed heifers in this area?
From ________ to ________ & ________ to ________
This area is (circle all that apply): Private / BLM / Forest Service / State / Other (Specify)_____________

Are your cattle run in this area with other cattle? Yes / No

If so, whose? ________________________________________________________________

How far is this area from the ranch headquarters? (Required) __________ Miles

Is this area used for (circle): Grazing / Feeding / Both

Is this area used for calving? Yes / No

Is this area used for breeding? Yes / No

This area is within (circle): The DSA / Brucellosis Area of Concern / Neither

If this area is not located in the DSA or Area of Concern, you can skip to Area 4 on page 10. Please answer the following questions to the best of your knowledge.

How far is this area from the nearest elk feedgrounds? (Required) ______________Miles

What is the name of the nearest feedground? (Required): ______________________________

1. Are elk ever in this area? Yes / No

*If the answer is No, skip to Area 4 on page 10.

If yes, during what time frames are elk in this area?

From __________ to __________ & __________ to __________

2. Elk are in this area(s) because (circle all that apply):

Feedline / Stored feed / Traditional Elk Habitat / Migratory route / Other: (please describe)________

_______________________________________________________________________________________

3. Do elk access your stored-feed/haystacks? Yes / No

4. Do elk abort in this area(s)? Yes / No

If yes, during what time frames do elk abort in this area?

From __________ to __________

5. Do elk calve in this area(s)? Yes / No

If yes, during what time frame do elk calve in this area?

From __________ to __________
Area 4:
*If there are no more areas in which you run cattle, you can skip to the Signature Page on page 14.

Name of Area (Required): __________________________________________

Please give an address, legal description, GPS coordinates and/or general directions to this area (Required):
________________________________________________________________

Approx. number of Cows: __________
During what time frames do you have cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Weined Heifer Calves: __________
During what time frames do you have weined heifer calves in this area?
From __________ to __________ & __________ to __________

Approx. number of Yearling Heifers: __________
During what time frames do you have yearling heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Feeder Heifers: __________
During what time frames do you have feeder heifers in this area?
From __________ to __________ & __________ to __________

Approx. number of Cull Cows: __________
During what time frames do you have cull cows in this area?
From __________ to __________ & __________ to __________

Approx. number of Bulls: __________
During what time frames do you have bulls in this area?
From __________ to __________ & __________ to __________

Approx. number of Steers: __________
During what time frames do you have steers in this area?
From __________ to __________ & __________ to __________

Approx. number of Spayed Heifers: __________
During what time frames do you have spayed heifers in this area?
From __________ to __________ & __________ to __________
This area is (circle all that apply): Private / BLM / Forest Service / State / Other (Specify) ____________

Are your cattle run in this area with other cattle?  Yes / No

   If so, whose? ________________________________________________________________

How far is this area from the ranch headquarters? (Required) __________ Miles

Is this area used for (circle):  Grazing / Feeding / Both

Is this area used for calving?  Yes / No  Is this area used for breeding?  Yes / No

This area is within (circle):  The DSA / Brucellosis Area of Concern / Neither

If this area is not located in the DSA or Area of Concern, you can skip to Area 5 on page 12.

Please answer the following questions to the best of your knowledge.

How far is this area from the nearest elk feedgrounds? (Required) ______________ Miles

What is the name of the nearest feedground? (Required):  ______________________________

1. Are elk ever in this area?  Yes / No

    *If the answer is No, skip to Area 5 on page 12.

    If yes, during what time frames are elk in this area?

        From ____________ to ____________ & ____________ to ____________

2. Elk are in this area(s) because (circle all that apply):

    Feedline / Stored feed / Traditional Elk Habitat / Migratory route / Other: (please describe)________

3. Do elk access your stored-feed/haystacks?  Yes / No

4. Do elk abort in this area(s)?  Yes / No

    If yes, during what time frames do elk abort in this area?

        From ____________ to ____________

5. Do elk calve in this area(s)?  Yes / No

    If yes, during what time frame do elk calve in this area?

        From ____________ to ____________
Area 5:
*If there are no more areas in which you run cattle, you can skip to the Signature Page on page 14.*

Name of Area (Required): ____________________________________________________________

Please give an address, legal description, GPS coordinates and/or general directions to this area (Required):
____________________________________________________________________________________

Approx. number of Cows: ____________
During what time frames do you have cows in this area?
From ________ to ________ & ________ to ________

Approx. number of Weined Heifer Calves: ____________
During what time frames do you have weined heifer calves in this area?
From ________ to ________ & ________ to ________

Approx. number of Yearling Heifers: ____________
During what time frames do you have yearling heifers in this area?
From ________ to ________ & ________ to ________

Approx. number of Feeder Heifers: ____________
During what time frames do you have feeder heifers in this area?
From ________ to ________ & ________ to ________

Approx. number of Cull Cows: ____________
During what time frames do you have cull cows in this area?
From ________ to ________ & ________ to ________

Approx. number of Bulls: ____________
During what time frames do you have bulls in this area?
From ________ to ________ & ________ to ________

Approx. number of Steers: ____________
During what time frames do you have steers in this area?
From ________ to ________ & ________ to ________

Approx. number of Spayed Heifers: ____________
During what time frames do you have spayed heifers in this area?
From ________ to ________ & ________ to ________
This area is (circle all that apply): Private / BLM / Forest Service / State / Other (Specify)____________

Are your cattle run in this area with other cattle? Yes / No
If so, whose? _________________________________________________________________

How far is this area from the ranch headquarters? (Required) __________ Miles

Is this area used for (circle): Grazing / Feeding / Both

Is this area used for calving? Yes / No Is this area used for breeding? Yes / No

This area is within (circle): The DSA / Brucellosis Area of Concern / Neither

If this area is not located in the DSA or Area of Concern, you can skip to the Signature Page on page 14.

Please answer the following questions to the best of your knowledge.

How far is this area from the nearest elk feedgrounds? (Required) ______________Miles

What is the name of the nearest feedground? (Required): ______________________________

1. Are elk ever in this area? Yes / No

*If the answer is No, skip to the Signature Page on page 14.
If yes, during what time frames are elk in this area?
From ____________ to ____________ & ____________ to ____________

2. Elk are in this area(s) because (circle all that apply):
Feedline / Stored feed / Traditional Elk Habitat / Migratory route / Other: (please describe)________
_______________________________________________________________________________________

3. Do elk access your stored-feed/haystacks? Yes / No

4. Do elk abort in this area(s)? Yes / No
If yes, during what time frames do elk abort in this area?
From ____________ to ____________

5. Do elk calve in this area(s)? Yes / No
If yes, during what time frame do elk calve in this area?
From ____________ to ____________
Signature Page

By signing below, I verify that this information is accurate to the best of my knowledge.

__________________________    __________________________
Producer Signature            Date

** □ By checking this box, I deny authorization of the WLSB to use aggregate information from this questionnaire.

__________________________    __________________________
WLSB Veterinarian Signature   Date

Please return all pages of completed questionnaire to:
WLSB Field Office, 610 Fairground Road, Riverton, WY 82501