



# Flock Information Reporting Form



Producer/Enterprise Name: \_\_\_\_\_ Producer Code: \_\_\_\_\_ Quota #: \_\_\_\_\_  
 Flock #: \_\_\_\_\_ Barn #: \_\_\_\_\_ Floor #: \_\_\_\_\_ Species: \_\_\_\_\_ Category/Sex: \_\_\_\_\_  
 Age of Birds being Shipped: \_\_\_\_\_ # Birds Placed: \_\_\_\_\_ Estimated Mortality Rate (%): \_\_\_\_\_  
 Estimated # Birds Shipped: \_\_\_\_\_ Estimated Live Kg per Bird: \_\_\_\_\_ Grow-out Density: \_\_\_\_\_

## Section A (Hatchery and Vaccine Information)

Vaccines and treatment (include withdrawal period) at the hatchery level as indicated by the hatchery	Vaccination during growing/production period and specify method (water, air, injection)
Date: _____	Date: _____
Date: _____	Date: _____
Date: _____	Date: _____

## Section B (Diseases and Treatments During the Grow-Out Period)

Were any diseases requiring medication observed during grow-out? .....  No  Yes (list all in table below)

Name of Disease or Syndrome	Medication Used	Dosage	Method Administered (water/feed)	First treatment date	Last treatment date	Flock recovered (grower's initials)	Safe marketing date as per recommended withdrawal time (if any)

## Section C (Feed and Feed Withdrawal)

Planned catching/loading time: ..... M D Time AM PM  
 Actual beginning of catching/loading: ... M D Time AM PM  
 Planned processing time: ..... M D Time AM PM  
 Time of last access to water: ..... M D Time AM PM  
 Was the feed supply disrupted in the last 48 hours? ....  Yes  No

Were any preventative medications requiring a withdrawal period used in the last 14 days?  Yes  No .... **If yes:**

Product Name	Withdrawal Period	Safe Marketing Date

Time feed was no longer accessible: ..... M D Floor #1 Time AM PM Floor #2 Time AM PM Floor #3 Time AM PM  
 Was the feed withdrawal time provided by the processor: ....  Yes  No .... **If yes:** M D Time AM PM

Provide any additional comments on flock condition during the grow-out period and/or catching process on a separate sheet of paper if desired.

I confirm that, to the best of my knowledge, the information contained on this flock information reporting form is accurate and complete and that any diseases that were diagnosed in the flock as a result of laboratory tests and/or readily observable clinical signs have been identified and reported on this form.

**Producer's Signature:** \_\_\_\_\_

Note: This information is confidential between the producer and the processor.

## Instructions to Complete the Flock Information Reporting Form

Flock information (except # birds shipped), Section A, Section B and preventative medications of Section C must be sent to the processor 3-4 days prior to shipment. Use one form per flock when all flock information is identical. Use additional forms when flock information is not identical. There is no specific order of colours to send or keep. Ensure to keep a copy in your farm records.

**Species:** List the type of production (chickens/turkey/spent hens/culled breeders).

**Category/Sex:** List bird type (i.e. pullet, roaster, tom turkey, light/heavy fowl).

**Grow-out Density:** List the grow-out area in either feet<sup>2</sup>/bird (barn area/# birds) or m<sup>2</sup>/kg. This section does not need to be completed for layer operations.

**Section A: Hatchery and Vaccine Information:** List the name of all vaccines/treatments administered at the hatchery (as per hatchery invoice). If a treatment for which there is a withdrawal period was administered, include the length of the withdrawal period as indicated on the hatchery invoice. List the name of all vaccines administered during the grow-out period with the date they were administered and method, e.g. Infectious bronchitis (or a common name) / Gentamycin (or a brand name).

**Section B: Diseases observed during grow-out:** If no medications were used to cure a disease, check the "No" box. For spent hens, this should focus on the last 120 days before shipment.

**Name of disease or syndrome:** List the name of all the diseases or syndromes that were diagnosed or that occurred during the grow-out period, including those for which no treatment was administered to the flock. This is very important for export certification. Flocks that are not eligible for export because of notifiable diseases will remain eligible for domestic use. (e.g. Infectious Laryngotracheitis or ILT).

**Medications:** List the name of all medications administered in the case of disease, even those with no withdrawal period. A veterinary prescription must be attached to the advance copy of the flock sheet for any extra/off label medication use.

**Dosage:** List the volume of medication administered (i.e. as per label; mg/kg live weight; mL in L of drinking water, etc.)

**Flock recovered:** Initial this box to certify that the flock has completely recovered from the disease/syndrome. This is important for the plant defect detectors to differentiate between active lesions or scar lesions: this will contribute to maximize your return.

**Section C: M/D/Time:** List the month, day and time (circle am or pm) for each item.

**Planned catching/loading time:** List the estimated time and date of catching as provided by the processor at least 48 hours prior to catching.

**Actual beginning of catching:** List the actual date and time the catching crew started to load the birds.

**Planned processing time:** List the estimated date and time of processing as provided by the processor at least 48 hours prior to catching.

**Time feed was no longer accessible:** List the actual time when the flock no longer had access to feed (not simply when feed distribution was interrupted). If the time of feed withdrawal is different for individual floors within the barn, record the time of feed withdrawal on each floor in the space provided.

**Preventative medications:** Check "yes" if there were any preventative medications (water or feed) used in the last 14 days requiring a withdrawal period. If yes, list all medication in the provided table. If any preventative medication has been used extra/off label, a veterinary prescription must be attached to the advanced copy of the flock sheet; this includes preventative medications without a withdrawal period used extra/off label.

**Was feed supply disrupted in the last 48 hours:** Check "yes" if the feed supply was disrupted in some way in the last 48 hours. If birds have been starved (even for a short period of time) they may have gorged themselves and their digestive tract might have been impacted. This has a serious impact on the amount of digesta present during evisceration and potential contamination with disease-causing bacteria.

**Was the feed withdrawal time provided by the processor:** Check "yes" if the processor has given a precise time when the flock should be denied access to feed (taking into account the various factors to optimize the feed withdrawal period). If yes, list the date and time.