

## **Livestock Parasite Control Program**

## **Animal Identification & Records**

Accurate identification and record-keeping are essential for targeted parasite control.

Ear Tag/Microchip Number	
Enter a number	
Species	
Cattle	
Sheep	
Goats	
Pigs	
Horses	
Other	
Breed	
Date of Birth/Arrival	
Enter date	

Write something	
Body Condition Score (BCS) - Initial Assessment	
Enter a number	
Pasture/Environment Management	
lanaging grazing land and the environment to reduce parasite burdens.	
Average Stocking Density (Animals/Acre)	
Enter a number	
Pasture Management Practices Implemented	
Rotational Grazing	
Manure Removal	
☐ Dragging/ Harrowing	
Desture Dest Deviede	
Pasture Rest Periods	
Diversified Pasture Species	
Diversified Pasture Species	

Write something				
Presence of Sta	nding Water (Potenti	al Breeding Groun	ds)	
Yes				
□ No				
Uncertain				
Pasture Map (O <sub>l</sub>	tional)			
4 Upload File	lionaly			
Cis Opioad File				
iternal Pai	asite Contro	ol (e.g., Woı	ms)	
	asite Contro		ms)	
rategies for preve	nting and treating inte	nal parasites.	-	
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rategies for preve	nting and treating inte	nal parasites.	-	
Average fecal eq	nting and treating inte	nal parasites. e treatment (per a	nimal)	
Average fecal equation Enter a number  Dewormer Class Benzimidazole	g count (EPG) befor Used (e.g., Benzimi	nal parasites. e treatment (per a	nimal)	
Average fecal equation Enter a number  Dewormer Class	g count (EPG) befor Used (e.g., Benzimi	nal parasites. e treatment (per a	nimal)	

If 'Other' Dewormer Class selected, please specify:
Write something
Dewormer Dosage (per animal)
Enter a number
Date of Dewormer Administration
Enter date
Number of animals treated in this round
Enter a number
Method of Dewormer Administration (e.g., Oral, Injection)
Oral
Injection
Other (Specify in LONG_TEXT)
If 'Other' Administration Method selected, please specify:
Write something

Post-treatment Fecal Egg Count Monitoring (EPG) - Time After Treatment (Days)
Enter a number
Post-treatment Fecal Egg Count Monitoring (EPG) - Value
Enter a number
External Parasite Control (e.g., Lice, Mites, Flies)  Measures to control external parasites affecting livestock.
Identify Primary External Parasite Concerns:  Lice  Mites (e.g., Sarcoptic, Demodectic)  Flies (e.g., Horn Flies, Face Flies, Stable Flies)
☐ Ticks ☐ Other (Specify in Long Text)
If 'Other' selected above, please specify which parasites are of concern:
Write something
Application Method (for insecticides/acaricides):  Pour-on Spray (whole herd/group) Spot Treatment Dust Other (Specify in Long Text)

Write something	
Date of Last External Parasite Treatment:	
Enter date	
Number of Animals Treated During Last Application:	
Enter a number	
Draduota Haad for Last Treatment (Salast all that apply).	
Products Used for Last Treatment (Select all that apply):  Pyrethrin-based	
Organophosphate	
Amitraz	
Macrocyclic Lactone	
Other (Specify in Long Text)	
If 'Other' selected above for Products Used, please specify:	
Write something	
Attach photos of affected animals (if applicable):	

## **Drug Rotation & Resistance Management**

Best practices to prevent parasite resistance to dewormers and insecticides.

Current Dewormer Rotation Strategy	
Write something	
Number of Dewormer Classes Used (Ideally 3 or more)	
Enter a number	)
Frequency of Dewormer Class Rotation	
Every 3 months	
Every 6 months	
Every 12 months	
Other (Specify in Long Text)	
Resistance Monitoring Methods Used (Check all that apply)	
Fecal Egg Count Reduction Test (FECRT)	
Refugia Strategy	
☐ DNA/RNA testing	
None	
Date of Last FECRT/Resistance Test	
Enter date	)

Write somethin	ng				
Refugia Strat	egy Implemen	tation			
Implemented	- Specific perce	ntage of untrea	ted animals		
Planned Imp	lementation				
Not Impleme	nted				
Percentage o	f Animals in R	efugia (if app	licable)		
Enter a number	r				
Notes on Dru	g Rotation Ch	allenges & So	olutions		
Notes on Dru Write somethin	_	allenges & So	olutions		
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	_	allenges & S	olutions		
	_	allenges & S	olutions		
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Write something  Signs of Parasitism to Look For in New Arrivals  Weight Loss	
	<i>).</i> 
Weight Loss	
Diarrhea	
Anemia	
Rough Coat	
Depression	
Other (Specify)	
Distance from Main Herd/Flock for Quarantine Area (Meters)	
Enter a number	
Date of Last Biosecurity Review	
Enter date	
Method of Disinfection for Equipment Entering/Leaving Quarantine Area	
Write something	

Visitor Policy for Quarantine Area  No Visitors Restricted Visitors (Specify) Controlled Access (Specify)
Monitoring & Evaluation  Regular assessments to ensure the program's effectiveness.
Date of Last Parasite Faecal Egg Count (FEC)
Enter date
FEC Results (Eggs per gram - EPG)  Enter a number
Notes on FEC Results & Interpretation
Write something
Parasite Species Identified (if any)  None Roundworms Tapeworms Flukes Lungworms Other (Specify in LONG_TEXT)

Signs of Parasitism Observed in Livestock (Check all that apply)					
Weight Loss					
Diarrhea					
Anemia					
Poor Growth					
Rough Hair Coat					
Swollen Limbs					
None Observed					
Development of Livertrals Chausing Ciana of Development					
Percentage of Livestock Showing Signs of Parasitism					
Enter a number					
Date of Next Scheduled Monitoring/FEC					
Enter date					
Summary of Overall Program Effectiveness & Areas for Improvement					
Write something					