DCF 1

FIELD ASSESSMENT (Individual animal)

Owner: I give permission for my animal to participate (as per information sheet):

Date format dd/mmm/yyyy

Date: ____________

Owner consent, animal details and history:

Dog  Cat  Other pets?  Yes  No

Animal no. __________________________

Owner: __________________________

Signature: __________________________

Date: ____________

Owner consent, animal details and history:

Dog  Cat  Other pets?  Yes  No

Age (months)  Breed  Sex  Male  Female

Diet: Homemade  Tinned  Kibble  Mixed

Last deworming: Never  1-6 months ago  > 6 months ago

Dewormer used: __________________________

Last ectoparasiticide: Never  1-6 months ago  > 6 months ago

Ectoparasiticide used: __________________________

Last vaccination: Never  Within last year  Within last 3 years

Vaccines used: Rabies  Leptospirosis  DHP  CPiBordetella

Other: __________________________

Housing: Indoor  Free roaming  Yard  Other pets?  Yes  No

If "yes" to "Other pets"; Cats or dogs and how many?

Dog(s) __________________________

Cat(s) __________________________

Geographical details

Pet origin (name of city/town/village) __________________________

GPS coordinates of sampling site __________________________

Physical examination and general health assessment

Any major abnormal clinical signs evident?  Yes  No

If yes, provide details below:

Body Condition Score  1  2  3  4  5

Mucous membrane colour: Normal (pink & moist)  Pale  Icteric  Other: __________________________

Temperature (°C)  Pulse (beats/minute)  Respiration rate (minute)

Ectoparasite assessments

Ticks

Area 1  1 ticks  2 ticks  ≥ 3 ticks

Area 2  1 ticks  2 ticks  ≥ 3 ticks

Area 3  1 ticks  2 ticks  ≥ 3 ticks

Area 4  1 ticks  2 ticks  ≥ 3 ticks

Area 5  1 ticks  2 ticks  ≥ 3 ticks

Area 6  1 ticks  2 ticks  ≥ 3 ticks

Area 7  1 ticks  2 ticks  ≥ 3 ticks

Fleas

Overall  ≤ 150 fleas  > 150 fleas

Lice

Overall  ≤ 10 lice  > 10 lice

Ectoparasite specimen collection (single jar with 70% ethanol per animal)

Up to 30 ticks collected:  Yes  No

Fleas and lice: Collected as many as possible  None present

Ensured that the barcode on the collection jar corresponds with barcode on this form:  Yes

Blood collection and processing and anal swab preparation

Blood specimen collected  Yes  No

FTA card used  Yes  No

4DxPlus kit used  Yes  No

4Dx Plus kit positive results:

Heartworm  Borrelia burgdorferi (Lyme disease)  Anaplasma spp.  Ehrlichia spp.

Serum prepared  Yes  No

Anal swab performed  Yes  No

Rabies vaccine administered?  Yes  No

Ectoparasite preventive dispensed?  Yes  No

Field assessment performed by: __________________________

Signature: __________________________

Date: ____________

Preparation for shipment checklist

Following was prepared for shipment to Clinvet:  DCF 1  FTA card (one half)  Ectoparasite collection jar  Anal swab

Prepared for shipment by: __________________________

Signature: __________________________

Date: ____________

Diagram of tick collection areas:

1. Outside hind legs
2. Tail and anal area
3. Lateral area, not shoulders
4. Abdomen & inside hind legs
5. Shoulder and fore-legs
6. Head and neck
7. Dorsal, shoulders to tail base