

# DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS SCOTTISH GOVERNMENT

#### WELSH GOVERNMENT

DEPARTMENT FOR AGRIGULTURE, ENVIRONMENT AND RURAL AFFAIRS, NORTHERN IRELAND

								No:	
EXPORT	OF STALLIONS	VACCINATED	AGAINST	EQUINE	VIRAL	ARTERITIS	то	JAPAN	

HEALTH CERTIFICATE

EXPORTING COUNTRY:

UNITED KINGDOM

FOR COMPLETION BY:

OFFICIAL VETERINARIAN

Identification of the animal

Name	Breed	Age	Colour	Sex

A full description using the sketch on page 4 MUST be completed. Whorls on head and neck should be described in the narrative and indicated by a small cross (x).

#### II. Origin of the animal

- a) Name and address of exporter:
- b) Address of the pre-export isolation premises:

### III. Destination of the animal

- a) Country of destination:
- b) Name and address of consignee:
- c) Means of transportation:

### IV. Health information

- I, the undersigned, certify that the stallion described above meets the following requirements:
- a) on (date), I examined the said stallion and found it to be free from clinical signs of infectious or contagious disease;
- b) the said animal has been isolated under veterinary supervision for at least 30 days prior to export on premises at II b) approved by DEFRA and was inspected daily for at least 7 days immediately prior to shipment;

c) as far as I can ascertain and in accordance with a written declaration from the owner\*/agent of the owner\* the said animal has been kept for at least 60 days, before the commencement of the official pre-export isolation period mentioned in paragraph IV b) on premises where there has not been any clinical, microbiological or serological evidence of the following diseases within 3 months of export;

coital exanthema, contagious equine metritis, equine viral arteritis, equine infectious anaemia, equine influenza, equine rhinopneumonitis (EHV), equine paratyphoid (Salmonella abortus-equi), equine piroplasmosis and strangles;

- on (date), being within 30 days of export, blood samples were taken from the said stallion and sent a Government approved laboratory, and were subjected to the following tests with negative results in each case:
  - i) the agglutination test for equine paratyphoid (salmonella abortus-equi) (negative means a titre less than 1:320);
    - the agar gel immunodiffusion test for equine infectious anaemia (Coggins test);
  - the microscopic examination for equine piroplasmosis (Babesia equi and Babesia caballi);
  - iv) **\*either**
- (a) the complement fixation for equine piroplasmosis (Babesia equi and Babesia caballi) (negative means less than 50 % fixation at a dilution of 1:5);

\*or

- (b) the indirect fluorescent antibody test for equine piroplasmosis (Babesia equi and Babesia caballi) (negative means less than 2+ at a dilution of 1:80);
- e) on the following dates and within 30 days of export
  - 1. (date) 2. (date) being at least 7 days apart and whilst in pre-export isolation swabs were taken from the prepuce, urethral sinus and fossa glands of the stallion and sent to a Government approved laboratory where they were subjected to a bacteriological examination for contagious equine metritis with negative results in each case;
- f) on (date), the said stallion was vaccinated against equine viral arteritis using (name of vaccine);
- g) on (date), immediately prior to vaccination, a blood sample was taken from the said stallion and subjected to a serum neutralisation test for EVA with a negative result at a dilution of 1:4;
- h) on (date), being prior to entry into the pre-export isolation premises, a blood sample was taken from the said stallion and sent to a Government approved laboratory, where it was subjected to the serum neutralisation test for EVA; (SEE NOTE 1)
- j) the said stallion and two test mares were kept in approved isolation premises for a minimum of 30 days and during that period:
  - on (date) and on (date), being not less than 14 days apart and the second date being within 10 days of export, blood samples were taken from the said stallion and sent to a Government approved laboratory, where they were subjected to the serum neutralisation test for EVA. The results of the tests at paragraph IV h) and IV j i) showed no significant rise in titre (less than a 4x increase) or a declining fitre; (SEE NOTE 1)
  - ii) a) on (date) and (date) being two consecutive days, the said stallion covered each of two test makes twice a day; AND
    - b) on (date) and (date) being the 14th day and the 28th day after the last covering, blood samples were taken from each of the test mares and subjected to a serum neutralisation test for EVA at a Government approved laboratory, with a negative result at a dilution of 1:4 in each case;
- k) on (date) being immediately prior to entry to the premises mentioned at paragraph IV j) a blood sample was taken from each of the two test mares and sent to a Government approved laboratory, where they were subjected to the serum neutralisation test for equine viral arteritis with negative results at a dilution of 1:4;

## \* delete as appropriate

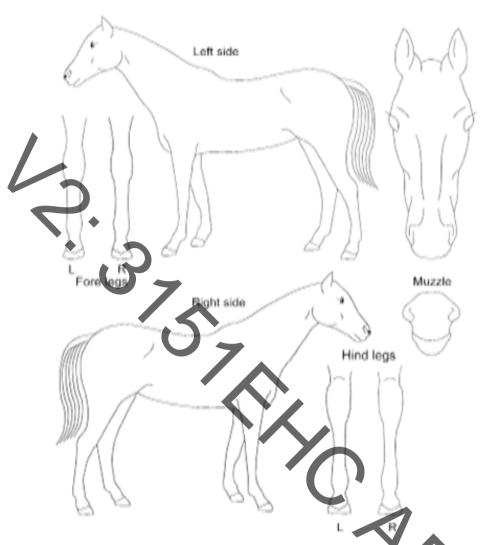
- 1) (date) whilst in pre-export isolation, blood samples were taken from each of the two test mares and sent to a Government approved laboratory, where they were subjected to the following tests with negative results in each case: the agglutination test for equine paratyphoid (salmonella abortus-equi) (negative means a titre less than 1:320); ii) the agar gel immunodiffusion test for equine infectious anaemia (Coggins test); the microscopic examination test for equine piroplasmosis (Babesia equi and iii) Babesia caballi); (a) the complement fixation for equine piroplasmosis (Babesia iv) \*either equi and Babesia caballi) (negative means less than 50 20 fixation at a dilution of 1:5); (b) the indirect fluorescent antibody test for equine piroplasmosis (Babesia equi and Babesia caballi)(negative \*or means less than 2x at a dilution of 1:80); in pre-export isolation, swabs were taken from cervix, clitoral fossa and sinuses of each of the two test mares on two occasions, on and on (date), being at least 7 days apart and were sent to a approved laboratory, where they were subjected to a bacteriological for contagious equine metritis with negative results; nment (i) n) (date) and the said stallion was vaccinated against equine influenza using the following licensed product: of vaccine (ii) \*or (date) the said stallion received a accination against equine influenza using the following duct in accordance with manufacturer's licer recommendation Name of vaccine a declaration has been received from the exporter\*/ transporter\* stating that the said animal will be transported in vehicles cleansed and disinfected with an approved disinfectant and without coming into contact with any other horses not similarly 0) certified; a declaration has been received from the t of the owner\* stating that the p) feed and litter used from the commencement c to the arrival in Japan came from these premises at (address of premises) and I confirm these premises are free from all notifiable diseases; encephalomyelitis, African horse sickness, equine viral a) glanders, epizootic lymphangitis, horse pox (variola) and dourine do not exi in the United Kinadom; \* delete as appropriate This certificate is valid for 14 days. Signed..... Stamp RCVS letters: ......
  - NOTE

Date .....

(1) These blood samples are to be tested on the same day at a Government approved laboratory.

Official Veterinarian

Address .....



#### INSTRUCTIONS

EITHER complete silhouette and description OR enter number of passport/ indentification certificate

- White markings to be shown in red.
- Mark the diagram with the exact position of any distinguishing marks, scars or brands. Brands to be drawn in position. Scars to be marked and indicated with an arrow ( $\rightarrow$ ).
- $\bullet$  Whorls should be marked with a cross  $(\boldsymbol{X})$  .
- Stars or blazes on the face and any other marking to be drawn in on the diagrams showing position and shape as accurately as possible.
- Please ensure that the diagram and the written description agree.
- If no markings, this fact should be stated.

Tacc	SHOULG	DC	scacca.	
Stamp	)			
Date				

Name	Breed	Colour	ge Sex
Head/Neck			
Limbs LF			
RF			
LH			-1
RH			
Body			
Acquired mark	s (scars, tattoos et	.c )	

The horse certified on this health certificate is as described in horse passport/identification certificate number:.....