

**Active Observational Surveillance (AOS) for
Foot and Mouth Disease (FMD)
*Abnormal Findings Explanation Form***



Farm Name:			PIN:		
Year: ____					
Date (MM/DD)					
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N
					Y N

¹Abnormal findings may include changes in production parameters such as feed intake, or clinical signs that could be the result of FMD infection such as fever (Fe), lameness (L), calf death (CD), depression (De), drooling (Dr), nasal discharge (N), and/or vesicles/blisters on mouth, teats, and/or feet (V).

²Promptly report suspicious clinical signs or unexplained changes in production parameters to the individual specified in the operation's AOS Communication Plan.