D.N. No.53-68/2012-LDT(LH)Pt.II

June 22, 2016

Dear Chief Secretary,

You are aware that this Department is implementing Foot & Mouth Disease Control Programme (FMD-CP) as one of the component of Livestock Health & Disease Control (LH&DC) scheme.

2. With robust implementation of the FMD-CP by the States, there has been progressive reduction in FMD outbreaks. As a result, World Organization for Animal Health (OIE) has also endorsed Official FMD Control Programme of the country in May 2015.

3. The funding pattern of the scheme has been changed during 2015-16 and hence States need to provide 40% share for implementation of the scheme. The Department has prepared Operational Manual to facilitate States Animal Husbandry Departments for effective implementation and monitoring of FMD-CP (a copy of the Manual is enclosed). The Manual highlights the objective of the programme, implementation strategy, modalities for procurement and supply of FMD vaccine, role of State/District Monitoring Units, strategy for sero-monitoring, publicity and awareness campaign and outbreak reporting, its control and containment. The detailed information on implementation strategy given in the Manual will help States for effective implementation and monitoring of the programme in the States.

4. You are, therefore, requested to review the implementation of FMD Control Programme in your State and instruct all concerned to adhere to the guidelines of FMD-CP so as to ensure 100% FMD vaccination of eligible cattle and buffalo population at six monthly intervals. In this regard, a vaccination calendar giving dates for carrying out FMD vaccination for first round during 2016-17 has already been sent to States. A copy of the same is also enclosed.

Yours sincerely,

(Devendra Chaudhry)

Encl: As above.

To,

Chief Secretary, Govt. of Maharashtra, Gujarat, Kerala, Tamil Nadu, Karnataka, Uttar Pradesh, Goa, Haryana, Punjab, Andhra Pradesh, Telangana, Bihar, Rajasthan, Delhi, Puducherry, Lakshadweep, Andaman & Nicobar, Dadra & Nagar Haveli, Daman & Diu.

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FOOT AND MOUTH DISEASE CONTROL PROGRAMME
(FMD-CP)

OPERATIONAL MANUAL FOR
IMPLEMENTATION OF FOOT AND
MOUTH DISEASE CONTROL
PROGRAMME (FMD-CP) IN THE STATES

DEPARTMENT OF ANIMAL HUSBANDRY, DAIRYING & FISHERIES
MINISTRY OF AGRICULTURE AND FARMERS WELFARE
GOVERNMENT OF INDIA
NEW DELHI
1. Introduction:

1.1 Foot-and-Mouth Disease (FMD) is a highly contagious viral vesicular disease of cloven-hoofed animals. It is caused by a non-enveloped virus of Picornaviridae family of the genus Aphthovirus. There are seven serotypes of the virus all over the world, of which only three serotypes viz. ‘O’, ‘A’ and ‘Asia 1’ are prevalent in India. Foot and Mouth Disease (FMD) is the most important livestock disease in the world in terms of economic impact. FMD causes the greatest loss in production in susceptible animals. FMD is an important determinant of international trade in livestock products, and its existence is a barrier to market access in animal and animal products as well as fair prices for these products. Globally, FMD is ranked as number one priority disease for control and eradication.

1.2 As per the estimates given by Indian Council of Agriculture Research (ICAR), the direct loss due to milk and meat is estimated at Rs. 20,000 crores per annum. Indirect losses due to reduced work capacity; abortions, subsequent infertility and sterility (that account for the reduced milk production subsequently) have not been quantified.

1.3 The main impacts of FMD in terms of animal production and trade are the following:

- reduced milk yields and increased probability of mastitis due to damaged teats in dairy animals
- abortions and delayed conception in breeding stock
- pre-natal mortality, as a direct result of the disease in young animals.
- lameness in draught animals, which reduces their ability to work in terms of cultivation and transporting goods.
- loss of weight in growing animals due to reduced feed intake resulting from foot and mouth lesions.
- The impact of FMD is much more significant when trade of live animals or their by-products cannot take place between an FMD-infected country and an FMD-free country.
1.4 FMD is a trans-boundary animal disease and the disease is endemic and widely prevalent in several countries in South Asia and the countries in the sub-region also experience numerous outbreaks of the disease. The disease circulation in sub-region is manifested by occurrence of outbreaks at regular interval, thus causing virus circulation in different parts of the countries of the sub-region.

2. Modalities for Control of FMD:

2.1 Control of FMD is achieved by mass vaccination of all susceptible livestock repeatedly at regular intervals till the disease incidence comes down to negligible levels.

2.2 Though the disease affects all the cloven-footed animals including sheep and goats, it primarily affects cattle, buffaloes and pigs. Therefore, controlling the disease in cattle and buffaloes plays a major role in controlling the disease and its further spread.

2.3 Globally, wherever the FMD control has been undertaken and completed, it has been done by mass repeated vaccination of cattle and buffaloes leading to gradual elimination of the disease. However, in the event of an outbreak in free zone, emergency vaccination is carried out in all susceptible livestock. The FMD control campaign can best be compared with the polio eradication in human population, which in essence is a sustained and repeated vaccination programme undertaken over a long period of time.

2.4 Therefore, in order to control Foot and Mouth Disease in the country and to minimize the economic losses due to FMD as per the path (progressive control pathway; PCP) laid down by OIE/FAO, the pilot project was taken up by Department of Animal Husbandry, Dairying & Fisheries, Ministry of Agriculture, Govt. of India since 2003 in selected 54 districts of the country with the following objectives.

i) To Control FMD in the country to create Disease Free Zones.

ii) Increase the productivity of animals and thereby the economic status of the livestock owners.

iii) Facilitate livestock trade at national and international markets.

2.5 Government of India supplements the efforts of the State Governments for prevention, control and containment of animal diseases by providing financial assistance through various components including Foot and Mouth Disease Control
Programme (FMD-CP) under “Livestock Health & Disease Control (LH & DC)’ now categorized as State Plan since 2015-16.

3. Foot and Mouth Disease Control Programme (FMD-CP):
3.1 Efforts to control FMD in the country were continued before 10th Five Year Plan Period also
3.2 However, Department initiated an intensive ‘Foot and Mouth Disease Control Programme (FMD-CP)’ as one of the component of the Centrally Sponsored Scheme ‘Livestock Health & Disease Control (LH&DC) in the 10th Five Year Plan Period (in 2003-2004) in 54 districts spread over eight States and five Union Territories in the country. The programme showed desired results in terms of reduction in the incidence of disease compared to other areas. Therefore, the programme was expanded to another 167 districts since August 2010.
3.3 During 12th Five Year Plan, it has been envisaged to extend the coverage of the FMD-CP in all the remaining States/UTs in phase manner depending on availability of vaccine and funds. Therefore, after covering 221 districts during 11th Five Plan Period, the programme was further extended to cover Rajasthan and remaining districts of Uttar Pradesh during 12th Five Year Plan Period in 2013-14 and Bihar in 2014-15.
3.4 Thus, as of now, FMD Control Programme is being implemented in 351 districts of States/UTs of Andhra Pradesh, Telangana, Maharashtra, Kerala, Tamil Nadu, Gujarat, Punjab, Haryana, Uttar Pradesh, Karnataka, Goa, Rajasthan, Bihar, Puducherry, Delhi, Andaman & Nicobar, Dadra & Nagar Haveli, Daman & Diu and Lakshadweep (UT has been considered as one districts and the number of districts in the states may vary). Schematic diagram of evolution of FMD-CP is given as under:
3.5 Need-based FMD vaccination is also carried out under another programme i.e. ‘Assistance to States for Control of Animal Diseases (ASCAD)’ in those districts/states which are not covered under FMD Control Programme.

4. Financial and Administrative Support under FMD-CP:

4.1 As per approved scheme norms, 100% central funding was being provided for vaccine and vaccination cost including creation of cold chain facilities, animal health cards, creation of temporary check posts and sero-monitoring, etc. till 2014-15. During financial year 2015-16, Livestock Health and Disease Control (LH&DC) Scheme has been categorized under State Plan with change in funding pattern which is now fixed at 60:40 between Centre and State (90:10 for the North Eastern and 3 Himalayan States and 100% for Union Territories) Accordingly, funding pattern under FMD-CP has also been fixed at 60:40 between Centre and State for the existing States.

4.2 The State Governments are providing other infrastructure and manpower to undertake FMD vaccination in systematic manner, at six monthly intervals, which is essential for its effective control.

4.3 Administrative support will also be provided by the Commissioner / Directors Department of Animal Husbandry and District Authorities of the concerned states to ensure the smooth functioning of the programme. However, responsibility and accountability of personnel involved in the project will be pre determined.

5. Legislative back-up:

5.1 One of the most important aspects for prevention, control & containment of any animal disease is to have legislative back up in place in the country as long term measure. Government of India has enacted a Central Act in this regard namely, ‘The Prevention and Control of Infectious & Contagious Diseases in Animals Act, 2009’ with objectives:

- To prevent spread of economically important infectious and contagious diseases from one part of the country to another.
- To establish “Controlled” and “Eradicated areas” within the country in order to reduce economic losses on account of major economically important infectious and contagious diseases of livestock.
- To control animal diseases of public health significance on a national basis and promote import and export of animals and animal products by meeting India’s international obligations.
5.2 ‘The Prevention and Control of Infectious and Contagious Diseases in Animals Act, 2009’ provides legislative back up for the control and eradication of livestock and poultry diseases including Foot and Mouth Disease in the country.

5.3 **Act also envisages:**

- Compulsory reporting of scheduled diseases in animals to the nearest veterinary institution
- Isolation of infected animal and disinfection of premises and vehicles

5.4 **Other related Acts:**

- Indian Veterinary Council Act, 1984 - regulates veterinary practice and veterinary education.

6. Implementation Strategy:

6.1 The programme envisages vaccination of all eligible cattle and buffalo population at six monthly intervals in all the selected States/ UTs under FMD-CP so as to maintain herd immunity. Strategic vaccination of pigs is also being done. Presently for 351 districts with about 197 million cattle and buffalo population are covered under FMD-CP.

6.2 The schedule of vaccination is as under:

<table>
<thead>
<tr>
<th>Description of animal</th>
<th>Vaccination Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young Animals</td>
<td>Above age of 3-4 months. <strong>Thereafter six monthly vaccination</strong></td>
</tr>
<tr>
<td>Adult Animals</td>
<td>Six monthly vaccination as recommended under the programme</td>
</tr>
</tbody>
</table>

- FMD vaccine is to be constantly kept at a temperature of 2 °C and 8 °C.
- The vaccine should never be frozen nor exposed to temperature higher than 8 °C.
- The dose of vaccine be used as per the manufacturer’s instructions which is at present 2 ml each for cattle and buffalo.
- Route – deep intramuscular (Care must be taken not to rupture bigger blood vessels that may cause emboli in blood stream)
6.3 Modalities for procurement and supply of FMD vaccine by States under FMD-CP:

- As per present funding pattern for the programme, the Central Government provides 60% funding to States for vaccine and vaccination cost including creation of cold chain facilities, animal health cards and creation of temporary check posts.

- For sero-monitoring under FMD-CP, funds are provided to PD-FMD directly from Headquarter.

- For facilitating States for procurement of FMD vaccine, terms and conditions of the tender floated by SFAC are already available with the States for ensuring quality criteria of FMD vaccine.

- Therefore, States need to start procurement six months in advance and process may be valid for at least two years so as to facilitate for procurement of vaccine for each round in advance.

- States need to provide 40% State matching share well in advance so as to complete the procurement process at the earliest.

- The State Governments also provides other infrastructure and manpower to undertake FMD vaccination in systematic manner, at six monthly intervals, which is essential for its effective control.

- Administrative support is also being provided by the Commissioner / Directors Department of Animal Husbandry and District Authorities of the concerned states to ensure smooth functioning of the programme.

6.4 Role of State Monitoring Unit (SMU):

- SMU need to expedite finalisation of procurement process/tendering in advance so as to make required vaccine doses available at district/ block level to carry out vaccination round as per scheduled month of vaccination.

- Required vaccine doses should be made available well before start of round of vaccination.

- Maintaining the continuous cold chain throughout the vaccination period is very important for effective implementation of the programme. Therefore, adequate cold chain facilities should be strengthened.

- Cold chain maintenance should be ensured while supplying vaccine at district or block level by way checking temperature monitoring card in the boxes.
• During storage of FMD vaccine doses in cold cabinets etc., cold chain maintenance should be ensured continuously by District/Block Veterinary officers.

• **Vaccination should only be started when all logistics are put in place.**

SMU will ensure strict compliance of the provisions under the Prevention and Control of Infectious and Contagious Diseases of Animals Act, 2009 and rules thereon either notified by Central Government or framed by the State Governments as empowered by the various provisions of the Act for effective implementation of the disease control programme.

• SMU will draw district/block-wise, village-wise vaccination programme and should indicate date of start of vaccination, duration and date of completion for further implementation by District and Block Monitoring unit. The interval of six monthly vaccination need to be maintained.

• SMU will ensure availability of trained manpower for carrying out vaccination and also ensure extension activities, training to field staff, publicity and awareness.

• Places where ever sufficient staff is not available, SMU should ensure for availability of manpower to be deployed from neighboring districts / co-operative societies/private organizations/ veterinary colleges/Universities etc.

• SMU will provide diagnostic facilities to all the laboratories engaged in the sero-surveillance and sero-monitoring work.

• SMU will help to establish liaison with concerned ICAR laboratories/ PDFMD for seromonitoring.

• SMU will evaluate impact of programme and constant review of the progress of project.

• SMU will submit the weekly report of progress of vaccination to GOI in a prescribed format.

• SMU will also submit the completion report of vaccination round to GOI in a prescribed format.

• SMU will ensure that vaccination programme should be carried out in Mission mode in shortest possible time period (within 21-30 days) for its effectiveness so as to build herd immunity and ensure vaccination of all left over animals and new introduction.

• It must be ensured that all susceptible animals, including pregnant ones, must be included in the vaccination programme. Fear of abortion due to vaccination, if any, must be alleviated through extensive Information and Education Campaign at the farmers’ level. Ensure complete vaccination of all stray cattle also.

• SMU should ensure for availability of stock of emergency medicines for immediate use as anti-shock treatment in a suspected case of anaphylactic reaction, if any.

• The proper identification of the animals and issuing of health cards for recording of vaccinated animals may also be ensured. Vaccination card need to be issued to individual farmers where ever the same has not been issued earlier.
- It should be ensured that separate disposable needle is used for each animal for vaccination. Syringe can be used for 5-10 animals depending upon the utility for the purpose of proper vaccination.
- SMU may also coordinate with neighboring States under FMD-CP for carrying out vaccination round simultaneously.
- SMU should arrange to regulate the entry of animals from other States only against a vaccination proof of 21 days ago. Wider publicity should be given to encourage the farmers to get the newly introduced animals vaccinated, preferably before their entry to the State. If not, at least immediately on arrival.

6.5 District Monitoring Unit (DMU):

- District Joint / Deputy Director of Animal Husbandry will be in-charge of the District Monitoring Unit (DMU) and will be the main executive unit in the entire implementation programme.
- DMU will be responsible for carrying out vaccination in the entire district as per schedule and prescribed procedures, collection of sera samples for sero-monitoring, animal identification and documentation.
- The DMU will be responsible for surveillance within the district during the entire project period and will investigate any suspected outbreaks of FMD and arrange for sending specimen for laboratory confirmation.
- DMU will also be responsible for training of staff engaged in vaccination programme well before the start of the programme and should prepare calendar of operation with the help of District Animal Husbandry officer and Block Officers.
- The DMU should ensure mass education/awareness campaign on FMD amongst the livestock farmers giving emphasis on economic impact of the disease and benefits likely to accrue due to preventive vaccination of their animals and timely reporting of the disease in case of its suspicion/occurrence.
- DMU will ensure working of the cold room/cabinets required for storage and cold chain maintenance of the vaccine at district head quarter.
- In case of failure of electricity, generator should be available to maintain the cold chain.
- At the time of supply of vaccine by suppliers at district level, maintenance of cold chain for vaccine should be ensured and temperature monitored card should also be seen.
- DMU will supervise vaccination programme and provide all necessary required infrastructure facilities like aprons, disposable syringes, needles, biological waste deposit bags, transportation arrangement, vaccine containers etc. to block officers as per scheme provisions.
- DMU should establish liaison with other agencies, co-operative department, Panchayati Raj Institutions for effective implementation of the programme.
• DMU will maintain the buffer stock of vaccine as per the requirement to ensure prompt delivery.
• DMU will compile epidemiological information and data of vaccination programme and various reports and submit to SMU as per the schedule.
• DMU with the help of District Polyclinic shall co-ordinate with respective Disease Investigation laboratories to collect pre and post vaccinal sera samples for sero-monitoring by ICAR/PD-FMD Labs.

6.6 Block Monitoring Unit/ Block Officers:

• Block Veterinary Officer at block level will ensure the supply of vaccine to field officers as per the calendar of vaccination. Village wise vaccination plan should be prepared in each block so as to start vaccination from border villages
• He should ensure availability of adequate vaccine stock as per eligible animal population and ensure maintenance of cold chain,
• He will ensure the pre-requisite of the vaccination programme like trained manpower, vaccine carriers, syringes, needles, biological waste deposit bags, personnel protective equipments (Apron, hand glove, plain protecting glass), transport of vaccine before starting actual vaccination in the block.
• Field Veterinary Officer should obtain the vaccine doses from District Veterinary Officer (DVO) or Block Veterinary Officer (BVO) in thermocol boxes with ice gel icepacks. The gel packs should have been stored for 48 hrs in -20°C cold cabinet.
• Block Officer will help in collecting pre-vaccinated and post-vaccinated sera for laboratory analysis.
• He will provide publicity material at local level such as leaflets, pamphlets, posters etc, to village panchayat, cattle market authorities and sugar factory authorities.
• He should take support of BDO, Local leaders and key person in the areas for effective implementation of programme.
• In case of suspicion of outbreak or confirmation of FMD outbreak, Block Veterinary Officer should implement all necessary control and containment measures immediately and also report the suspected/ confirmed outbreak through National Disease Reporting System (NADRS).
• Officer in-charge of veterinary institutes with his team will vaccinate all eligible animals as per scheme norms.
• During the vaccination campaign, it should be ensured that vaccine bottles are continuously kept in vaccine carriers for maintenance of cold chain.
• Vaccine bottle once opened (Punctured) should be used on the same day to avoid the deterioration of the potency/quality of vaccine.
• Care should be taken to avoid the spillage of vaccine during the filling up of syringe.
• It is possible that while carrying out the vaccination the animal becomes ferocious or get disturbed leading to spoilage of vaccine. In such cases it should be ensured that those animals are again vaccinated properly.
• Vaccinator will provide vaccination card to each and every owner duly signed by veterinary officer. Proper disposal of used/wastage material also need to be ensured.
• Officer In-charge of veterinary Institutes will monitor the vaccination programme in all the villages under his jurisdiction and ensure participation of village officers, panchayat, gram sevak, key person and local leaders of the village.
• He will provide information about control programme, its importance and impacts to villagers through discussion, leaflets, pamphlets, posters, visual aids during training and awareness programmes etc so as to encourage the farmers to undertake vaccination of their animals.

7. Vaccination in Cattle Market and sugar factory areas-

• Regular vaccination of unvaccinated animals or not having recorded history of vaccination shall be carried out in all the weekly cattle markets located throughout the year even though the entire state is under regular vaccination under FMD-CP.
• Separate team of vaccinators should be provided at cattle market to ensure regular vaccination.
• Regular vaccination shall also be carried out in animals used for transportation of sugar cane in all the sugar factory areas located in selected districts if not vaccinated under the regular programme and not carrying vaccination certificate.

8. Publicity and Awareness campaign

• Wide publicity about the project will be conducted in such a way that all the target rural population will get message of importance of vaccination, disease control and prevention. Emphasis should be given on economic impact of FMD on rural economy.
• Both print and electronic media such as TV, radio, community radio, newspapers-posters-leaflets-wall painting-banners etc. should be effectively made use for awareness of vaccination dates, movement control of animals, importance of disease etc.
• The vaccinators/Field veterinary officers should visit the village in advance and inform the farmers about the vaccination programme and creating awareness for undertaking vaccination.
9. Sero-monitoring

- Sero-monitoring of FMD control programme will be done by PDFMD/ICAR using Liquid Phase Blocking ELISA test, which is developed by PDFMD, IVRI Campus Mukteshwar.
- Veterinary officer should ensure collection of 10 sera samples each from cattle and buffalo prior to vaccination from 10 randomly selected villages.
- After Vaccination on 30th day, again equal number of serum samples should be collected to assess the sero-conversion as under:

![Monitoring of Immune response](image)

- PD-FMD should ensure timely testing of pre and post vaccinal serum samples and provide results to this Department and State Governments well before start of next round so as to effectively monitor the implementation of the programme in the State.
- Apart from the routine sero-monitoring as per plan given above, random samples can also be collected by State monitoring team on post vaccination for internal assessment of vaccination coverage in areas considered susceptible to FMD outbreaks so as to take necessary corrective measures

10 Outbreaks reporting and management

- In order to have an early warning system in place, the State Government is required to undertake surveillance of FMD.
- Department has also initiated National Animal Disease reporting system to ensure prompt disease reporting. Therefore, in the event of any suspicion of outbreak, it should be reported immediately as per the formats available under NADRS. The state should take an immediate action to control and contain the disease as under:
  - Isolation and containment of sick animals and their treatment
• Ring vaccination (5-10km) radius around the affected village/area to cover all the susceptible animals including sheep, goats, pigs etc. to prevent virus transmission
• Restriction/control of movement of livestock products and livestock from infected area to disease free area/zone to prevent the spread of the infection.
• Disinfection of the premises / infected area where animals are kept with 4% sodium carbonate / 2% sodium hydroxide (NaOH) solution and ensure implementation of biosecurity measures.
• Monitoring of SP and NSP antibodies to restore disease free status.
• Trace-back and other veterinary investigations leading to understanding the epidemiology of particular outbreak(s).
• If required, experts from Central laboratories working on FMD may also be requested for detailed epidemiological as well as molecular diagnosis.
Annexure I
Report prior to start of FMD-CP Vaccination
1. State
2. Phase

<table>
<thead>
<tr>
<th>No.</th>
<th>Names of District</th>
<th>Doses</th>
<th>Logistics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total No. of doses of vaccine required for round as per population</td>
<td>Total No. of doses of vaccine available from the previous round of vaccinations</td>
<td>No. of doses of vaccine required for next round (after deducting balance)</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Signature

Name & address of the Reporting Officer
Annexure II

Weekly Progress Report on Vaccination under FMD-CP

<table>
<thead>
<tr>
<th>No.</th>
<th>Names of Districts under FMD-CP</th>
<th>Details of Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Livestock population to be vaccinated (Species wise details)</td>
<td>No. of vaccinated during the day</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td>2</td>
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Signature
Name & address of the Reporting Officer
# Annexure III

**Report on Completion of Phase of Vaccination under FMD-CP**

1. State
2. Phase

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Names of the district</th>
<th>Vaccination</th>
<th>Doses</th>
<th>Manpower Utilization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Targeted animal population</td>
<td>No. of pre vaccination sera samples collected</td>
<td>No. of post vaccination sera samples collected</td>
<td>Start date</td>
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<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</tbody>
</table>

Signature

Name & address of the Reporting Officer
Annexure IV

FMD CONTROL PROGRAMME, GOVERNMENT OF INDIA

Submission of samples for sero monitoring

State: 
District: 

Taluka: 
Village: 

Round of vaccination:

Vaccine manufacturer:

Batch Number of vaccine:

Date of Expiry:
Date of vaccination:

Date of sample Collection:
Pre / Post

Details of Samples:

<table>
<thead>
<tr>
<th>No.</th>
<th>Farmers name</th>
<th>Sample ID</th>
<th>Tag No.</th>
<th>Sex M/F</th>
<th>Animal Type</th>
<th>Age in years</th>
</tr>
</thead>
<tbody>
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Signature
Name & address of the Reporting Officer
Annexure V

FMD CONTROL PROGRAMME, GOVERNMENT OF INDIA

Outbreak Statement
(To be sent after recovery of outbreak)

1) State :

2) District:

3) Taluka:

4) Village :

5) Outbreak Details :

6) Date of Report :

7) Date of 1st case Noticed :

8) Date of last case Noticed :

9) Animal Population :

<table>
<thead>
<tr>
<th>Cattle</th>
<th>Buffalo</th>
<th>Sheep</th>
<th>Goat</th>
<th>Pigs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

10) Number of animals vaccinated before outbreak :

11) Vaccine Manufacturer :

12) Batch number of vaccine used :

13) Number of animals affected :

<table>
<thead>
<tr>
<th>Details</th>
<th>Cattle</th>
<th>Buffalo</th>
<th>Sheep</th>
<th>Goat</th>
<th>Pigs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccinated</td>
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<tr>
<td>Non Vaccinated</td>
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<td></td>
</tr>
</tbody>
</table>

17
14) Severity of disease: Severe / mild / Mouth Lesions / Foot lesions

15) Number of FMD samples Collected during outbreak:

16) Virus Typing result:

17) Source of Infection:

18) Details of Economic losses due to:

   i) Treatment:

   ii) Death of animals:

   iii) Working ability of bullocks:

   iv) Production losses

   v) Cost of Ring vaccination if done

   vi) Any Other:

19) Any other information:

20) Details of Ring vaccination:

   Date started:

   Date Completed:

   Vaccine manufacturer:

   Vaccine batch:

   Number of animals vaccinated:

<table>
<thead>
<tr>
<th>Cattle</th>
<th>Buffalo</th>
<th>Sheep</th>
<th>Goat</th>
<th>Pigs</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Signature of FAO/VO

18
<table>
<thead>
<tr>
<th>States</th>
<th>Vaccination round</th>
<th>Funds released/revalidated during 2016-17 as Central Share (Rs. in lakh)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kerala</td>
<td>03.06.2016 to 28.06.2016</td>
<td>04.12.2016 to 29.12.2016</td>
<td>99.8708 Vaccination has already been delayed in the State</td>
</tr>
<tr>
<td>Goa</td>
<td>06.06.2016 to 27.06.2016</td>
<td>07.12.2016 to 28.12.2016</td>
<td>7.16 (only revalidation)</td>
</tr>
<tr>
<td>Telangana</td>
<td>16.06.2016 to 05.07.2016</td>
<td>17.12.2016 to 06.01.2017</td>
<td>709.3058 Vaccination has already been delayed in the State</td>
</tr>
<tr>
<td>Delhi</td>
<td>11.07.2016 to 30.07.2016</td>
<td>12.01.2017 to 31.01.2017</td>
<td>6.77 (only revalidation)</td>
</tr>
<tr>
<td>Maharashtra</td>
<td>11.07.2016 to 10.08.2016</td>
<td>12.01.2017 to 11.02.2017</td>
<td>1606.872 Vaccination has already been delayed in the State</td>
</tr>
<tr>
<td>Bihar</td>
<td>15.07.2016 to 14.08.2016</td>
<td>16.01.2017 to 15.02.2017</td>
<td>1327.9 (only revalidation)</td>
</tr>
<tr>
<td>Rajasthan</td>
<td>15.07.2016 to 14.08.2016</td>
<td>16.01.2017 to 15.02.2017</td>
<td>861.127 Vaccination has already been delayed in the State. State has not carried out vaccination of all cattle and buffaloes in earlier rounds</td>
</tr>
<tr>
<td>Andhar Pradesh</td>
<td>01.08.2016 to 30.08.2016</td>
<td>02.02.2017 to 04.03.2017</td>
<td>1146.143</td>
</tr>
<tr>
<td>Gujarat</td>
<td>01.08.2016 to 30.08.2016</td>
<td>02.02.2017 to 02.03.2017</td>
<td>1264.636</td>
</tr>
<tr>
<td>Punjab</td>
<td>01.08.2016 to 30.08.2016</td>
<td>02.02.2017 to 02.03.2017</td>
<td>559.718</td>
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<tr>
<td>Puducherry</td>
<td>01.09.2016 to 20.09.2016</td>
<td>02.03.2017 to 21.03.2016</td>
<td>15.54</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>01.09.2016 to 30.09.2016</td>
<td>02.03.2017 to 31.03.2016</td>
<td>769.919</td>
</tr>
<tr>
<td>Uttar Pradesh</td>
<td>01.09.2016 to 30.09.2016</td>
<td>02.03.2017 to 31.03.2016</td>
<td>3925.425</td>
</tr>
<tr>
<td>Dadra &amp; Nagar Haveli</td>
<td>01.10.2016 to 20.10.2016</td>
<td>2.04.2017 to 21.4.2017</td>
<td>0 No UC received for 2015-16 and no action plan for 2016-17</td>
</tr>
<tr>
<td>Daman &amp; Diu</td>
<td>01.10.2016 to 20.10.2016</td>
<td>2.04.2017 to 21.4.2017</td>
<td>0 No UC received for 2015-16 and no action plan for 2016-17</td>
</tr>
<tr>
<td>Lakshdweep</td>
<td>01.10.2016 to 20.10.2016</td>
<td>2.04.2017 to 21.4.2017</td>
<td>0 No UC received for 2015-16 and no action plan for 2016-17</td>
</tr>
<tr>
<td>Haryana</td>
<td>01.10.2016 to 30.10.2016</td>
<td>02.04.2017 to 1.5.2017</td>
<td>582.5294</td>
</tr>
</tbody>
</table>