

Q-ALPACA PROGRAM - FORM Q4 – POST-MORTEM EXAMINATION REPORT

To comply with Q-Alpaca guidelines, your overseeing veterinarian **MUST** conduct a post-mortem examination of:

- (a) **Any alpaca between 12 months and 15 years of age** that dies or is euthanased for any reason;
- (b) **Any cria under 12 months** that is showing signs of emaciation or diarrhoea that dies or is euthanased; and
- (c) Any alpaca that is **15 years of age or older** showing clinical signs consistent with Johnne's disease. The overseeing veterinarian must be involved in this determination (refer Part B).

Alpacas that have died or been euthanased directly as a result of dog attack are exempt from a post-mortem, unless they are showing clinical signs consistent with Johnne's disease. The overseeing veterinarian must be involved in this determination (refer Part B). For all other causes of trauma, a post-mortem must be conducted.

Both Parts A and B of this form must be completed, irrespective of exemptions due to age or cause of death.

| <u>PART A</u> | | | | |
|---|------------------------|--|-------------|--|
| <u>THIS SECTION IS TO BE COMPLETED BY THE OWNER / MANAGER</u> | | | | |
| Identity of the person completing this section | | | | |
| Name | | | | |
| Address | | | | |
| Owner of alpacas on the property? | Yes | | No | |
| Manager of the property? | Yes | | No | |
| Q-Alpaca Program Membership No. | | | | |
| Address of property on which the death occurred | | | | |
| Date of death | | | | |
| Was the animal | Found dead? | | Euthanised? | |
| IAR number, ID number and name of dead alpaca (or just name if not registered) | | | | |
| Colour of dead alpaca | | | | |
| Sex of dead alpaca | | | | |
| Age of dead alpaca | | | | |
| Date of last 5 in 1 vaccination | | | | |
| Do you treat your alpaca for intestinal worm infestation? | Yes | | No | |
| If YES, state: | Date of last treatment | | | |
| | Medication used | | | |
| | Dose | | | |
| Do you treat your alpaca for liver fluke? | Yes | | No | |
| If YES, state: | Date of last treatment | | | |
| | Medication used | | | |
| | Dose | | | |
| Do you monitor your alpaca for worm infestation by conducting Faecal Egg Counts (FECs)? | Yes | | No | |
| If YES, state: | Date of last test | | | |
| | Please attach results | | | |

| <u>PART B</u> | | | | |
|---|-----|--|----|--|
| <u>THIS SECTION TO BE COMPLETED BY THE VETERINARIAN CONDUCTING THE POST-MORTEM EXAMINATION</u> | | | | |
| Animal name, IAR number, ID number | | | | |
| Name of stud | | | | |
| <input type="checkbox"/> <i>(tick if applicable)</i> The alpaca was less than 12 months of age and showed no signs of emaciation or diarrhoea | | | | |
| <input type="checkbox"/> <i>(tick if applicable)</i> The alpaca was at least 15 years of age and showed no signs consistent with Johne's disease | | | | |
| <input type="checkbox"/> <i>(tick if applicable)</i> The alpaca died directly as a result of dog attack & showed no signs consistent with Johne's disease | | | | |
| Was there any clinical or pathological evidence of: | | | | |
| Johne's disease | Yes | | No | |
| Intestinal parasites | Yes | | No | |
| Liver fluke infestation | Yes | | No | |
| Gastric ulceration | Yes | | No | |
| Chronic liver disease | Yes | | No | |
| Coccidiosis | Yes | | No | |
| Congenital abnormality | Yes | | No | |
| <i>Summary of post-mortem findings</i> | | | | |
| <i>Provisional diagnosis</i> | | | | |
| <i>Name and address of veterinarian completing this section</i> | | | | |
| Date | | | | |

Post this completed form to

Q-Alpaca Program

Australian Alpaca Association Ltd.

P O Box 5108, BRADDON ACT 2612

OR E-mail to

info@alpaca.asn.au