

**VETERINARY HEALTH CERTIFICATE  
EXPORT OF GOATS TO NICARAGUA**

EXPORTER: \_\_\_\_\_

IMPORTER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**A. Owner's Declaration**

I, \_\_\_\_\_, being the owner of the animals identified below, declare that:

1. the animals have been resident of Canadian farms, outside the Okanagan Valley, British Columbia, for their entire life;
2. the newborn goats have not ingested fresh (non-pasteurized) colostrum from the dam;
3. the young goats were fed with pasteurized caprine colostrum, were reared isolated from caprine arthritis encephalomyelitis-positive goats and were fed artificial diets that did not contain raw goat milk.

\_\_\_\_\_  
Date\_\_\_\_\_  
Signature of Owner**B. Veterinary Certification**

I, the undersigned, Official Veterinarian duly authorized by the Government of Canada, certify that after due enquiry and to the best of my knowledge and belief, the animals described below meet the following requirements:

1. I have no reason to doubt the truth of the owner's declaration.
2. Canada is free from foot and mouth disease, vesicular stomatitis, and goat pox, and bluetongue with the exception of the Okanagan Valley of British Columbia.
3. In the sixty (60) days previous to the date of shipment of the animals, the farm of origin and the adjacent farms or establishments in a radius of at least sixteen (16) kms. were not under quarantine for contagious or infectious diseases or transmissible diseases that affect goats.
4. In the sixty (60) days previous to the date of shipment of the animals, they were not exposed to vesicular stomatitis or any contagious or infectious diseases or transmissible diseases, and in a radius of 2 km. of the farm of origin, there has been no cases of caseous lymphadenitis and contagious ecthyma for at least the last two (2) months previous to the shipment.
5. The areas from which the animals originate are free from hydatidosis, rickettsiosis, and sarcoptic mange.
6. In the area of origin, there has been no incidence of anthrax, blackleg (*Clostridium chauveii*) and malignant edema (*Clostridium septicum*), or every six (6) months, the entire population of goats from the farm of origin were vaccinated.
7. On the farm of origin of the goats, clinical cases of paratuberculosis were not detected in the six (6) months previous to the date of shipment of the animals.
8. At the time of shipment, the animals were inspected at the farm of origin by an official veterinarian or a veterinarian accredited by the Government of Canada, and did not exhibit any tumours, fresh or healing wounds, or any sign of infectious, contagious, or communicable disease, or external parasites.
9. At the time of shipment, the animal(s) was/were inspected at the point of departure from Canada by an official veterinarian of the Government of Canada, and did not exhibit any tumours, fresh or healing wounds, or any sign of infectious, contagious, or communicable disease, or external parasites.
10. Prior to shipment of the goats, the vehicle(s) in which the animals were transported from the point of origin to the country of destination were washed and disinfected with products approved by the Government of Canada.

**C. Pre-Export Quarantine**

The animals were individually identified and were kept under isolation on the farm of origin and remained separated from other animals not subject to exportation, for a period of thirty (30) days.

**D. Flock Testing**

During the pre-export quarantine period, all the animals destined for export were subjected to the following tests with negative results:

- i) paratuberculosis - complement fixation test;
- ii) tuberculosis - intradermal inoculation of tuberculin in the caudal fold;

NOTE: collect the samples for paratuberculosis before applying the tuberculin test.

- iii) brucellosis - buffered plate agglutination test for brucella abortus;
- iv) leptospirosis - serum agglutination test at serum dilution of 1:200;

**E. Immunization**

Fifteen (15) days prior to the shipment, the animals found negative for leptospirosis as per D(iv), received the following immunogen: leptospirosis (bacterin, against five strains: L. canicola, L. grippotyphosa, L hardjo, L. icterohemorrhagiae and L. pomona.

Date of vaccination \_\_\_\_\_ Brand name of product \_\_\_\_\_

Lot No. \_\_\_\_\_ Expiration date \_\_\_\_\_

\_\_\_\_\_  
Signature of Treating Veterinarian

**F. Antiparasitic Treatment**

Within fifteen (15) days prior to the date of shipment, the animals were treated for internal and external parasites with products authorized by the Government of Canada.

**Internal Parasites**

Date of treatment \_\_\_\_\_ Brand name of product \_\_\_\_\_

Lot No. \_\_\_\_\_ Expiration date \_\_\_\_\_

**External Parasites**

Date of treatment \_\_\_\_\_ Brand name of product \_\_\_\_\_

Lot No. \_\_\_\_\_ Expiration date \_\_\_\_\_

\_\_\_\_\_  
Signature of Treating Veterinarian

