COMMISSION DECISION

of 3 February 1984

laying down the codified form for the notification of animal diseases pursuant to Council Directive 82/894/EEC

(84/90/EEC)

THE COMMISSION OF THE EUROPEAN COMMUNITIES,

Having regard to the Treaty establishing the European Economic Community,

Having regard to Council Directive 82/894/EEC of 21 December 1982 on the notification of animal diseases within the Community [1], and in particular Article 5 and Annex II thereof,

Whereas it is necessary to lay down the codified form by which the information according to Annex II of Directive 82/894/EEC must be sent to the Member States and the Commission ;

Whereas it is necessary in this system to maintain the confidentiality of the information by using common code numbers ;

Whereas, by using a common notification system, it is possible to provide the information indicated by Council Directive 80/217/EEC [2], as last amended by Directive 80/1274/EEC [3], and in particular Article 12 and Annex III thereof ;

Whereas the measures provided for in this Decision are in accordance with the opinion of the Standing Veterinary Committee,

HAS ADOPTED THIS DECISION :

Article 1

For the purpose of animal disease notification procedures the information shall be transmitted in the codified form laid down in the Annexes hereto.

Article 2

This Decision is addressed to the Member States.

Done at Brussels, 3 February 1984.

For the Commission

Poul DALSAGER

Member of the Commission

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[1] OJ No L 378, 31. 12. 1982, p. 58.
[2] OJ No L 47, 21. 2. 1980, p. 11.
[3] OJ No L 375, 31. 12. 1980, p. 75.

ANNEX I

ANIMAL DISEASE NOTIFICATION — FORM 1

NOTIFICATION TO THE COMMISSION AND TO THE OTHER MEMBER STATES OF OUTBREAKS OF DISEASE IN A MEMBER STATE, IN ACCORDANCE WITH DIRECTIVE 82/894/EEC (1)

	Information required		Text to be transmitted
	Commission reference number		DGVI/B4/ADN1
	Date of dispatch (*) (day/month/year)		__/__/__
	Time of dispatch (*) (24-hour clock)		____
	Country of origin (*)		__
	Disease (*)		__
	Serial number of outbreak (*) (year/number)		__/____
	Disease type/sub-type		____
	Region affected (*)		___
	If restrictions affect another region specify that region		___
	Type of outbreak (*) (primary '1' or secondary '2')		_
	Reference number of outbreak to which this outbreak relates		__/__/__/____
	Origin of disease		__
	Control measures : Use one or more sequentially according to number of control measures to be specified		__ __ __ __ __
	Date of suspicion of disease on holding (day/month/year)		__/__/__
	Number of susceptible animals on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Date of confirmation of disease on holding (*) (day/month/year)		__/__/__
	Number of animals clinically affected on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Estimated date of first infection on holding (day/month/year)		__/__/__
	Number of animals that have died of the disease on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	(Estimated) date of completion of slaughter (day/month/year)		__/__/__
	Number of animals slaughtered on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	(Estimated) date of completion of destruction (day/month/year)		__/__/__
	Numbers of carcases destroyed :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Swine fever only — Distance from nearest pig holding (in metres)		____
	Number and type of pigs on the infected holding :	— Breeding pigs	___
		— Piglets	___
		— Fattening pigs	___
	Swine fever only — Method used for diagnosis		__
	Number and type of pigs clinically affected on the holding :	— Breeding pigs	___
		— Piglets	___
		— Fattening pigs	___
	End of coded section		
	Free text (if required)		

(1) Secondary outbreaks only need to be notified to the Commission.

NB : Lines marked with an asterisk (*) must be completed, otherwise notification will be rejected.

ANNEX II

ANIMAL DISEASE NOTIFICATION — FORM 2

NOTIFICATION TO THE COMMISSION AND TO THE OTHER MEMBER STATES OF ADDITIONAL INFORMATION OR CORRECTION OF INFORMATION IN ACCORDANCE WITH DIRECTIVE 82/894/EEC (1)

	Information required		Text to be transmitted
	Commission reference number		DGVI/B4/ADN2
	Date of dispatch (*) (day/month/year)		__/__/__
	Time of dispatch (*) (24-hour clock)		____
	Country of origin (*)		__
	Disease (*)		__
	Serial number of outbreak (*) (year/number)		__/____
	Disease type/sub-type		____
	Region affected (*)		___
	If restrictions affect another region specify that region		___
	Type of outbreak (*) (primary '1' or secondary '2')		_
	Reference number of outbreak to which this outbreak relates		__/__/__/____
	Origin of disease		__
	Control measures : Use one or more sequentially according to number of control measures to be specified		__ __ __ __ __
	Date of suspicion of disease on holding (day/month/year)		__/__/__
	Number of susceptible animals on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Date of confirmation of disease on holding (*) (day/month/year)		__/__/__
	Number of animals clinically affected on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Estimated date of first infection on holding (day/month/year)		__/__/__
	Number of animals that have died of the disease on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Date of completion of slaughter (day/month/year)		__/__/__
	Number of animals slaughtered on holding :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Date of completion of destruction (day/month/year)		__/__/__
	Numbers of carcases destroyed :	— Cattle	____
		— Pigs	____
		— Sheep	____
		— Goats	____
		— Poultry	____
	Swine fever only — Distance from nearest pig holding (in metres)		____
	Number and type of pigs on the infected holding :	— Breeding pigs	____
		— Piglets	____
		— Fattening pigs	____
	Swine fever only — Method used for diagnosis		__
	Number and type of pigs clinically affected on the holding :	— Breeding pigs	____
		— Piglets	____
		— Fattening pigs	____
	End of coded section		
	Free text (if required)		

(1) *Secondary outbreaks only need to be notified to the Commission.*

NB : Lines marked with an asterisk (*) must be completed, otherwise notification will be rejected.

ANNEX III

ANIMAL DISEASE NOTIFICATION — FORM 3

NOTIFICATION TO THE COMMISSION AND TO THE OTHER MEMBER STATES OF LIFTING OF RESTRICTIONS FROM A REGION (OR REGIONS) IN ACCORDANCE WITH DIRECTIVE 82/894/EEC

	Information required	Text to be transmitted
	Commission reference number	DGVI/B4/ADN3
	Date of dispatch (*) (date/month/year) Time of dispatch (*) (24-hour clock) Country of origin (*) Disease (*)	__/__/__ ____ __ __
	Region (*) Date restrictions lifted (*) (day/month/year) Time restrictions lifted (*) (24-hour clock)	___ __/__/__ ____
	Region Date restrictions lifted (day/month/year) Time restrictions lifted (24-hour clock)	___ __/__/__ ____
	Region Date restrictions lifted (day/month/year) Time restrictions lifted (24-hour clock)	___ __/__/__ ____
	Region Date restrictions lifted (day/month/year) Time restrictions lifted (24-hour clock)	___ __/__/__ ____
	Repeat as often as necessary according to the above format	
	End of coded section	
	Free text (possible observations, etc.)	

NB: Lines marked with an asterisk (*) must be completed, otherwise notification will be rejected.

ANNEX IV

ANIMAL DISEASE NOTIFICATION — FORM 4

NOTIFICATION FROM THE COMMISSION TO THE MEMBER STATES OF OUTBREAKS OF DISEASE WITHIN THE COMMUNITY IN ACCORDANCE WITH DIRECTIVE 82/894/EEC

	Commission reference number	DGVI/B4/ADN4
	Date of dispatch (date/month/year) Time of dispatch (24-hour clock) Country under report Disease Period of report (from/to)	__ __/__ __/__ __ __ __ __ __ __ __ __ __ __ __/__ __/__ __ to __ __/__ __/__ __
	Total number of outbreaks (per country) Total number of outbreaks (per region) and so on as required	Primary: __ __ __ Secondary: __ __ __ Region: __ __ __ / Primary: __ __ / Secondary: __ __ __ __ __ / __ __ / __ __ __ __ __ / __ __ / __ __
	Total : — Cattle — Pigs — Sheep — Goats — Poultry	(1) (2) (3) (4) (5) __
	Information on serial number Information on serial number Information on serial number Information on serial number Information on serial number *and so on (as required)*	(6) (7) (8) (9) (10) Swine fever only: (11) (12) (13) __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __ __ __/__ __ __ __ / __ __ __ / __ / __ __/__ __/__ __ / __ __ / __ __/__ __ __ __ / __ __ / __ __ __ __
	Swine fever only Total number : — Breeding pigs — Piglets — *Fattening pigs*	(14) (15) __ __ __ __ __ / __ __ __ __ __ __ __ __ __ __ / __ __ __ __ __ __ __ __ __ __ / __ __ __ __ __
	End of coded section	

Each group above is repeated as required for other diseases and for each country.

(1) Total number susceptible animals on holding(s).
(2) Total number clinically affected animals on holding(s).
(3) Total number dead animals on holding(s).
(4) Total number slaughtered animals on holding(s).
(5) Total number destroyed animals on holding(s).
(6) Serial number (year/number).
(7) Region.
(8) Type of outbreak (primary or secondary).
(9) Date of confirmation of disease on holding.
(10) Origin of disease.
(11) Serial number to which this outbreak relates.
(12) Method used for diagnosis.
(13) *Distance from nearest pig holding.*
(14) Total numbers and types of pig on holdings.
(15) Total numbers and types of pig clinically affected on holdings.