



Wisconsin Department of Agriculture, Trade and Consumer Protection

Division of Animal Health

PO Box 8911, Madison, WI 53708-8911

Phone: 608-224-4872

Fax: 608-224-4871

GUIDANCE DOCUMENT

JohnesVetVaccineTraining

This guidance document is based on Wis. Stat. ch. 95 and chapter(s) ATCP 10 Wis. Admin. Code. This document is intended solely as guidance, and does not contain any mandatory requirements except where requirements found in statute or administrative rule are referenced. This guidance does not establish or affect legal rights or obligations, and is not finally determinative of any of the issues addressed.

Form and informational materials for Paratuberculosis (Johne's disease) vaccination training certification.

<i>Darlene M. Konkle</i>	11/24/2020
Dr. Darlene Konkle - Administrator Division of Animal Health	DATE

Contributors:



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Division of Animal Health, Bureau of Animal Disease Control
 2811 Agriculture Drive, PO Box 8911, Madison, WI 53708-8911 Phone: 608-224-4872



Paratuberculosis (Johne's disease) Vaccination Training Certification Application

Sec. ATCP 10.17 and 10.20

Information provided for the Johne's disease control program is CONFIDENTIAL as provided under Wis. Stat. s. 95.232. However, personally identifiable information as defined under Wis. Stat. s. 19.62(5), which has been provided to the department for licensure or other purposes, may be subject to inspection under Wisconsin's Open Records Law, Wis. Stat. ss.19.21-19.39. Upon request, this application can be made accessible to persons with disabilities.

Veterinarian	WI Veterinary License #
Representing (Veterinary Practice/Clinic)	Phone #
Address	

I have completed a training course, which includes, but is not limited to, the procedure for vaccination and identification of calves and discussion of the principles of the Wisconsin Johne's Disease Vaccination Program. I have read and understand the provisions on the reverse side of this form.

Veterinarian's Signature	Date
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I certify that the training was completed on _____ (date) and this veterinarian is eligible for certification to perform approved Johne's disease vaccination within the State of Wisconsin.

State District Veterinarian's Signature	Date
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For office use only:

Johne's Disease Vaccination Certificate Number:	35JC-	Expiration Date
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It is essential that the following be fully understood by practitioners who will be using Johne's disease vaccine under Department certification:

A. The Vaccine:

1. Must be administered only by accredited veterinarians who have been trained and have a Johne's disease vaccination certification number issued by the Department.
2. Shall be a killed whole cell *Mycobacterium paratuberculosis* vaccine approved by the Department.
3. Must be carefully handled. Accidental human inoculation can result in serious problems. In case of accidental inoculation, contact YOUR HEALTH CARE PROVIDER IMMEDIATELY and the Division of Animal Health office at 608/224-4872.
4. Shall be administered subcutaneously to the brisket area of each calf. Administration of the vaccine in locations other than the recommended site increases the risk of developing unsightly granulomas.
5. Shall be administered to calves 35 days of age or younger. Administration of the vaccine at ages greater than 35 days is prohibited due to possible interference with tuberculin testing.
6. Should be stored according to manufacturer's recommendations.
7. Only the permit holder may order the vaccine from Boehringer Ingelheim Vetmedica, Inc.

B. Herds must meet the following requirements in order to be eligible for Johne's disease vaccination:

1. Paratuberculosis infection has been confirmed in the herd by an organism detection-based test approved by the Department. Wis. Admin. Code § ATCP10.15(3).
2. A whole herd negative tuberculosis test (all animals > 24 months of age) has been completed within 60 days prior to signing the vaccination agreement and all future purchased test eligible additions will be test-negative for tuberculosis.
3. A signed vaccination agreement and approved Johne's disease risk assessment and herd management plan are on file with the Department.

C. The Vaccinates must:

1. Be replacement heifer and bull calves 35 days of age or younger.
2. Be identified by placement of a J-series official eartag in the left ear (or other official identification approved by the Department) and a legible tattoo in the left ear consisting of a number based on the quarter of the calendar year the calf was vaccinated (1, 2, 3, or 4), followed by the letter J, and the last numeral of the year in which the animal was vaccinated.

D. The Herd Owner must:

1. Have a Johne's disease risk assessment and herd management plan completed by a Johne's disease certified veterinarian and submitted to the Department every three years.
2. Ensure that all purchased replacement test eligible stock are tuberculin test-negative within 60 days before introduction into the herd.

E. The Herd Veterinarian must:

1. Complete a Johne's disease veterinary certification program approved by the Department. To maintain active certification, a recertification program approved by the Department must be completed every five years.
2. File a report of vaccination (AH-JD-2516) with the Department within 15 days after the date of vaccination. This record will include official individual identification number, sex, and birth date of each calf vaccinated.
3. Perform or ensure that a Wisconsin Johne's disease certified veterinarian performs a review of the Johne's disease risk assessment and herd management plan with the herd owner every three years and submit to the Department for review.