

The banner features a background image of a globe with a focus on the African continent. The acronym 'WAHIS' is written in large, bold, red serif letters across the top.

WAHIS

World Animal Health Information System
Système mondial d'information zoosanitaire
Sistema Mundial de Información Zoosanitaria

General Presentation of the 's World Animal Health System

WAHIS

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Head, Animal Health Information Department

Notification : steps in reporting (for both terrestrial & aquatic animals)

- **Immediate notification** of disease, infection or unusual epidemiological events
- **Weekly reports** : follow-up to the immediate notification
- **Final** report :
 - if the outbreaks have ended
 - if the disease becomes endemic
- **Six-monthly** (including, with monthly breakdown for OIE listed diseases/infections present in the country)
- **Annual** report

Notification : how to notify ?

- Standardised reporting forms (taking into account the specificities between terrestrial & aquatic animals)

Paper forms

Online web application

**WAHIS web
application**

Notification and epidemiological information

Events of epidemiological significance that should
be immediately notified by Members Countries to
the OIE Central Bureau (started in 2005)

Basis of the

OIE's Early Warning System

Forms for immediate notification & follow-up

Terrestrial animal disease



Reason for immediate notification

9.	Reason for immediate notification (tick one)	
	a. First occurrence of a listed disease or infection in a country or zone/compartment	<input checked="" type="checkbox"/>
	b. Re-occurrence of a listed disease or infection in a country, zone/compartment following a report declaring the outbreak(s) ended	<input type="checkbox"/>
	c. First occurrence of a new strain of a pathogen associated with a listed disease in a country or zone/compartment	<input type="checkbox"/>
	d. A sudden and unexpected increase in the distribution, incidence, morbidity or mortality of a listed disease prevalent within a country or zone/compartment	<input type="checkbox"/>
	e. An emerging disease with significant morbidity or mortality, or zoonotic potential	<input type="checkbox"/>
	f. Evidence of a change in the epidemiology of a listed disease (including host range, pathogenicity, strain, etc.) in particular if there is a zoonotic impact	<input type="checkbox"/>

Before making a choice, please consult your country 's historical data provided to OIE (Handistatus II, WAHID)

Description of the disease – Nature of the diagnosis

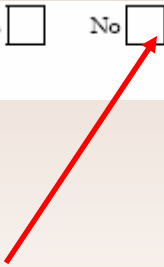
10.	|_____|			11.	|_____|				
	Disease name, name of pathogen or, for an unknown emerging disease, name of event				OIE disease code if any				
12.	|_____|								
	Precise identification of agent (strain, serotype, etc.) where applicable								
13.	|_|_|/|_|_|/|_|_|_|_|	14.	|_|_|/|_|_|/|_|_|_|_|	15.	Clinical disease	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Date (dd/mm/yyyy) of first confirmation of the event		Date (dd/mm/yyyy) of start of the event						
16.	Nature of diagnosis	Suspicion	<input type="checkbox"/>	Clinical	<input type="checkbox"/>	Post-mortem	<input type="checkbox"/>	Laboratory	<input type="checkbox"/>

Follow-up report

Update of event evolution

What is the follow-up to give to this follow-up report ?

31. Final report Yes No If "yes" => Event ended Yes No
If "no" => Continuing notification using the six-monthly report Yes



NO : Follow-up reports

What is the follow-up to give to this follow-up report ?



31. Final report

Yes

No

If "yes" =>

Event ended

Yes

No

If "no" =>

Continuing notification using the six-monthly report

Yes

YES, the event is ended

NO, the event is not ended, the disease has become endemic. The notification will continue using the six-monthly reports.

WAHIS web application

Home - OIE World Animal Health Information System - Microsoft Internet Explorer

Echier Edition Affichage Favoris Outils ?

Précédente Revenir Arrêter Recharger Favoris Média

Rechercher Favoris Média

Liens »

WAHIS World Animal Health Information System
Système mondial d'information zoonitaire
Sistema Mundial de Información Zoonitaria

OIE Home Page Language: English

Oie

World Animal Health Information System (WAHIS)

Demonstration Site

Username:
dchairsan

Password:
●●●●●●●●

Login [Forgot password?](#)

The OIE is in the process of developing a new World Animal Health Information System (WAHIS), which will result in simpler, more rapid notification and report of disease information from Member Countries, improved analysis, and more timely provision of essential useful information back to Member Countries.

This Web site will be used during the development phase to allow a selected group of users to monitor the way the system is being developed, test its functionalities, and provide suggestions on how it may be improved.

Please note that this site contains the very latest features being developed, many of which are still not completely tested. Please do not expect, at this stage of development of the application, to have a fully-functioning, bug-free system.

Demonstration System Found a bug? Got a comment? Email the [development team](#) to let them know.

World Animal Health Information System (WAHIS)
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Immediate notification/follow-up

Main Menu - OIE World Animal Health Information System - Microsoft Internet Explorer

Fichier Edition Affichage Favoris Outils ?

Précédente Recherche Favoris Média Liens

WAHIS World Animal Health Information System
Système mondial d'information zoosanitaire
Sistema Mundial de Información Zoonosanitaria

Japan
Logged in: Dan Chair San

Hon

Submit OIE Reports

Do I need to submit an immediate notification?

Immediate Notification ←

Follow-up Report

Six-monthly Report

Annual Questionnaire

Upload Electronic Reports

Account Management

Change User Preferences

Manage User Access Details

Change Password

Country Parameters

General Country Parameters

Manage List of Administrative Units

Disease Information

Demonstration disease map

Messages

- You have no new messages

Overdue Reports

- You have 2 immediate notifications for which follow-up reports are overdue.
- Your six-monthly report for **January to June 2004 is 10 months overdue.**
- Your six-monthly report for **July to December 2004 is 4 months overdue.**

Unresolved Immediate Notifications

- You have 0 disease events for which you have submitted immediate notifications to to the OIE and which are still unresolved.

Draft Reports

- You have 0 draft reports that have not yet been submitted to OIE.

Unresolved Outbreaks

Reference Tables Disease Reason Date of start of event ID Unresolved Outbreaks

Draft Reports not yet submitted to OIE

- No reports have been submitted yet.

Demonstration System Found a bug? Got a comment? Email the development team to let them know.

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Immediate Notification

This page allows you to:

- ▶ **Submit a new Immediate Notification**
To make a new report for immediate notification of a disease, infection or other significant epidemiological event to the OIE Central Bureau, complete the details below and click on the 'New Notification' button. This will then lead you through a series of pages to gather the required information for the specific reason for notification that you have chosen.
- ▶ **Review existing reports**
Section 2 of this page allows you to review existing **draft** and **submitted** Reports. Click on the icons in the 'Action' column next to the relevant report to:
 - ✎ Edit a draft or submitted report. Once a report has been edited, it must be re-submitted to notify OIE of the changes.
 - 👁 View a summary of the contents of a draft or submitted report.
 - 🗑 Delete a draft report. It is not possible to delete submitted reports unless you make an official request to do so.
 - ➡ Make a follow-up report for a previously submitted notification.

1: Submit a New Immediate Notification

Animal Type

Reason for Notification

Report applies to a zone or compartment
 the whole country

2: Review Existing Reports

No reports have been submitted yet. To make a follow-up report, there must first be an initial immediate notification for the event.

Demonstration System Found a bug? Got a comment? Email the [development team](#) to let them know.





First occurrence

Report Details

Report Reference (optional)	<input type="text"/>
Report Date *	08/09/2005
Date of start of event *	08/09/2005
Date of Confirmation of Event	08/09/2005

Disease Details

Disease *	Acarapisosis of honey bees
Clinical Signs? *	<input checked="" type="radio"/> Yes <input type="radio"/> No
Nature of Diagnosis *	<input type="checkbox"/> Suspicion <input type="checkbox"/> Clinical <input type="checkbox"/> Necropsy <input type="checkbox"/> Laboratory (basic) <input type="checkbox"/> Laboratory (advanced)
Number of Outbreaks to Report *	<input type="text" value="0"/>

Save

Demonstration System Found a bug? Got a comment? Email the development team to let them know.



Enter outbreak details below and click **Add Outbreak** to save.

Add a New Outbreak

Outbreak Identification

? Outbreak Reference (optional)

? Date of start of event *

? Outbreak Status * Continuing Resolved

Outbreak Location

? Province *

? District

? Sub-district

? Epidemiological Unit Type *

? Location *

? Latitude *

? Longitude *

Animals Affected

? Species *	<input type="text" value="--Select Species--"/>	<input type="button" value="Add ->"/>	<input type="text"/>
? At Risk *	<input type="text"/>	<input type="button" value="Delete"/>	
? Cases *	<input type="text"/>	<input type="button" value="<- Edit"/>	
? Died *	<input type="text"/>		
? Destroyed *	<input type="text"/>		
? Slaughtered *	<input type="text"/>		

Description of Affected Population

Add a New Case

Outbreak Identification

- ? Outbreak Reference (optional)
- ? Date of start of outbreak
- ? Outbreak Status

Outbreak Location

- ? Province *
- ? District
- ? Sub-district
- ? Epidemiological Region
- ? Location *
- ? Latitude *
- ? Longitude *

Animals Affected

- ? Species *
- ? At Risk *
- ? Cases *
- ? Died *
- ? Destroyed *
- ? Slaughtered *

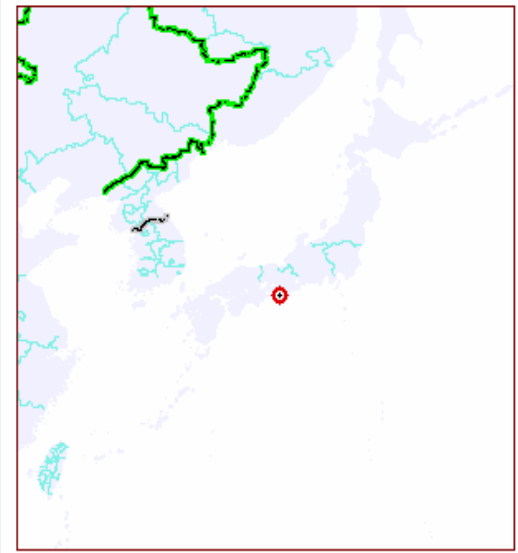
Description of Outbreak

Add Outbreak



Selected Coordinates

Latitude: 33.9399, Longitude: 135.5684



OK

Demonstration System Found a bug? Got a comment? Email the [development team](#) to let them know.

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Add a New Outbreak

Outbreak Identification

Outbreak Reference (optional)	<input type="text"/>
Date of start of event *	08/09/2005
Outbreak Status *	<input checked="" type="radio"/> Continuing <input type="radio"/> Resolved

Outbreak Location

Province *	KINKI
District	<input type="text"/>
Sub-district	<input type="text"/>
Epidemiological Unit Type *	Farm
Location *	test farm
Latitude *	33.9399
Longitude *	135.5684

Animals Affected

Species *	Cattle	<input type="button" value="Add ->"/>	<input type="text"/>
At Risk *	100	<input type="button" value="Delete"/>	
Cases *	<input type="text"/>	<input type="button" value="- Edit"/>	
Died *	<input type="text"/>		
Destroyed *	<input type="text"/>		
Slaughtered *	<input type="text"/>		

Description of Affected Population

Add Outbreak

Microsoft Internet Explorer



Warning

You have left some of the fields blank.

If the number of animals is really zero, please enter '0'.
If you know or can estimate the number of animals, please enter that number.
Leave the field blank only if no information is available.

Are you sure that no data is available for the fields you have left blank?

OK

Annuler

Control Measures and Epidemiology

Control Measures

Control Measure	Currently Used *	Planned in the Future.
No Control Measures.	<input checked="" type="checkbox"/>	
Partial stamping out	<input type="checkbox"/>	<input type="checkbox"/>
Quarantine	<input type="checkbox"/>	<input type="checkbox"/>
Movement control inside the country	<input type="checkbox"/>	<input type="checkbox"/>
Screening	<input type="checkbox"/>	<input type="checkbox"/>
Zoning	<input type="checkbox"/>	<input type="checkbox"/>
Vaccination in response to outbreak	<input type="checkbox"/>	<input type="checkbox"/>
Disinfection of infected premises/establishments	<input type="checkbox"/>	<input type="checkbox"/>
Dipping / Spraying	<input type="checkbox"/>	<input type="checkbox"/>

Disease Control Policy

Vaccination Prohibited * Yes No

Treatment of Cases * Yes No

Epidemiology

Causal Agent *

Serotype(s) * --- Select serotype ---


Source of infection *

- Unknown or inconclusive
- Introduction of new live animals
- Introduction of new non-viable animal products
- Legal movement of animals
- Illegal movement of animals
- Animals in transit
- Contact with infected animal(s) at grazing/watering
- Swill feeding
- Fomites (humans, vehicles, feed, etc.)
- Airborne spread
- Vectors
- Contact with wild animals

Control Measures and Epidemiology

Control Measures

Control Measure ? Curr

- No Control Measures.
- Partial stamping out
- Quarantine
- Movement control inside the country
- Screening
- Zoning
- Vaccination in response to outbreak 
- Disinfection of infected premises/establishments
- Dipping / Spraying

? Disease Control Policy

- Vaccination Prohibited * Yes No
- Treatment of Cases * Yes No

Epidemiology

? Causal Agent *

? Serotype(s) * --- Select serotype ---

? Source of infection *

- Unknown or inconclusive
- Introduction of new live animals
- Introduction of new non-viable animal products
- Legal movement of animals
- Illegal movement of animals
- Animals in transit
- Contact with infected animal(s) at grazing/watering
- Swill feeding
- Fomites (humans, vehicles, feed, etc.)
- Airborne spread
- Vectors
- Contact with wild animals

Control Measures - Vaccination

Vaccination in response to outbreak

<input type="checkbox"/> ? Admin	<input type="text" value="---Select administrative unit---"/>	<input type="button" value="Add ->"/>	<input type="text"/>
<input type="checkbox"/> ? Species	<input type="text" value="--Select Species--"/>	<input type="button" value="Delete"/>	
<input type="checkbox"/> ? Total Vaccinated	<input type="text"/>	<input type="button" value="< Edit"/>	
<input type="checkbox"/> ? Details	<input type="text"/>		
<input type="button" value="Submit"/>			

Urgent Disease Report Review



Report Summary

Report Reference (optional)		Reason	First occurrence of a listed disease or infection
Animal Type	Terrestrial	Nature of Diagnosis	Suspicion
Report Date	07/09/2005	Date of Start of Event	07/09/2005
Date of Confirmation of Event	07/09/2005	Disease	Foot and mouth disease
Clinical Signs?	Yes	Reported Outbreaks	1

Outbreak ()

Province	District	Sub-district	Epi Unit	Latitude	Longitude	Start	End
KINSHASA			test farm	33.9399	135.5894	07/09/2005	
Species		At Risk	Cases	Died	Destroyed	Slaughtered	
Cattle		100					
Affected Population							

Total Outbreaks (1)

Species	At Risk	Cases	Died	Destroyed	Slaughtered
Cattle	100	0	0	0	0

Control Measures

Current Control Measure	Vaccination in response to outbreak	Planned Control Measures	
Animals Treated	No	Treatment Details	N/A
Vaccination Prohibited	No		
Vaccination in response to outbreak			
Province	Species	Number Vaccinated	Details
KINSHASA	Sheep	12	

Epidemiology

Epidemiological Comments		Causal Agent	not necessary
Serotype(s)	A	Source of Infection	Unknown or inconclusive

Country / Zone

Country or Zone: the whole country

Future Reporting

What further reports will be submitted in relation to this event?
There are 1 outbreaks that are still recorded as unresolved. It is not possible to declare this event resolved until these individual outbreaks are resolved.
The event is continuing. Weekly follow-up reports will be submitted.

Report Submitted

This report has been submitted to OIE.

The OIE reference number for the report is: **3525**

The report was officially registered at: **18/12/2006 at 18:28:22** OIE reference (Paris) time

User Feedback Email the [development team](#) if you have a comment on this system.

World Animal Health Information System (WAHIS) - Version: 2.6



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Release date: 3 août 2006



WAHIS

World Animal Health Information System
Système mondial d'information zoonitaire
Sistema Mundial de Información Zoonitaria

**Six-monthly reports on the
presence and absence of OIE-
Listed basis of**

The OIE's Monitoring System

Qualitative information

1. OIE-listed diseases	2.	3.	4. Control, prophylaxis and preventive measures										5. Type of report, where the occurrence is +, +() or +?									
TERRESTRIAL ANIMALS	Occurrence code	Species	Notifiable disease	Precautions at the borders	Monitoring	Screening	General surveillance	Targeted surveillance	Movement control inside the country	Stamping out	Modified stamping out	Zoning	Vaccination prohibited	Vaccination (routine)	Number of vaccinated animals	Treatment	Control of wildlife reservoirs	Control of arthropods	First administrative division by month	Entire country by month	First administrative division for 6 months	Entire country for 6 months
<i>MULTIPLE SPECIES DISEASES</i>																						
Foot and mouth disease		bov buf ovi cap o/c sui cml fau																				

If the disease has not been reported during this period in your country, please indicate the year of the last outbreak (HS II, WAHID).

Semestriel report

2. Quantitative information

WAHISWorld Animal Health Information System
Système mondial d'information zoonitaire
Sistema Mundial de Información Zoonitaria

Gambia

Logged in: Eunice Forster

[Home](#) | [User Preferences](#) | [Help](#) | [Logout](#)**Submit OIE reports**

Do I need to submit an immediate notification?

Immediate notification

Follow-up Report

Six-Monthly Report

Annual report

Upload Electronic Reports

Account Management

Change User Preferences

Manage User Access Details

Change My Password

Country Parameters

General Country Parameters

Manage List of Administrative Units

Weekly Summary

Report

SIS user messages

- There are no SIS messages waiting for a response.

Member Notices**Overdue reports**

- You have 4 overdue semestrial report(s).

Unresolved immediate notifications

- There are 2 unresolved event notifications. There are 3 unresolved disease outbreaks from 1 different event notifications.

Draft Reports

- You have 0 draft immediate notifications that have not yet been submitted to OIE.
- You have 1 draft semestrial reports that have not yet been submitted to OIE.

Unresolved Outbreaks

Report reference	Disease:	Reason	Date of Start of Event	ID	Unresolved Outbreaks
	Anthrax	First occurrence	10/01/2005	3515	3

Reports Awaiting Response from Delegate

There are currently no reports awaiting response from delegates for your country.



Six-Monthly Reports

This page allows you to:

1. ► Submit a new Six-monthly Report

To make a new Six-monthly Report for your country to the OIE Central Bureau, complete the details below and click on the 'New Six-monthly Report' button. This will then lead you through a series of pages to gather the required information for the report period that you have chosen.

If there is an existing draft report for the period you wish to work on, please refer to the section "Review existing reports".

2. ► Review existing reports

Section 2 of this page allows you to review existing **draft** and **submitted** reports. Click on the icons in the 'Action' column next to the relevant report to:

- Edit a draft or submitted report. Once a report has been edited, it must be re-submitted to notify OIE of the changes.
- View a summary of the contents of a draft or submitted report.
- Delete a draft report. It is not possible to delete submitted reports unless you make an official request to do so.

1: Submit a new Six-monthly Report

Animal Type

Terrestrial
 Aquatic
 Both

Report Period: Jul-Nov 2006

New Six-Mon [Reset]

Jul-Nov 2006
 Jan-Jun 2006
 Jul-Dec 2005
 Jan-Jun 2005

Diseases absent from the Country

Diseases which have either never been reported or have not been reported in this report period

No previous reports have been submitted.

Multiple species Diseases Bottom

Disease:	Date of last occurrence	Control, Prophylaxis and Preventative Measures																
	Year (yyy), month (mm/yyy) or precise date of the end of the last outbreak 2. mm/yyy 3. yyy	Date Unknown	Notifiable disease	Precautions at the borders	Monitoring	Screening	General Surveillance	Targeted Surveillance	Movement control inside the country	Stamping out	Modified stamping out	Zoning	Vaccination prohibited	Routine vaccination	Number Vaccinated	Treatment	Control of wildlife reservoirs	Control of arthropods
Foot and mouth disease	0000	<input checked="" type="checkbox"/>	All	All	All	All	All	All	All	All	All	All	All	All		All	All	All
	Cattle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Buffaloes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Camelidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sheep / goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sheep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Swine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Wild species	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vesicular stomatitis	<input type="text" value=""/>	<input type="checkbox"/>	All	All	All	All	All	All	All	All	All	All	All	All		All	All	All

Mark all checkboxes for Monitoring for all species

Details about the Presence of Disease

For the diseases which you have indicated are present, you must indicate the maximum level of detail on the occurrence of disease/infection that you are able to provide.

There was no report for any previous period(s).

Multiple species Diseases ▼ Bottom

Disease: Name	Report Detail					Serotype Outbreaks by serotype
	No quantitative information available on cases or outbreaks	Time and place				
		By month and admin unit (recommended)	By six month period and by administrative division	By month and whole country	By six month period and whole country	
Rift Valley fever	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype
Bluetongue	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Anthrax	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype
Aujeszky's disease	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype
Echinococcosis/hydatidosis	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype

▲ Top

Save Reset

Details about the Presence of Disease

For the diseases which you have indicated are present, you must indicate the maximum level of detail on the occurrence of disease/infection that you are able to provide.

There was no report for any previous period(s).

Multiple species Diseases

Bottom

Disease: Name	Report Detail					Serotype Outbreaks by serotype
	No quantitative information available on cases or outbreaks	Time and place				
		By month and admin unit (recommended)	By six month period and by administrative division	By month and whole country	By six month period and whole country	
Rift Valley fever	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype
Bluetongue	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Anthrax	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No serotype
Aujeszky's disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	No serotype
Echinococcosis/hydatidosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	No serotype

Top

Save

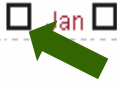
Reset

Disease:	Species	Notifiable disease	Precautions at the borders	Monitoring	Screening	General Surveillance	Targeted Surveillance	Movement control inside the country	Stamping out	Modified stamping out	Zoning	Vaccination prohibited	Routine vaccination	Number Vaccinated	Treatment	Control of wildlife reservoirs	Control of arthropods	Time periods for separate reporting.
----------	---------	--------------------	----------------------------	------------	-----------	----------------------	-----------------------	-------------------------------------	--------------	-----------------------	--------	------------------------	---------------------	-------------------	-----------	--------------------------------	-----------------------	--------------------------------------

Rift Valley fever		All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	<input type="checkbox"/> Jan to Jun
	Cattle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Buffaloes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Camelidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Sheep / goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Sheep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Wild species	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Bluetongue		All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun
	Cattle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Buffaloes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Camelidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sheep / goats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sheep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Wild species	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Anthrax		All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	All	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun
---------	--	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	---	---	---	---	---	---



Disease Report for Jan, 2005 (by administrative unit)

Summary of disease/infection for each Province

? Province * --- Select administrative unit ---

? Serotype *
 1
 2
 3
 4
 5

Note: It is possible to select multiple serotypes by holding down the control key while clicking on the desired options.

? New outbreaks for Jan *

? Total Outbreaks for Jan *

? Animals affected

? Species * --- Select Species ---

Add ->

? Measuring units * --- Select specific unit ---

Delete

Edit

Reset

? Susceptible *

? Cases *

? Deaths *

? Destroyed *

? Slaughtered *

? Vaccinated *

rate reporting.

Jan Apr May Jun

Disease Report for Jan, 2005 (by administrative unit)

Summary of disease/infection for each Province

? Province * JARRA WEST

? Serotype *
1
2
3
4
5

Note: It is possible to select multiple serotypes by holding down the control key while clicking on the desired options.

? New outbreaks for Jan * 5

? Total Outbreaks for Jan * 7

? Animals affected

? Species * Sheep

Add ->

? Measuring units * Animals

Delete

Edit

? Susceptible * 234

Reset

? Cases * 23

? Deaths * 2

? Destroyed *

? Slaughtered *

? Vaccinated *

Microsoft Internet Explorer

Warning

You have left some of the fields blank.

If the number of animals is really zero, please enter '0'.
If you know or can estimate the number of animals, please enter that number.
Leave the field blank only if no information is available.

Are you sure that no data is available for the fields you have left blank?

OK Annuler

ate reporting.

ar Apr May Jun

4
5

? New outbreaks for Jan * 5

? Total Outbreaks for Jan * 7

? **Animals affected**

? Species * --- Select Species ---

Add ->

Sheep, Susceptible:234, Cases:23, Died:2, Dest, Sla., Units:Animals;Vac:

? Measuring units * --- Select specific unit ---

Delete

Edit

? Susceptible *

Reset

? Cases *

? Deaths *

? Destroyed *

? Slaughtered *

? Vaccinated *

Add Province Data 

Province Summary

If there are entries in the table below, the edit and delete icons can be used to either edit or delete previously added data.

ID	Province	SeroTypes	New Outbreaks	Total Outbreaks	Action
No Province Records					

ate reporting.

ar Apr May Jun

Review Report

Printable version
(PDF Format) 

Save report data
to your hard disk 
(XML format)

SIX-MONTHLY REPORT ON THE NOTIFICATION OF THE ABSENCE OR PRESENCE OF OIE-LISTED DISEASES

OIE Ref: 11929, Report Period: Jan - Jun 2005 Country: Gambia

Report Summary

Animal type	Terrestrial	Date of report	19/12/2006
submitted	No	Report Period:	Jan - Jun 2005
Name of Sender of the report	Eunice Forster	Address	Abuko ABUKO
Position	Principal Veterinary Officer	Telephone	(220) 439 2173
Fax	(220) 439 2173	Email	pacegambia@gamtel.gm
Entered by	Eunice Forster		

1. Summary on OIE-listed diseases/infections present in Gambia

OIE-Listed disease	occurrence	Serotype (s)	New Outbreaks	Total Outbreaks	Species	Control Measures	Routine Vaccinated	Measuring units	Susceptible	Cases	Deaths	Destroyed	Slaughtered	Ring vaccinated
Rift Valley fever	?	No	6	8	bov			Animals	987	78	7	...	...	...
Bluetongue	+?	2, 4	5	7	ovi			Animals	234	23	2	...	...	...
Anthrax	?	No	4	4	bov			Animals	12	2	1	0	0	12
					cap			Animals	65	6	1	0	0	0
					ovi			Animals	579	57	8	2	0	0
Aujeszky's disease	+	No	3	4	sui			Animals	23	4	...	...	...	...
Echinococcosis/hydatidosis	+0	No	4	5	bov			Animals	67	7	2	...	...	...



Review Report

Printable version
(PDF Format)



Save report data
to your hard disk
(XML format)

SIX-MONTHLY REPORT ON THE NOTIFICATION OF THE ABSENCE OR PRESENCE OF OIE-LISTED DISEASES

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Position	Principal Veterinary Officer	Telephone	(220) 439 2173
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Anthrax	?	No	4	4	bov			Animals	12	2	1	0	0	12
					cap			Animals	65	6	1	0	0	0
					ovi			Animals	579	57	8	2	0	0
Aujeszky's disease	+	No	3	4	sui			Animals	23	4
Echinococcosis/hydatidosis	+0	No	4	5	bov			Animals	67	7	2

SIX-MONTHLY REPORT ON THE NOTIFICATION OF THE ABSENCE OR PRESENCE OF OIE-LISTED DISEASES

OIE Reference: 11929, Report Period: Jan - Jun 2005
Country: Gambia

Report Summary

Animal type	Terrestrial	Date of report	19/12/2008
submitted	No	Report Period:	Jan - Jun 2005
Name of Sender of the report	Eunice Forster	Address	Abuko ABUKO
Position	Principal Veterinary Officer	Telephone	(220) 439 2173
Fax	(220) 439 2173	Email	paogambia@gamtel.gm
Entered by	Eunice Forster		

1. Summary on OIE-listed diseases/infections present in Gambia

OIE-Listed disease	occurrence	Serotype(s)	New Outbreaks	Total Outbreaks	Species	Control Measures	Routine Vaccinated	Measuring units	Susceptible	Cases	Deaths	Destroyed	Slaughtered	Ring vaccinated
Rift Valley fever	?	No	8	8	bov			Animals	987	78	7	...	...	...
Bluetongue	+?	2, 4	5	7	ovi			Animals	234	23	2	...	...	...
Anthrax	?	No	4	4	bov			Animals	12	2	1	0	0	12
					cap			Animals	65	6	1	0	0	0
					ovi			Animals	579	57	8	2	0	0
Aujeszky's	+	No	3	4	sui			Animals	23	4	...	...	...	...



[Home](#) | [User Preferences](#) | [Help](#) | [Logout](#)

Immediate Notification: ▶ [Report Details](#) ▶ [Outbreak Details](#) ▶ [Control and Epi](#) ▶ [Review and Submit](#) ▶ [Confirmation](#)

Reason: First occurrence of listed disease | **Disease:** Bovine spongiform encephalopathy | **Creating New:** Previously submitted report

Report Submitted

This report has been submitted to OIE.

The OIE reference number for the report is: **3531**

The report was officially registered at: **19/12/2006 at 21:31:50** OIE reference (Paris) time

User Feedback Email the [development team](#) if you have a comment on this system.

World Animal Health Information System (WAHIS) - Version: 2.6



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Release date: 3 août 2006

Future developments

- Notification by cluster when the number of outbreaks to notify is very high instead of notifying outbreak by outbreak (follow-up) under development & testing.

Upload electronic reports from national databases

WAHIS World Animal Health Information System
Système mondial d'information zoonitaire
Sistema Mundial de Información Zoonitaria

Home | User Preferences | Help | Logout
Gambia
Logged in: Eunice Forster

Submit OIE reports
Do I need to submit an immediate notification?
Immediate notification
Follow-up Report
Six-Monthly Report
Annual report
Upload Electronic Reports

Account Management
Change User Preferences
Manage User Access Details
Change My Password

Country Parameters
General Country Parameters
Manage List of Administrative Units

Weekly Summary
Report

SIS user messages
• There are no SIS messages waiting for a response.

Member Notices
Overdue reports
• You have 4 overdue semestrial report(s).

Unresolved immediate notifications
• There are 2 unresolved event notifications. There are 3 unresolved disease outbreaks from 1 different event notifications.

Draft Reports
• You have 0 draft immediate notifications that have not yet been submitted to OIE.
• You have 1 draft semestrial reports that have not yet been submitted to OIE.

Unresolved Outbreaks

Report reference	Disease	Reason	Date of Start of Event	ID	Unresolved Outbreaks
	Anthrax	First occurrence	10/01/2005	3515	3

Reports Awaiting Response from Delegate
There are currently no reports awaiting response from delegates for your country.

Draft reports not yet submitted to OIE
There are currently no draft reports waiting to be submitted to OIE.

Upload outbreaks when their number becomes very high (BT in affected countries in Europe)

• Upload some present diseases data from national databases to six-monthly report

Not yet developed

OIE's definitions

Outbreak of disease or infection

- means the occurrence of one or more cases of a disease or an infection in an epidemiological unit.

Case

- means an individual animal infected by a pathogenic agent, with or without clinical signs.

Comparison between WAHIS and ADNS

- ADNS Countries code

01 GERMANY

02 FRANCE

03 ITALY

04 NETHERLANDS

05 BELGIUM

06 LUXEMBURG, etc

- WAHIS Countries code

ISOCODES

Comparison between OIE and ADNS

- ADNS Countries
regions/zones

Geo-coordinates:

Degrees, minutes,
seconds

**Smaller than first
administrative division**

- WAHIS

Geo-coordinates:

Decimal degrees

**First administrative
division**

Disease codes

ADNS Disease codes

- 01 F.M.D. (foot and mouth disease)
- 03 S.V.D. (Swine vesicular disease)
- 04 RINDERPEST
- 06 C.B.P.P (Contagious bovine pleuropneumonia)
- 09 BLUETONGUE
- 10 **C.S.F. (Classical swine fever in domestic pigs)**
- 11 A.S.F. (African swine fever)
- 14 **Avian influenza in wild birds (HPAI)**
- 15 Avian influenza in poultry (was fowl plague) (HPAI)
- 16 P.E.E. (Porcine enterovirus encephalomyelitis)
- 17 etc

OIE Code	OIE-listed disease	Susceptible species
A010	Foot and mouth disease	bov, buf, ovi, cap, o/c, sui, cml, fau
A020	Vesicular stomatitis	bov, equ, buf, ovi, cap, o/c, sui, cml, fau
A030	Swine vesicular disease	sui, bov, fau
A040	Rinderpest	bov, buf, ovi, cap, o/c, fau
A050	Peste des petits ruminants	ovi, cap, o/c, bov, fau
A060	Contagious bovine pleuropneumonia	bov, buf, ovi, cap, o/c
A070	Lumpy skin disease	bov, buf, fau
A080	Rift Valley fever	bov, buf, ovi, cap, o/c, cml, fau
A090	Bluetongue	ovi, bov, buf, cap, o/c, cml, fau
Etc.		

Control measures

ADNS

- 01 NONE
- 10 EARLY SL IN
- 11 TOT SL OUT
- 12 PRT SL IN
- 13 PRT SL OUT
- 14 SL CLN IN
- 15 SL CLN OUT
- 20 EARLY VAC IN
- 21 PRT VAC IN
- 22 VAC RING
- 23 AREA VAC
- 30 DEST BURY
- 31 DEST BURN
- 32 DEST OUT
- 40 EARLY SALV +
- 41 EARLY SALV -
- 42 PRT SALV +
- 43 PRT SALV -
- 50 MOVE CONTRL
- 51 MOVE TRACNG
- 88 OTHER

OIE

- None
- Control of arthropods
- Control of wildlife reservoirs
- Stamping out
- Modified stamping out
- Quarantine
- Movement control inside the country
- Screening
- Zoning
- Vaccination (give details below in section 27)
- Disinfection of infected premises/establishments)
- Dipping/spraying
- Other

Origin of the disease

Origin of the disease (ADNS)

Unknown - investigation continuing
Unknown - obscure after investigation
Waste food feeding
Infection by contact in to market
Infection by contact from neighbouring holding
Purchase of animals
Propagated by transport vehicle
Infection propagated by human contact
Infection propagated by inanimate objects
Animals moved for breeding
Artificial insemination
Latent infection in holding
Recrudescence
Direct contact with wild animal
Indirect contact with wild animals
Other: please use free text

Origin of the disease/source of the infection (OIE)

Unknown or inconclusive
Introduction of new animals/animal products
Legal movement of animals
Illegal movement of animals
Animals in transit
Contact(s) with infected animal(s) at grazing/watering
Swill feeding
Fomites (humans, vehicles, feed, etc.)
Airborne spread
Vectors
Contact with wild animals
Other

Discussion

- How to avoid for European countries duplicate their reporting for their priority diseases to the OIE and to ADNS
 - Use direct transfer for ADNS, and for WAHIS from national databases (monitoring systems)
 - Needs harmonization of definitions of some of the collected data. For the OIE, need to complete six-monthly reports
 - Difficult to implement for Immediate notification/follow-up reports
 - WAHIS reports should be completed. Upload automatically only outbreaks to report in the forms

World Animal Health Information System



Thank you