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IRISH
**FARMERS
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Report into Brazil Investigation



The Brazil investigation delegation consisted of IFA Senior Policy Executive for Livestock, Sheep and Animal Health Tomás Bourke, Irish Farmers Journal Deputy Editor Adam Woods and Irish Farmers Journal Picture Editor Phil Doyle.

All photos of Brazil are credited to Phil Doyle.





Executive Summary – Brazil Investigation

During a 3,000km fact-finding mission across four states in Brazil, representatives from the Irish Farmers' Association and the Irish Farmers Journal were able to walk in off the street to agri-stores and buy prescription-only injectable antibiotics, including highest-priority critically important antimicrobials, without any prescription, questions, or recording of buyer details.

On the same trip, visits to farms, marts and slaughter plants revealed cattle with no official tags, removable tags freely on sale with applicators and removers, and no functioning national database of animals or holdings.

These observations fundamentally contradict both the Commission's public claims about the EU–Mercosur agreement and the EU's own One Health strategy on antimicrobial resistance and traceability.

What we found:

- We found no evidence, in practice, of effective controls on medicine usage in farm animals.
- No national traceability system for the 238m cattle in the country.
- No credible means to certify beef from this country as meeting EU import requirements.

What now needs to happen:

- As decision time approaches for ratification of the Mercosur trade deal, the Government and MEPs must honour commitments to EU consumers and EU farmers on standards food allowed onto shelves in the EU must be produced to.
- Beef and poultry concessions under EU–Mercosur must be suspended until Brazil can demonstrate an operational, audited individual animal identification and national traceability system equivalent to EU requirements.
- There must be verifiable controls on veterinary antibiotics, including effective prescription-only status and oversight of highest-priority critically important antimicrobials, as a precondition for beef export certification to the EU.
- DG SANTE must conduct an urgent, on-the-ground audit focused specifically on AMR-relevant practices (antibiotic access, prescription controls, traceability) before any ratification steps.

“Public health cannot be compromised or selectively applied to facilitate trade deals.”

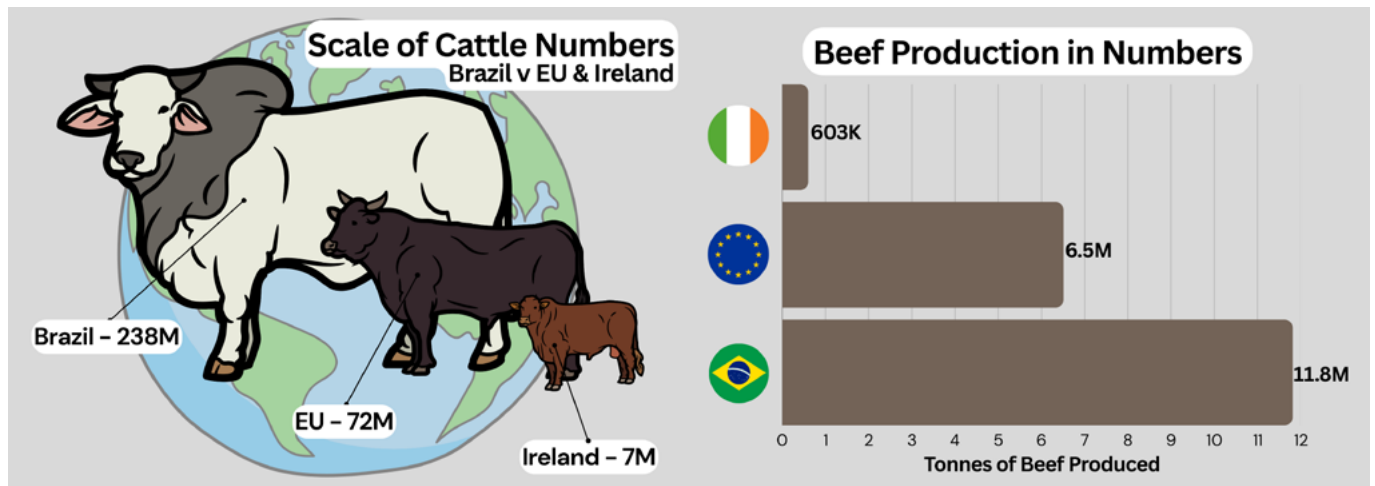
– Dr. Patrick Wall, Professor of Public Health, UCD

Outline of Mercosur Access for Meat Products to EU:

The proposed agreement gives Mercosur countries access to 99,000 tonnes of beef at 7.5% duty which is composed of 55% fresh beef and 45% frozen. This will be phased in over five years.

This quota will be distributed among the Mercosur countries (Brazil 42k tonnes, Argentina 29k tonnes, Uruguay 15k tonnes, Paraguay 13k tonnes). All duties will be immediately removed from the 58,500 tonne Hilton beef quota already available to Mercosur countries currently at a 20% duty rate. In addition, 180,000 tonnes of poultry at a zero-duty rate consisting of 50% bone in and 50% boneless which will be phased in over 5 years.

By targeting higher value carcase cuts this is the equivalent of an extra 4m cattle entering the EU.



A key component of the proposed Mercosur trade deal is equivalence of standards of production for beef to be eligible for import to the EU from the Mercosur countries.

EU-MERCOSUR PARTNERSHIP AGREEMENT



According to the proposed EU-Mercosur partnership agreement it:

- Upholds, for imports into the EU, the strict standards on food safety, and animal and plant health (SPS1 standards).
- Aims to enhance the protection of human, animal, and plant life and health in the context of agriculture and fishery trade between the EU and Mercosur.



What are the main achievements claimed the agreement will bring?

Under the agreement, the EU and Mercosur agree to:

- protect labour rights;
- protect the environment, including fighting climate change and deforestation;
- promote corporate social responsibility;
- co-operate on animal welfare standards, biotechnology, food safety and the fight against antimicrobial resistance.

Q&A on the EU-Mercosur Partnership Agreement - EU Commission



The findings of our investigation are startling. They seriously challenge the narrative put forward by those promoting the Mercosur trade deal and claimed outcomes of the agreement by the Commission.

The findings expose the inability of Brazilian beef producers and authorities to meet the standards that apply in the EU; standards developed as a result of societal demands on how food should be produced, animals farmed and key medicines for both human and animal health are used, namely antibiotics in the EU. The investigation highlights how far removed Brazilian livestock farmers are from the standards imposed on European farmers. Accordingly, it is impossible to credibly certify beef from this country.

Multiple audits carried out by DG Sante detail their continual findings of non-compliance with export requirements to the EU and effective refusal of Brazilian authorities to address the lack of controls to provide credible certification. These audits are listed in **Appendix 1**.

Overview

This investigation and its key findings challenge the much-heralded EU's 'Precautionary Principle' in the Mercosur trade deal and the perceived gain for EU consumers.

We found a complete lack of traceability throughout the supply chain, from farms, through livestock markets and onto slaughter plants. Compounding this finding was the very mixed understanding of even the most basic animal traceability criteria to be eligible for access to the EU market.

Farmers who considered their animals eligible for export to the EU outlined tagging requirements ranging from animals starting at under 10 months of age on the farm they were on at that time, to a tagging requirement just 90 days prior to slaughter, with no national database to validate any of these records.

Controls on medicine usage in farm animals were non-existent. AMR is recognised as a huge threat to human and animal health and welfare with the WHO stating that 'Antimicrobial resistance (AMR) is one of the top global public health and development threats.'

As part of our investigation, we were able to freely purchase antibiotics including those categorised HPCIA (Highest Priority Critically Important Antibiotics) from stores that were all labelled as veterinary prescription medicines without a question asked.

The complete lack of oversight of use of these products and lack of oversight of the supply chain is seriously at odds with the position adopted by the EU. We have a target of 50% reduction in antibiotic usage by 2030 and very stringent veterinary prescribing and product supply regulations with the competent authority having full visibility of all prescribing and product usage in farmed animals.

Our investigation found a complete lack of controls in the use and supply of antibiotics in Brazil for farm animals. The Mercosur trade deal is effectively validating this approach to antibiotic usage and is no way consistent with the stated objective of the EU of fighting antimicrobial resistance or of the aims of the Mercosur agreement.



Antibiotic Usage Controls and antimicrobial resistance (AMR) impact – EU & Ireland compared to Brazil

The EU Farm to Fork Strategy set an antimicrobial sales reduction target to reduce overall EU sales of antimicrobials for farmed animals and in aquaculture by 50% by 2030

In 2023, the aggregated sales for the EU were 88.5 mg/PCU, a reduction of 29.8 mg/PCU (25.2%) in comparison to the 2018 reference value.

Ireland and Irish farmers approach to AMR

In recognition of the serious and increasing threat of antimicrobial resistance, the Department of Health's Chief Medical Officer (CMO) and the Department of Agriculture, Food, and the Marine's Chief Veterinary Officer (CVO) established the **National Interdepartmental AMR Consultative Committee** in November 2014. This committee meets Ireland's requirements to have an intersectoral co-ordinating system for addressing AMR at European Level.

Committee membership consists of representatives from both departments and across the human health, animal health and the environmental sectors.

Key achievements on Ireland's AMR journey in animal health to-date;

- Reduction in sales of Highest Priority Critically Important Antimicrobials (HPCIA's) of 50%
- Reduction in overall sales of antimicrobials in food animals by 25%

It is legally prohibited for a farmer to purchase an antibiotic in the EU without a valid veterinary prescription. The conditions that must be met before a veterinary practitioner can issue a prescription is set out in the EU Veterinary medicinal products regulatory requirements and underpinned in Ireland by the prescribing guidelines of the Veterinary Council of Ireland.

Core principles

- **Individual animals under care:** Vets can only prescribe for animals under their care.
- **The six "rights":** Prescriptions must adhere to the right diagnosis, animal, antibiotic, dose, duration, and storage/disposal.
- **Recent visit requirement:** A veterinarian must have visited the farm within 30 days prior to issuing an antibiotic prescription.
- **Focus on evidence and assessment:** Guidelines encourage evidence-based decisions, often requiring individual assessment and diagnostic testing (like milk recording or culture) before prescribing, particularly for selective treatments like dry cow therapy.
- **Reducing use:** The overarching goal is to reduce the overall use of antibiotics to combat antimicrobial resistance (AMR) while ensuring animal health.

Antibiotics cannot be purchased in the EU by farmers without a veterinary prescription, issued by a veterinary practitioner, who has a detailed knowledge of the farm, the animal/s, the condition and symptoms of the animal/s. For higher level antibiotics, a veterinary prescription cannot be issued until the veterinary practitioner has carried out culture and sensitivity testing.

Antibiotics administered to animals in the EU must be recorded and include volume administered, date/s of administration, withdrawal period and the identity of the animal/s treated. This is then cross referenced with the prescribing and dispensing records for medicines for the farm.

The prescription issued by the veterinary practitioner must be retained by the practice for competent authority inspection. The farmer must retain a copy of the prescription and the dispenser of the product must retain a copy of the prescription, all of which facilitates competent authority oversight and monitoring of compliance and volume usage of these vital products for human and animal health.

The applicable legislation in the EU and Ireland before a farmer can buy an antibiotic for a farm animal is set out in **Appendix 2**.



Medicines freely available to purchase over the counter in Brazil which would require a prescription in the EU.



The Brazil experience of purchasing antibiotics

We walked in off the street to a number of stores and were sold antibiotics marked veterinary prescription without a question being asked.

The dispenser did not ask for a veterinary prescription, did not ask what the antibiotic was for, did not ask for our names or animal or farm details.

In the majority of instances, the products were not even scanned out, clearly showing a lack of inventory checks and creating a significant gap in accurately recording sales volume and product usage within the farm sector.

Professor Martin Cormican, Consultant Bacteriologist at University College Galway said:

“Antibiotic resistance or antimicrobial resistance means that antibiotics that you could depend on to kill bugs that cause, infection, you can’t depend on them anymore. So antibiotics that we could use 20 years ago and be confident that they were going to work, now, we’re not sure whether they’re going to work or not. And we often have to use more powerful antibiotics in situations where we would have been able to use antibiotics that were easier to use in the past. Everyday decisions that doctors are making about how to treat their patients are changed by antibiotic resistance. So it’s not a problem for the future. It’s a problem we’ve been living with now for 20 years and trying to manage.

There are rules being implemented and strict laws around the use of antibiotics and around the prescription of antibiotics and control use of certain antibiotics. Europe has in many respects led the way in the control of antibiotics, particularly in control of antibiotic use in animals.

Europe was the first to ban the use of antibiotics as growth promoters. It’s made huge strides to control the use of antibiotics under prescription. There’s very tight regulation

One of the examples you’ve given me is this Cefotaxime, for example, which is the third generation cephalosporin. Third generation cephalosporin is a critically important antibiotic. And to be able to purchase and use third generation cephalosporins without prescription is contrary to everything we’ve tried to achieve in the European Union over the last 20 years in terms of using antibiotics.”

Dr. Patrick Wall is both a vet and a medical doctor. He is a Professor of Public Health in University College Dublin (UCD), Ireland, and a member of the UCD Institute of Food and Health.



Dr. Patrick Wall, Professor of Public Health, School of Public Health, Physiotherapy and Sports Science, University College Dublin, Ireland

His areas of interest include One Health, food safety, nutrition and the management of lifestyle related disease through behavioural change. As a doctor he is a specialist in communicable diseases and was the head of the foodborne diseases division of the UK Health Security Agency. He was the first chief executive of the Irish food safety authority and he contributed to setting up this consumer protection agency established in response to the BSE crisis. He was a founder member of the management board and the second chairperson of the European Food Safety Authority (EFSA). He is a member of the international scientific advisory committee of the Chinese National Agency for Food Safety and Risk Assessment (CFSA).

Dr. Patrick Wall said:

‘Two Irish citizens attending the World Meat Congress in Brazil took the opportunity to visit several farm shops revealing potent injectable antibiotics and anti-inflammatories stacked openly on the shelves, sold over the counter with no prescription, no screening questions and no apparent effort to conceal their availability.

Among the products freely available were combinations of ceftiofur and ibuprofen, tulathromycin and ketoprofen, penicillin and streptomycin, as well as florfenicol, tylosin, oxytetracycline and flunixin.







For EU observers, this is not a marginal detail of local practice: it goes to the heart of the Union’s strategy on antimicrobial resistance (AMR), public health protection and the principle that imported food should be produced to standards equivalent to those required inside the EU.

Public health cannot be compromised or selectively applied to facilitate trade deals. If AMR is the major global health threat that the EU and WHO say it is, then the standards applied to EU farmers must also inform the conditions placed on imports.’






Attached in **Appendix 3** is the detailed appraisal provided by Dr. Patrick Wall to the findings of our investigation which lays bare the seriousness of the findings for both human and animal health and the blind eye the EU are prepared to turn to antibiotic usage and AMR to advance the Mercosur trade deal.

The table below lists the products we purchased in Brazil, the category of product, the active substance and routes of supply for EU and Irish farmers to purchase products with the same active substances compared to the non-existent controls this investigation found in Brazil.

List of Veterinary Use Medicines Purchased Over The Counter Without Prescription, Herd Number or Animal ID in Brazil

<i>Product Name</i> <i>Antibiotic Category</i>	<i>Product Type</i> <i>Active Substance</i>	<i>Purchase Criteria in Ireland</i>
 Cetofur Category B	Antibiotic Ceftiofur Hydrochloride Ketoprofen	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription only valid for 5 days. • Prescription must identify animal(s). • Category B HP-CIAs must not be used as a first-line treatment. • They should only be prescribed after laboratory culture and susceptibility results show no effective alternative. • Treatment must not begin until these results are received. • Exception: For individual animals in acute, immediately life-threatening situations, treatment may begin before results arrive, but culture and susceptibility testing is still required. • All laboratory tests and results must be fully recorded to justify the decision to use Category 2 HP-CIAs.
 CEF 50 Category B	Antibiotic Ceftiofur Hydrochloride	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days. • Category B HP-CIAs must not be used as a first-line treatment. • They should only be prescribed after laboratory culture and susceptibility results show no effective alternative. • Treatment must not begin until these results are received. • Exception: For individual animals in acute, immediately life-threatening situations, treatment may begin before results arrive, but culture and susceptibility testing is still required. • All laboratory tests and results must be fully recorded to justify the decision to use Category 2 HP-CIAs.
 Chemiflor Category C	Antibiotic Florfenicol	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days. • Category C HP-CIAs must not be used as first-line treatments. • They cannot be given to the same animal(s) more than once in 3 months unless under the direct care of the prescribing vet. • A second treatment within 3 months requires culture and susceptibility tests showing no effective alternative, and treatment must wait for these results. • In life-threatening emergencies in individual animals, treatment may start before results, but testing must still be done and full records kept.
 Tylan 200 Category C	Antibiotic Tylosin	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days. • Category C HP-CIAs must not be used as first-line treatments. • They cannot be given to the same animal(s) more than once in 3 months unless under the direct care of the prescribing vet. • A second treatment within 3 months requires culture and susceptibility tests showing no effective alternative, and treatment must wait for these results. • In life-threatening emergencies in individual animals, treatment may start before results, but testing must still be done and full records kept.
 Draxxin KP Category C	Antibiotic Tulathromycin Ketoprofen	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days. • Category C HP-CIAs must not be used as first-line treatments. • They cannot be given to the same animal(s) more than once in 3 months unless under the direct care of the prescribing vet. • A second treatment within 3 months requires culture and susceptibility tests showing no effective alternative, and treatment must wait for these results. • In life-threatening emergencies in individual animals, treatment may start before results, but testing must still be done and full records kept.
 Tyladen Category C	Antibiotic Tylosin	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days. • Category C HP-CIAs must not be used as first-line treatments. • They cannot be given to the same animal(s) more than once in 3 months unless under the direct care of the prescribing vet. • A second treatment within 3 months requires culture and susceptibility tests showing no effective alternative, and treatment must wait for these results. • In life-threatening emergencies in individual animals, treatment may start before results, but testing must still be done and full records kept.

List of Veterinary Use Medicines Purchased Over The Counter Without Prescription, Herd Number or Animal ID in Brazil

<i>Product Name</i> <i>Antibiotic Category</i>	<i>Product Type</i> <i>Active Substance</i>	<i>Purchase Criteria in Ireland</i>
 AgroVet Plus Category D	Antibiotic Dihyrostreptomycin Benzylpenicilin	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days.
 Megacilin Super Plus Category D	Antibiotic Dihyrostreptomycin Benzylpenicilin	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days.
 Agrosil 5 Mega Category D	Antibiotic Dihyrostreptomycin Benzylpenicilin	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days.
 Terramicina Mais + Category D	Antibiotic & Anti-Inflam Oxytetracycline	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days.
 Flumax	Painkiller & Anti-Inflam Flunixin Meglumine	<ul style="list-style-type: none"> • Must have a Veterinary Prescription. • Prescribing Veterinarian must have knowledge of the farm/animals and their condition. • Prescription must identify animal(s). • Prescription only valid for 5 days.



Tagging – Ireland & EU vs Brazil

The foundation for any credible animal identification and tracing system is a compulsory national database that has an individual identifier for each animal associated with it throughout its life cycle for all animals in a country, recording their current and previous locations and final destinations.

This system and the legislation that underpins it, including individual member state information is available on the link below to the European Commission website and is the system Irish farmers must legally implement on our farms.

EU Bovine Animal Identification and Registration



Ireland have gone a step further with the recent rollout of a National Genotyping Programme, now recording the actual animal's DNA and associating it with the animal's lifelong identifier on a national database.

The tagging, registration and animal movement notification system in Ireland is detailed in **Appendix 4** and the critical role the competent authority and the Animal Identification and Movement System (AIMS) have in ensuring the accuracy of the information.

Key tenets of the Animal Identification and Movement System in Ireland in application of the EU animal identification and movement controls are;

- All farms must have a unique herd identifier
- All calves must be double tagged inside 20 days of birth, including still births with a unique individual lifetime identifier
- All calves must be registered on AIMS database inside 27 days of birth, including still births, and are issued with a passport
- If these tags or passports are lost, they must be replaced
- Movement of animals onto and off farms must be notified to the AIMS database within legislatively defined timeframes with those responsible for the notification also defined in legislation

- After slaughter, a carcass is tagged with a label containing its unique number, the ear tag number, the farmer's details, and slaughter date and weight, ensuring the final product can be traced back to its origin.

In order to provide the assurances required by the citizens of the EU as to the safety and production standards of the beef allowed for sale within the union this is the level of animal identification and traceability that is required.

Any systems that do not have this level of competent authority oversight and control and that does not have all holdings and animals recorded in this way is not an animal traceability system.

Systems that fall short of this level of traceability are merely mechanisms that facilitate cattle laundering where decisions on identification, timing of identification and notifications to an incomplete database are done on a voluntary basis.



Cattle Identity Cards/Passports & DAFM Herd Registry Book which are key tools used for animal identification and movement controls in Ireland.



The Brazil system/s

The EU Commission has requirements in place for 'traceability' of animals in Brazil in order for the beef to be eligible for export to the EU. This requires animals to be tagged by 10 months of age with a number by farms who want their animals to be eligible for this market, or in some cases, just 90 days before slaughter.

There are 238m cattle in Brazil with no traceability system, no tagging requirements for farmers, no national database of animals.

Tags in Brazil can be purchased without any controls, with any number sought by the farmer, and are sold freely with the device to remove them which completely undermines the credibility of any traceability system be it voluntary or compulsory.

As part of our investigation, we visited farms, marts and factories finding no evidence of any credible individual animal identification systems, only cattle of all ages with no tags, holes in ears where tags were removed or various types of farm management tags with no coherent numbering system.

The intakes at livestock marts had no systems in place to identify individual animals, with animals ran to pens straight from unloading after a paint brand was applied in some cases to differentiate lots.

Over 50% of cattle in Brazil originate from farms of fewer than 50 cattle. Large scale confinements are the common image of beef production in Brazil. It is on this industrial scale farms most cattle are finished for slaughter.

The number of cattle in Brazilian feedlots has increased significantly in recent years, reaching almost 8m, indicating a growing trend towards intensive livestock farming. Despite this, intensive farming still accounts for a small portion of Brazil's total cattle herd, which stands at around 238m.

The animals purchased by these large-scale industrial feedlots originate from these small-scale farms. Some of these industrial sized farm's claim to have cattle eligible to meet the EU import requirements for beef.

This system allows animals on the whim of the large feedlot owner or major processor be determined eligible for the EU market at a point in time before they slaughter them by picking up tags from a local merchant's store and applying them to their animals with no correlation to where they were born or moved to the feedlot from.

These animals are then slaughtered with animals who do not have a tag in their ear and processed in these major slaughterhouses and by some means the beef from these is supposedly maintained separate and only beef from these animals is exported to the EU.



In reality, animal identification in Brazil remains rooted in 'branding' to associate the animal with a ranch as is evidenced from the photos included of our farm, factory and mart visits.

Claims that some small cohorts of animals out of the 238m cattle population are or can meet the full extent of the requirements for a credible traceability system for cattle do not stack up.

The views expressed by farmers in Brazil, both large scale and small, indicated very strong resistance to any attempts to implement compulsory tagging of all animals from birth in the country.

The lack of farmers support, the lack of infrastructure, the scale of the cattle herd, the diversity of production systems are all critical factors that will inhibit the development of a comprehensive traceability system in the country.

The PNIB is Brazil's National Plan for Individual Identification of Cattle and Buffaloes, a phased-in initiative to mandate individual traceability for all animals by 2032. Launched in December 2024, the plan aims to enhance the sanitary security of the livestock sector, meet international

market requirements, and strengthen transparency throughout the supply chain. The system will require electronic identification, but the cost and required infrastructure are challenges, particularly for small producers.

These proposals are to appease demand in particular from the EU to align traceability standards. They are not targeting full implementation for at least another seven years with 2032 the target date.

As part of our investigation these proposals were discussed with Brazilian farmers.

The comment of one farmer with particularly good English perfectly captured the views of farmers on this issue.

'This is Brazil, it won't happen, we don't need it and we shouldn't be putting all of this unnecessary regulation on farmers to appease the EU, there are plenty of markets for our beef that we do not need this for'

Without the strong support of all farmers a traceability system of the scale required in Brazil does not seem feasible.



Ireland v Brazil



Set out below are the tagging and traceability rules and systems in Ireland and Brazil for direct comparison.

IRELAND	BRAZIL
A Complete National Database of all farms and all cattle, including the lands farmed	Not in place
All farms must be approved by the Competent Authority and issued with a unique herd identifier (Herd number) to hold cattle	Not required
Tags can only be purchased from tag suppliers approved by the competent authority and in quantities determined by the competent authority based on the numbers of breeding females on the farm	Not required
All calves must be tagged at birth with two official tags sourced from an approved tag supplier with the unique life long number. These unique numbers are issued in chronological order to herdowners.	Not required
Once tagged it is illegal for a herdowner to remove the tags from the animal's ear	Not illegal
All calves must be registered on the National AIMS database with date of birth, sex, breed, identity of dam and sire	Not required
All calves are provided with a 'passport' when registered containing age, breed, sex, dam and sire details and the unique lifelong identifier	Not in place
If a tag is lost it must be replaced with an approved tag from an approved tag supplier with the original unique identifier number.	Not required
Replacement tags will only be provided to herdowners for animals on their herd profile on AIMS, the issuing of replacement tags or passports to herdowners is recorded by the competent authority.	Not required
All stillborn and fallen animals must be removed from the farm by a licensed knackery and notified to national AIMS database	No controls
All animal movements to another farm must be notified to the national AIMS database	No controls
All farm movements to a mart must be notified to the national AIMS database	No controls
All farm movements to a factory must be notified to the national AIMS database	No controls
All animal movements onto the farm must be notified to the national AIMS database	No controls
All of the animal movements on and off the farm must have the origin/destination recorded on national AIMS data base	No controls
Factories, Marts, Licensed knackeries are equipped to update the national AIMS database of animal movements and legally compelled to do so within legally defined timeframes	Not in place
After slaughter, a carcass is tagged with a label containing its unique number, the ear tag number, the farmer's details, and slaughter date and weight, ensuring the final product can be traced back to its origin.	Not in place



Conclusion

Based on the findings of this study, Brazilian beef production systems do not meet the standards set down for EU farmers and in no way can be credibly certified to even meet the standards required for current exports to the EU.

This two-tier system of beef production cannot continue to be supported and validated by the EU. The proposed Mercusor trade deal cannot be accepted while including beef and poultry.

The DG Sante auditors have consistently identified failures in the systems in Brazil and lack of progress in rectifying issues on audits.

A robust nationally-controlled animal identification system is the bedrock and critical requirement of any traceability and certification system.

This does not exist in Brazil. This report outlines the approach in Brazil to animal identification in comparison to Ireland.

EU citizens expect policy makers and the EU institutions to only allow food that meets EU production standards to enter the EU and be available to purchase.

The proposed Mercusor trade deal fails to protect EU citizens from food produced below the minimum standards required of European farmers.

It also damages the livelihoods of Irish and European farmers by effectively promoting and rewarding production systems where there is no animal traceability, no controls on substances given to these animals including antibiotics, and a substantially different approach to animal welfare and the environment in the cattle rearing and finishing model used on Brazilian farms.

As decision time approaches for ratification of the Mercusor trade deal, the Government and MEP's must honour commitments to EU consumers and EU farmers on standards food allowed onto shelves in the EU must be produced to.

The facts from our investigation show beef from Brazil cannot and does not meet these standards.

The Commission claims of AMR benefits of this agreement have been laid bare by our findings on antibiotic sales, there are no effective controls on antibiotic usage in farm animals in Brazil.

There is no animal identification or traceability on cattle in Brazil.

Beef and poultry concessions under EU–Mercusor must be suspended until Brazil can demonstrate an operational, audited individual animal identification and national traceability system equivalent to EU requirements.

There must be verifiable controls on veterinary antibiotics, including effective prescription-only status and oversight of highest-priority critically important antimicrobials, as a precondition for beef export certification to the EU.

DG SANTE must conduct an urgent, on-the-ground audit focused specifically on AMR-relevant practices (antibiotic access, prescription controls, traceability) before any ratification steps.



Appendix 1

DG SANTE's series of audits since 2017 have repeatedly highlighted a consistent pattern of weaknesses in Mercosur countries' food-safety control systems, particularly Brazil.

These include;

1. **Inconsistent official controls**
 - Insufficient frequency and effectiveness of government inspections at slaughterhouses and cutting plants.
 - Gaps in follow-up when non-compliances are detected.
2. **Reliability of export certification**
 - Weak verification procedures and, at times, certification issued without complete evidence of compliance.
 - Inadequate documentation trails between local and federal authorities.
3. **Hygiene and processing deficiencies**
 - Failures to prevent cross-contamination in some plants (e.g. lack of hand-washing facilities, poor separation of clean/dirty zones).
 - Variable implementation of HACCP and microbiological controls (notably for Salmonella).
4. **Residue and contaminant control weaknesses**
 - Laboratory methods not fully validated; internal quality systems requiring improvement.
 - Delays or incomplete follow-up of non-compliant residue findings.
5. **Hormone and veterinary-drug traceability**
 - Insufficient guarantees that beef from animals treated with banned hormones (notably oestradiol-17β) is excluded from EU exports.
 - Need for stronger segregation systems and verification mechanisms.
6. **Structural and governance challenges**
 - Frequent restructuring of Brazil's competent authorities (e.g. MAPA, DIPOA, SIF) leading to uneven oversight.
 - Resource and training gaps affecting consistency of inspection and enforcement.

Corrective-action follow-through

While Brazil has provided action plans after each audit, DG SANTE notes that several recommendations remain open or only partially addressed in subsequent reviews.

Appendix 2

Veterinary antibiotic prescribing, supply and usage controls in the EU and Ireland

Key Legislative Framework: EU legislation

1. Regulation (EU) 2019/6 on veterinary medicinal products (VMPs) governs the authorisation, distribution and use of VMPs (including antimicrobials) in all EU Member States.
2. Regulation (EU) 2019/4 on medicated feed.

National legislation

In Ireland, the EU regulations are given effect via national statutory instruments (S.I.).

1. S.I. No 36/2022

2. Veterinary Medicinal Products, Medicated Feed and Fertilisers Regulation Act 2023
3. S.I. 462/2024 – Veterinary Medicinal Products Regulations
4. SI 542 of 2024 – Commencement Order for National Electronic Veterinary Prescription System

1) What do farmers require to purchase antimicrobial products?

- A valid prescription issued by a veterinary practitioner with a detailed knowledge of the animal/s condition

2) What is required by a vet to allow them to prescribe an antimicrobial to a farmer?

- Regulation (EU) 2019/6, Article 105.

Article 105

Veterinary prescriptions

1. A veterinary prescription for an antimicrobial medicinal product for metaphylaxis shall only be issued after a diagnosis of the infectious disease by a veterinarian.
2. The veterinarian shall be able to provide justification for a veterinary prescription of antimicrobial medicinal products, in particular for metaphylaxis and for prophylaxis.
3. A veterinary prescription shall be issued only after a clinical examination or any other proper assessment of the health status of the animal or group of animals by a veterinarian.
 - Regulation (EU) 2019/6, Article 107 (1) and (2).

Article 107

Use of antimicrobial medicinal products

1. Antimicrobial medicinal products shall not be applied routinely nor used to compensate for poor hygiene, inadequate animal husbandry or lack of care or to compensate for poor farm management.
2. Antimicrobial medicinal products shall not be used in animals for the purpose of promoting growth nor to increase yield.
 - S.I. 462/2024, 7

Record keeping for veterinarians

7. (1) A veterinarian shall keep copies of veterinary prescriptions issued by him or her, including those for medicated feed, at his or her premises, that are not held on the national database for a period of at least 5 years. The records shall be made available to an authorised officer on request.

(2) A veterinarian shall maintain, at his or her premises, records which shall be made available to an authorised officer on request, in relation to each client containing at least the following:

- (a) the date of each visit to the premises on which the animal or group of animals was seen or the date they were properly assessed,
- (b) the identification of the animals clinically examined, or the subject of a proper assessment,
- (c) the clinical condition diagnosed or disease to be prevented,
- (d) details of treatment, including details of all medicinal products, for each clinical condition diagnosed or disease to be prevented,
- (e) details of any medicine administered to an animal,
- (f) quantity of medicinal product required for the treatment of each clinical condition diagnosed or disease to be prevented,

(g) a cross-reference to any relevant results of laboratory tests, or any other test results undertaken, or records evaluated for the purpose of diagnosis or proper assessment, and

(h) a statement outlining the justification for a veterinary prescription if prescribing an antimicrobial veterinary medicinal product, in particular for metaphylaxis and for prophylaxis.

[3] This Regulation is in addition to the requirements of Article 103(3) of the VMP Regulation in so far as it applies to the sale or supply of medicinal products subject to a prescription.

3) What is required on a veterinary prescription?

- Article 105(5) of Regulation (EU) 2019/6.

5. A veterinary prescription shall contain at least the following elements:
 - (a) identification of the animal or groups of animals to be treated;
 - (b) full name and contact details of the animal owner or keeper;
 - (c) issue date;
 - (d) full name and contact details of the veterinarian including, if available, the professional number;
 - (e) signature or an equivalent electronic form of identification of the veterinarian;
 - (f) name of the prescribed medicinal product, including its active substances;
 - (g) pharmaceutical form and strength;
 - (h) quantity prescribed, or the number of packs, including pack size;
 - (i) dosage regimen;
 - (j) for food-producing animal species, withdrawal period even if such period is zero;
 - (k) any warnings necessary to ensure the proper use including, where relevant, to ensure prudent use of antimicrobials;
 - (l) if a medicinal product is prescribed in accordance with Articles 112, 113 and 114, a statement to that effect;
 - (m) if a medicinal product is prescribed in accordance with Article 107(3) and (4), a statement to that effect.
 - S.I. 462/2024, 3 (2), there are some additional requirements in relation to what is required on a prescription.

(2) In addition to the requirements of Article 105(5) of the VMP Regulation, a veterinary prescription shall contain the following elements—

- (a) a prescription identifier;
- (b) the Veterinary Council of Ireland Registration Number of the prescribing veterinarian, and
- (c) where applicable, the marketing authorisation number relating to the product being prescribed.

4) What is the validity period of the prescription?

- For an antimicrobial medicinal product - Article 105(10) of Regulation (EU) 2019/6.

10. A veterinary prescription for antimicrobial medicinal products shall be valid for five days from the date of its issue.

5) What controls are there on the volumes that can be prescribed?

- Regulation (EU) 2019/6 Article 105 (6).

6. The quantity of the medicinal products prescribed shall be limited to the amount required for the treatment or therapy concerned. As regards antimicrobial medicinal products for metaphylaxis or prophylaxis, they shall be prescribed only for a limited duration to cover the period of risk.

6) Can retailers sell antimicrobials to farmers?

- S.I. 462/2024, Regulation 10.

10. A retail responsible person from a premises to which a retailer's licence relates is permitted to dispense a veterinary medicinal product designated as prescription only medicine (POM), if the person requesting the product has a veterinary prescription relating to the product in his or her possession or a prescription is recorded for that person and for the product and is accessible on the national database, in the case of the following—

- (a) an intramammary veterinary medicinal product,
- (b) an antifungal veterinary medicinal product,
- (c) an antiparasitic veterinary medicinal product,
- (d) an immunological veterinary medicinal product,
- (e) an injectable digestive stimulant, or
- (f) an injectable vitamin and mineral.

7) Recording requirements for suppliers of VMPs

- Regulation (EU) 2019/6, Article 103 (3)

Article 103

Retail of veterinary medicinal products and record keeping

3. Retailers of veterinary medicinal products shall keep detailed records of the following information in respect of each transaction of veterinary medicinal products requiring a veterinary prescription under Article 34:
 - (a) date of the transaction;
 - (b) name of the veterinary medicinal product including, as appropriate, pharmaceutical form and strength;
 - (c) batch number;
 - (d) quantity received or supplied;
 - (e) name or company name and permanent address or registered place of business of the supplier in the event of purchase, or of the recipient in the event of sale;
 - (f) name and contact details of the prescribing veterinarian and, where appropriate, a copy of the veterinary prescription;
 - (g) marketing authorisation number.

8) Recording requirements for farmers

- S.I. 462/2024, 19. (1) (2) (3).

Record keeping for owners and keepers of food producing animals

19. (1) The record of all medicinal products to be kept in accordance with Articles 108 and 109 of the VMP Regulation by the owner or keeper of a food producing animal shall also include medicinal products not subject to a prescription.
- (2) In addition to paragraph (1) the following must also be kept by the owner or keeper of a food producing animal, namely –

- (a) the name of the person who administered a medicinal product to such an animal,
 - (b) date of expiry of the withdrawal period,
 - (c) the quantities of expired or waste medicinal products and unused, expired or waste medicated feed and intermediate products, and
 - (d) the method of disposal of that referred to in subparagraph (c).
- (3) Records referred to in this Regulation, including copies of veterinary prescriptions, shall be kept by the owner or keeper of a food producing animal for a period of at least 5 years and those records shall be made available on request to an authorised officer.

Appendix 3

Open Sale of Critically Important Antibiotics in Brazilian Beef Production: Public Health and Equivalence Concerns for the EU–Mercosur Deal

Dr. Patrick Wall gives his expert opinion

Introduction

Two Irish citizens attending the world Meat Congress in Brazil took the opportunity to visit several Farm shops revealing potent injectable antibiotics and anti-inflammatories stacked openly on the shelves, sold over the counter with no prescription, no screening questions and no apparent effort to conceal their availability.

Among the products freely available were combinations of ceftiofur and ibuprofen, tulathromycin and ketoprofen, penicillin and streptomycin, as well as florfenicol, tylosin, oxytetracycline and flunixin.

For EU observers, this is not a marginal detail of local practice: it goes to the heart of the Union's strategy on antimicrobial resistance (AMR), public health protection and the principle that imported food should be produced to standards equivalent to those required inside the EU

AMR and public health

AMR as a major health burden

Antimicrobial resistance is already responsible for hundreds of thousands of deaths worldwide every year and is recognised by WHO, ECDC and the European Commission as one of the greatest current threats to public health.

In the EU/EEA alone, tens of thousands of deaths annually are attributed to infections caused by antibiotic-resistant bacteria.

Zoonotic bacteria such as Salmonella, Campylobacter and pathogenic E. coli move along the food chain from animals to humans. Resistance genes acquired and selected on farms can therefore manifest as untreatable or hard-to-treat infections in European hospitals.

This is the context in which the EU has adopted a One Health approach to AMR, linking human health, animal health and the environment.

EU policy direction: reduction and restriction

The EU has made clear legal and policy commitments:

Regulation (EU) 2019/6 on veterinary medicinal products:

Bans use of antimicrobials for growth promotion.

Severely restricts prophylactic and metaphylactic use.

Strengthens controls on marketing, prescribing and use of veterinary antimicrobials with AMR explicitly cited as a core concern.

Farm to Fork Strategy & EU One Health Action Plan on AMR:

Target to reduce overall sales of antimicrobials for farmed animals and aquaculture by 50% by 2030.

Strong emphasis on prudent use and preservation of antimicrobials that are critically important for human medicine.

List of antimicrobials reserved for human use (Implementing Regulation and Delegated Acts):

A defined group of antimicrobials is reserved exclusively for human medicine.

From 2026, food imported into the EU will not be allowed to come from animals that have been treated with these "reserved" substances, even if such use is allowed in the exporting country.

In addition, at Member State level (including Ireland), veterinary antimicrobials are strictly prescription-only, with detailed controls on wholesale distribution, retail sale, record-keeping and farm-level use.

The EU has chosen to reduce, restrict and in some cases fully prohibit certain antimicrobials in animals, and to back this with legislation, enforcement and measurable reductions in use.

Why over-the-counter (OTC) availability of these drugs is a red flag

When powerful systemic antimicrobials are available OTC to farmers, several predictable problems arise:

Higher volumes and routine use

OTC access strongly encourages routine, herd-level treatment without veterinary diagnosis.

Antimicrobials are more likely to be used for mild, non-specific or even non-bacterial problems, simply because they are at hand.

Misuse: wrong drug, dose and duration

Without veterinary oversight, there is a higher risk of incorrect dosing, inappropriate treatment length and use in situations where antibiotics are unnecessary (e.g. viral infections).

These are classic conditions for selecting resistant bacteria.

Sustained selection pressure on zoonotic and commensal bacteria

Bacteria in the animal gut, on the farm environment and in manure are repeatedly exposed to these drugs, leading to selection and spread of resistant strains and resistance genes.

These can move along the food chain and into the wider environment, including via imported meat.

Contradiction with WHO and EU "prudent use" principles

WHO guidelines call for limiting the use of medically important antimicrobials in food-producing animals, restricting them to prescription use and discouraging their use for routine disease prevention.

EU and EMA guidance classify many of the molecules observed (3rd-generation cephalosporins, macrolides) as highest priority or "Restrict" categories, recommending minimal and highly controlled use.

That antibiotics are being openly displayed and sold without prescription in Brazilian farm outlets is directly at odds with the direction taken by EU policy and global AMR guidance.

The specific substances observed – and why they matter

The products identified in the Brazilian farm shops include several classes that are highly significant for human medicine and AMR. This section focuses on why their uncontrolled animal use is problematic.

Ceftiofur (3rd-generation cephalosporin) + ibuprofen

Human health importance

Ceftiofur is a third-generation cephalosporin. This class is listed by WHO as a "highest-priority critically important antimicrobial" (HPCIA) for human medicine.

Third-generation cephalosporins are essential for treating severe infections such as sepsis, meningitis and invasive salmonellosis in humans, often when other antibiotics have failed.

Link to resistance

Use of ceftiofur in poultry and other food animals has been associated, in several studies, with increased prevalence of cephalosporin-resistant *Salmonella* and *E. coli* in animals, meat and, ultimately, human infections.

Resistance mechanisms (e.g. ESBL enzymes) are frequently plasmid-mediated and can spread between bacterial species.

EU/European Medicines Agency (EMA) position

EMA categorises 3rd–4th generation cephalosporins as a class whose use in animals should be restricted and minimised, ideally based on culture and sensitivity. They are considered drugs of last resort in animal health.

Implications of OTC availability

An OTC injectable combining ceftiofur with ibuprofen essentially packages a highest-priority antibiotic with a painkiller.

This encourages unsupervised "one-shot" treatments for ill-defined conditions, with no microbiological diagnosis and no consideration of alternatives.

Such usage patterns are precisely what EU policy and WHO AMR strategies aim to avoid.

Macrolides: tylosin, tulathromycin (often with ketoprofen)

Human health importance

Macrolides (e.g. erythromycin, azithromycin, clarithromycin) are critically important in human medicine, especially for severe *Campylobacter* infections, respiratory infections and some sexually transmitted and atypical infections.

Link to resistance

Extensive use of macrolides in food animals selects for macrolide-resistant *Campylobacter* and other bacteria, with cross-resistance to macrolides used in humans.

High macrolide use in poultry and livestock has been associated with elevated proportions of macrolide-resistant *Campylobacter* isolates in both animals and people.

EU/EMA position

Macrolides are also in the EMA "Restrict" category: they should be used sparingly in animals and only when clearly necessary.

Implications of over the counter (OTC) combinations

Tulathromycin and tylosin are widely used in cattle and pigs for respiratory disease. When combined with NSAIDs such as ketoprofen, they become attractive "quick fixes" for any respiratory signs in a herd.

Ready OTC access increases the likelihood of whole-group treatments, repeated courses and use without proper diagnosis.

This increases selection pressure for macrolide resistance in zoonotic bacteria directly relevant to human health.

Florfenicol

Role and risks

Florfenicol is a phenicol antibiotic used in animals. Although not a frontline human drug, it is closely related to chloramphenicol and resistance genes linked to florfenicol (floR, cfr and others) often reside on multi-resistance plasmids.

These plasmids can co-carry resistance to critical human antibiotics (such as cephalosporins and fluoroquinolones).

AMR concern

Use of florfenicol can therefore co-select for resistance to multiple unrelated classes. Even if the human-critical drug is not used on the farm, florfenicol exposure can maintain plasmids that carry its resistance gene.

Implications

Unregulated florfenicol use contributes to a reservoir of multi-resistant bacteria and resistance genes in the farm and environmental microbiota, which is inconsistent with the EU goal of reducing AMR pressure across the One Health spectrum.

Oxytetracycline and flunixin meglumine

Oxytetracycline

Tetracyclines are widely used antimicrobials in humans and animals. Resistance to tetracyclines is extremely common and is driven by decades of heavy use in livestock.

Tetracycline resistance genes (tet) are prevalent in animal and environmental bacteria and often sit on mobile genetic elements that also carry other resistance genes.

Flunixin

Flunixin is a non-steroidal anti-inflammatory drug (NSAID) used for pain and inflammation in animals. It carries its own residue and toxicity concerns and must be used within regulatory withdrawal periods.

Combination products

Injectable products combining oxytetracycline with flunixin offer both antibiotic and anti-inflammatory effects.

As with the other combinations, they encourage the repeated use of broad-spectrum antibiotics whenever animals are unwell, without veterinary oversight, increasing AMR selection.

Penicillin and streptomycin

Streptomycin is an aminoglycoside still considered important in human medicine in certain settings (including some tuberculosis regimens).

Resistance to aminoglycosides is mediated by genes that are commonly found on plasmids and integrons, often alongside genes conferring resistance to multiple other antibiotics.

The penicillin–streptomycin combination offers very broad antibacterial coverage and has historically been used as a "catch-all" injectable in livestock. In an OTC setting, this strongly favours non-specific and repeated use and contributes to maintaining multi-resistant bacterial populations.

Equivalence, trade, and the credibility of EU AMR policy

The core question

The EU has chosen to:

Ban growth-promoter uses of antibiotics.

Greatly reduce prophylactic and metaphylactic use.

Restrict use of critically important classes (3rd-generation cephalosporins, macrolides, fluoroquinolones).

Reserve some antimicrobials exclusively for human use, including in imports.

Channel CAP funds into improving animal health and welfare and reducing antimicrobial use on EU farms.

At the same time, the fact-finding mission to Brazil observed that powerful antibiotics – including third-generation cephalosporins, macrolides and other broad-spectrum agents – are being sold over the counter in farm outlets, with no effort to conceal their availability.

The technical question for Brussels is therefore not primarily about price or competition. It is:

Is it consistent with EU AMR policy, and with the principle of equivalence, to substantially increase imports of beef from production systems where medically important antimicrobials are openly available OTC and can be used without veterinary prescription?

Public health cannot be conditional

From a scientific and public-health standpoint:

AMR does not respect borders. Resistant bacteria and resistance genes arising on Brazilian farms can and do travel via food, people and the environment.

The EU's own agencies (EFSA, ECDC, EMA) have repeatedly emphasised that reducing antimicrobial use in animals is a key part of protecting EU citizens from AMR.

Allowing unconstrained OTC use of highest-priority antibiotics in exporting countries, while tightly restricting the same substances within the EU, undermines the credibility and effectiveness of the EU's AMR strategy.

Either AMR is accepted as a major public-health threat that requires consistent, cross-border action, or it is treated as secondary to trade liberalisation. The current EU legislative framework clearly adopts the former position.

Consistency with WTO and trade principles

This is not an argument for protectionism. It is an argument for consistency:

The EU is entitled under WTO rules to take measures necessary to protect human, animal or plant life or health, provided they are based on science and applied in a non-discriminatory manner.

The same scientific rationale that led to Regulation 2019/6, the "reserved for human use" list and the Farm to Fork AMR targets applies equally to imports.

Applying equivalent standards, especially regarding the use of highest-priority antimicrobials, is necessary to avoid undermining both EU farmers who comply with stricter rules and the EU's own AMR commitments.

Conclusions

1. Open OTC sale of powerful veterinary antibiotics in Brazil, including 3rd-generation cephalosporins and macrolides, is fundamentally incompatible with the EU's One Health approach to AMR and with WHO guidance on prudent use of antimicrobials in food animals.
2. The specific substances observed: ceftiofur + ibuprofen, tylosin, tulathromycin + ketoprofen, florfenicol, oxytetracycline + flunixin, penicillin + streptomycin – include several classes that are critically important for human medicine and/or strong drivers and co-selectors of resistance in zoonotic and commensal bacteria.
3. OTC availability without prescription greatly increases the risk of misuse, overuse and routine herd-level use, amplifying selection pressure for resistant bacteria that can reach EU consumers via

imported meat.

4. Free availability of antibiotics and anti-inflammatories can be used to mask or compensate for poor husbandry, weak biosecurity and inadequate disease prevention. Reliance on drugs instead of good management may indicate underlying animal health and welfare problems on supplying farms. This runs counter to EU policy, CAP objectives and strong consumer expectations that imported meat should come from systems with high welfare and robust preventive husbandry, not from animals kept healthy "by syringe."
5. EU law and policy (Regulation 2019/6, Farm to Fork, the "reserved for human use" list, national implementation measures) are built on the premise that AMR is a serious public-health threat and that the use of medically important antimicrobials in animals must be tightly controlled.
6. Equivalence is therefore not a theoretical issue. If the EU allows large volumes of beef from systems where these drugs are freely available OTC, it risks exporting production while importing AMR risk – undermining both EU farmers and EU citizens.

On public-health and scientific grounds, it is entirely reasonable for EU decision-makers to:

Scrutinise the actual enforcement of prescription-only rules and antibiotic stewardship in exporting countries.

Require robust, verifiable guarantees that production systems supplying the EU do not rely on OTC and routine use of highest-priority antimicrobials.

Ensure that any trade agreement is fully aligned with the EU's own AMR strategy and One Health commitments.

Public health cannot be compromised or selectively applied to facilitate trade deals. If AMR is the major global health threat that the EU and WHO say it is, then the standards applied to EU farmers must also inform the conditions placed on imports.

Appendix 4

In order to farm cattle in Ireland the farmer must;

1. Be allocated a Herdnumber for his holding by the Department of Agriculture. This is the number under which all of the lands farmed and animals owned will be attributed to while on the farm and is the critical first step in animal identification and traceability. The process involves an application to the Department of Agriculture for acceptance as a suitable person to be responsible for the animals and identifying all the lands, housing for the animals and animal handling facilities that would be part of the holding. The Department of Agriculture visit and inspect the holding, taking into account the suitability of the housing facilities, handling facilities and ensuring the boundary fencing is fully stockproof. If these criteria are met the applicant is granted permission to own cattle and issued with a Herdnumber for the farm. All farms with cattle will first have gone through this process.
2. Each herd must retain a 'herd register' in either electronic or physical format which contains the identity of all animals on the holding, information on each animal on how and when it entered the holding born on the farm or purchased in and the location it moved onto the farm from, i.e. a mart or other farm. This herd register also plays a crucial role in recording all of the medical treatments the animal receives in its lifetime. Farmers are legally required to record all medicines administered to animals in this registered specific to each individual animal. The information required includes, the product used, the volume

- administered, the batch numbers of the product, the withdrawal periods for the product and whether it was administered by the veterinarian of the herdowner.
3. All animals in Ireland must be identified with two tags, one in each ear with a unique individual number for that animal from birth, these tags include, the official logo, the Numeric Country Code, the herd Designator and the individual Animal Number. Once national identifier tags are applied to an animal in Ireland it is illegal for a herdowner to remove these tags.
 4. The Department of Agriculture are the competent authority responsible for the administration and enforcement of the Animal Identification and Traceability System.
 5. The national AIMS database is managed and run by the competent authority. All farms are registered on this database and all cattle on farms
 6. This national database of all farms and all cattle is critical to the effective birth to death with all movements in between animal traceability system in Ireland and for any traceability system to be credible
 7. The Department of Agriculture approve Tag supply companies to supply tags for cattle in Ireland. Only tags from approved suppliers can be used for the purpose of identifying animals on the AIMS data base
 8. Each farmer in Ireland has a maximum allocation of Tags for newly born animals for their farm determined by the Department of Agriculture based on the numbers of breeding females on the farm. Where there is need for additional tags permission must be given by the Department of Agriculture. The approved tag supply companies have access to this information and can only provide the maximum number of tags allowed to each herdowner.
 9. Each animal at birth must be tagged in both ears with the official unique identifier tags for that farm and that animal and registered on AIMS
 10. The registration process requires the date of birth of the animal, the sex of the animal, the breed of the animal, the identity of the dam and the sire of the animal
 11. This information is stored on the AIMS and generates a 'passport' for the animal which is a physical card for the animal containing all of the information outlined above and the details of the herdowner. (Picture of passport)
 12. This unique identifier is the identity of that animal for its lifetime; it and the physical 'passport' must accompany that animal for its lifetime.
 13. If a tag is lost a replacement tag must be purchased for that animal with the same number from one of the approved tag suppliers. Only tags for animals that are present on the farm based on the information on the AIMS database can be provided to farmers by the approved tag suppliers
 14. Similarly, if a passport is lost a replacement must be ordered from the Department of Agriculture, only passports for animals on the AIMS profile of the farm will be provided to the herdowner
 15. The movements of all animals of and onto farms must be notified to the AIMS database, this includes;
 - i. On farm deaths, all on farm deaths (Fallen animals) must be removed from the farm by a knackery service, which must be licensed by the Department of Agriculture, these operators are required by legislation to notify the AIMS database of the removal of the animal, collect the passport of the animal at the time of collection and issue a receipt to the herdowner identifying the animal removed. The herdowner must record this event on the herd register showing where the animal went from the farm.
 - ii. farm to farm sales, farmers must first apply to the Department of Agriculture for a 'compliance cert', by providing the identity of the animals intended to move and where possible the identity of the location they are moving to, i.e. the herd number of the receiving farm. If approved, both herds must then confirm the movement within 7 days to the AIMS database
 - iii. mart sales, on entry into a mart sale all cattle have their passports scanned onto the mart system which is connected to the AIMS data base, the tag numbers of the animals at the point of entry to mart sales are correlated with the passports. Following the sale the mart is legally required to notify the new location of the animal to the AIMS database, including where the animal returns home to the same farm. The AIMS retains a record of the animal's presence in the mart on that day. If the animal is sold the herdowner if using a physical register is required to record the specific mart identifier on the farm register for the animal. The new owner will have the animal transferred to their farm profile on AIMS by the mart but if using a physical register must record the animal on their herd register and the identity of the mart it was purchased in
 - iv. factory sales, on arrival at the factory the passports are scanned onto the AIMS data base by Department of Agriculture personnel, the tag numbers of the animals are correlated with the passports and the factory is legally required to notify the AIMS database of the slaughter on the animal, this information is held on the AIMS database including the specific factory identifier. The herdowner is required to record this on the herd register if using a physical register. After slaughter, a carcass is tagged with a label containing its unique number, the ear tag number, the farmer's details, and slaughter date and weight, ensuring the final product can be traced back to its origin.
- There are defined timeframes for all of these notifications set out in legislation for farmers, marts and factories.





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