

**INDUSTRY STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

SN/T 4662-2016

Quarantine protocol for mink viral enteritis

水貂病毒性肠炎检疫技术规范

(English Translation)

Issued on: December 12, 2016

Implemented on: July 1, 2017

**Issued by: The General Administration of Quality Supervision, Inspection
and Quarantine**

Table of Contents

- Foreword
- 1 Scope
- 2 Normative references
- 3 Abbreviations
- 4 Clinical diagnosis
 - 4.1 Clinical features
 - 4.2 Pathological changes

Foreword

This standard was drafted in accordance with the rules given in GB/T 1.1-2009.

This standard is proposed and managed by the National Certification and Accreditation Administration.

This standard was drafted. Liaoning Entry-Exit Inspection and Quarantine Bureau of the People's Republic of China, Institute of Special Products of the Chinese Academy of Agricultural Sciences, Jilin Agriculture University, Jilin Province, China and South Korea Institute of Animal Science.

1 Scope

This standard specifies the virus isolation and identification of leech virus enteritis, agar immunodiffusion test (AGID), convective immunoelectrophoresis Diagnostic techniques such as (CIEP) and polymerase chain reaction (PCR).

This standard applies to quarantine, surveillance and epidemiological investigation of leech virus enteritis.

2 Normative references

The following documents are indispensable for the application of this document. For dated references, only dated versions apply to this article.

Pieces. For undated references, the latest edition (including all amendments) applies to this document.

GB/T 6682 Analytical laboratory water specifications and test methods

3 Abbreviations

The following abbreviations apply to this document.

CPE. Cytopathic effect CRFK. Cat kidney passage cells (CrandelFelineKidneyCels) MEV. mink enteritis parvovirus (Minkenteritisparvovirus)

4.1 Clinical features

In the early stage of illness, the leeches are depressed, the appetite is reduced or abolished, the thirst is obviously enhanced, and the body temperature rises above 40 °C. Symptoms of gastrointestinal disease Obviously, vomiting yellow-green watery or porridge-like substance, diarrhea, discharge of soft to watery or pus-like feces, then visible blood in the stool, mucous membrane shedding and undigested feed residue, mucus and a lot of air bubbles, some mixed with bloodshot or blood clots. The most characteristic difference from the general squat is that There is a hollow tube in the feces that is mostly grayish white, sometimes pale yellow or pink, dull and fleshy. It is called a mucus tube or mucous membrane.

Column, which consists of exfoliated intestinal mucosa, fibrin, and intestinal mucus. Another characteristic of this disease that is different from other enteritis is that during the peak period of onset, the group of faeces is in a variety of colors, such as pink, bright red, dark red, black red, grass green, dark green, light yellow, orange, dark yellow, light gray and dark gray.

See Appendix A for other details.

4.2 Pathological changes

Mainly in the gastrointestinal tract, the small intestinal mucosa is fibrin, necrotic, hemorrhagic inflammation. Extreme expansion of the intestine when it is normal 1 to 2 times, the wall is very thin and nearly transparent, especially in the jejunum and ileum. The intestinal lumen is filled with gas or thin contents. Due to bleeding the appearance of the intestines is bright red or dark red, black red, and the contents are red or dark brown soy sauce. In some cases, the colorectal mucosa is visible.

Bleeding, the intestinal contents contain a large amount of dark red or yellow-green viscous cellulosic material. Fibrinous in the intestinal wall of subacute and chronic cases Necrotic foci. The stomach is dilated, the wall is thin, and it is balloon-shaped, containing a thin sauce-like contents. Mucosa at the bottom of the stomach and pylorus, congestion, shedding, a bit or plaque Bleeding. In some cases, there are multiple ulcers on the stomach wall. Gallbladder expansion is significant, full of yellow-green or black-green viscous bile. Hepatomegaly, fragile texture, Mostly dark red. Some cases have spleen, kidney swelling, and necrosis. There is bleeding point in the epicardium, and the myocardium is soft and

degeneration.