

Beekeeping Biosecurity & Best Practices Checklist

Audit _____ **Conducted** _____ **by** _____
Date _____ **Apiary** _____ **Owner** _____ **&** _____ **Contact** _____
Information _____ **Apiary** _____ **Address/GPS** _____
Coordinates _____

| Recommended Best Practices | Yes | No | Comments |
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| Training | | | |
| Complete training/maintain current knowledge of beekeeping through CE (beekeeper and employees) | | | |
| Possess knowledge of and be able to recognize all exotic and endemic threats to honey bee health in all hive locations | | | |
| Know current regulations and disease reporting requirements for all hive locations | | | |
| Record Keeping/Traceability | | | |
| Document completion of all training programs for beekeeper and employees | | | |
| Maintain current contact information for State Apiarist/State Department of Agriculture for all hive locations | | | |
| Record number of apiaries and number of hives within each apiary | | | |
| Record any introduction of new stock, including source | | | |
| Record migratory hive movements, including routes taken and dates | | | |
| Record date, origin, and type of feeding supplements administered | | | |
| Record date, origin, dose, and use of any natural or medicinal treatments administered | | | |
| Record date, origin, and use of any chemicals or cleaning products used on hive equipment | | | |
| Record findings of all hive inspections conducted throughout the season including normal/abnormal findings, suspected/diagnosed diseases, mortalities, colonies affected | | | |
| Mark all colonies and apiaries with unique identification | | | |

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| Mark all queens according to international color code | | | |
| Apiary Placement | | | |
| Ensure easy access to apiary | | | |
| Ensure apiary/surrounding area is well maintained | | | |
| Ensure hives are protected from inclement weather/other hazards to the extent possible | | | |
| Ensure presence of diverse, natural food sources | | | |
| Ensure presence of good quality water supply | | | |
| Possess knowledge of nearby farming practices, including pesticide use | | | |
| Possess knowledge of nearby colonies and management practices utilized | | | |
| Sourcing | | | |
| Purchase queens/bees from trusted sources and ensure they are pest-free to the extent possible | | | |
| Choose appropriate honey bee strain for regional environment of hive location/potential pathogen exposures | | | |
| Isolate recovered wild swarms from apiary until thoroughly inspected/miticides applied (if needed) | | | |

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| Purchase hive equipment from reputable source made with appropriate materials | | | |
| Clean and disinfect any borrowed/secondhand equipment before use | | | |
| Maintain hive boxes/frames/foundations over time including removal of dark wax combs and replacement of hive frames every 3 years | | | |
| Minimize exchange of frames and supers between colonies and apiaries to the extent possible | | | |
| Remove all empty hives from apiary immediately | | | |
| Store equipment in well-ventilated/chemical free area and store hive boxes in crisscross pattern | | | |
| Obtain supplementary feed products from trusted source | | | |

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| and store/handle appropriately | | | |
| Ensure supplemental feed is appropriate for needs of colony and time of year (winter/early spring = candy; late spring/fall = syrup; honey sourced only from colony/apiary in which hive is located) | | | |
| Hive Inspections | | | |
| Conduct routine hive inspections (approximately every 15 days during beekeeping season) | | | |
| Observe and document the following during inspection: activity of bees outside and within hive, brood patterns, pollen/honey storage, signs of disease/pests | | | |
| Implement and document presence of an integrated pest management program | | | |
| Isolate any diseased colonies from apiary that can be saved (as allowable by law) | | | |
| Humanely euthanize any weak hives or those that pose danger to other colonies | | | |
| Sanitation/Hygiene | | | |
| Disinfect all small tools/clothing between inspection of different apiaries and after inspection of any apparently diseased colony | | | |
| Ensure that all workers/visitors/vehicles are clean before entering and leaving the apiary | | | |
| Display signage at apiary/property entrances with apiary owner's name/contact information and a request to obtain permission before entering | | | |
| Migratory Colonies | | | |
| Minimize movement of hives to the extent possible | | | |
| Contact destination State Department of Agriculture prior to any hive movement to determine health certification requirements | | | |
| Move hives only at night/early morning | | | |
| Feed colonies carbohydrate supplement prior to moving | | | |
| Possess knowledge of all established/exotic pathogens and disease reporting regulations in region to which hives are being moved | | | |

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| Cover and secure hives/equipment prior to moving | | | |
| Assess any potential disease threat due to poorly managed hives near new location | | | |
| Keep accurate records of all hive movements | | | |
| Follow all transportation regulations | | | |

(Taken from *Honey Bee Medicine for the Veterinary Practitioner*, Obink and Roth, Chapter 17, Wiley Press, 2021)