



National Winter Loss and Management Surveys

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Welcome to the National Bee Informed Partnership Annual Survey

The Bee Informed Partnership is an extension project that endeavors to decrease the number of managed honey bee colonies that die over the winter.

NOTE:

The red * indicates required questions.

Do not use your browser's Back button but rather the "**Back**" button in the survey page.

This survey has two parts:

1. Winter loss survey (takes 10 minutes to complete and continues efforts made during the last 5 years)
2. Management survey (takes 20 minutes to complete and asks management questions in an attempt to find factors that contribute to or reduce losses)

When completing the winter loss survey you will be given the option to continue on to the management survey. We hope you do, but you are under no obligation to do so.

1. Do you wish to continue on to the winter loss survey now?*

Yes No



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Are you sure you don't want to participate?

You have indicated you do NOT wish to participate in the National Winter Loss and Management survey. If this is in error please proceed with the Survey (yes below). If you don't want to participate or wish to participate latter consider visiting [beeinformed.org](http://www.beeinformed.org) for some insights on how the survey results can benefit the decisions in your colony management

2. Please select **Yes** below to continue with the survey or go to <http://www.beeinformed.org/> for more information about the survey.*

Yes No



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Survey Agreement

Your participation in this research is confidential. At the end of the study you will be asked if you would like to receive a summary of results of this study and if you are willing to have us contact you to participate in other bee health surveys. If you answer yes to one or both of these questions, we will ask for your email address. Providing your email address is completely voluntary. We will remove this address from your survey responses and store it securely as a separate, encrypted, password protected file. There will be no way that your responses could be linked to you in the survey dataset we will analyze and store. This dataset will also be stored and secured in an encrypted, password protected file. In any publication or presentation resulting from this research, no personally identifiable information will be disclosed. Because this is an online survey, your confidentiality will be kept to the degree permitted by the technology being used. No guarantees can be made regarding the interception of data sent via the Internet by any third parties.

3. I have read this consent and wish to proceed.*

I Agree

I Disagree



Winter Loss Survey

The following questions pertain to any losses you may have suffered over the winter (defined as the period between Oct 1 2011 and April 1 2012).

4. In what state(s) did you keep your colonies in between April 2011 -April 2012?*

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- District of Columbia
- Delaware
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Vermont
- Virginia
- Washington
- West Virginia
- Wisconsin
- Wyoming
- Other, please specify

5. How many **living colonies/nucs** did you have on October 1, 2011?*

6. How many splits, increases, and / or colonies did you **make / buy** between October 1, 2011 and April 1, 2012? (increases surviving on April 1, 2012 should have been included in the total provided in the question above.)*

7. How many splits, increases, and / or colonies did you **sell** between October 1, 2011 and April 1, 2012?*

8. How many **living colonies/nucs** did you have on April 1, 2012?*



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Winter Loss Summary

9. You indicated you had:

colonies on October 1, 2011

colonies on April 1, 2012

Increased (through purchase or splitting) your operation size between October 1 and April 1 by colonies

Decreased (through giving away or selling) your operation size between October 1 and April 1 by colonies

This means you suffered a total winter mortality of approximately %

How winter losses are calculated: $\text{Losses} = (\text{Colonies Oct 1} + \text{Increases} - \text{Decreases} - \text{Colonies April 1}) / (\text{Colonies Oct 1} + \text{Increases} - \text{Decreases})$

Is this correct?*

NOTE: If this is NOT correct; please click the Survey's "Back" button below (not your browser's back button) and change your answers until these values are what you expect.



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Winter Loss Survey

10. Is this year's winter loss higher or lower than last year?

- Higher Lower Same Don't Know Did not keep bees last year

11. What **percentage** of the colonies that died between October 1st and April 1st were lost without dead bees in the hive or apiary? The value must be between 0 and 100, inclusive.

12. What **percentage** of loss, over this time period, would you consider acceptable? The value must be between 0 and 100, inclusive.

13. In your opinion, what factors were the main cause (or causes) of colony death in your operation between October 1, 2011 and April 1, 2012? Select all that apply.

- Queen failure
- Starvation
- Varroa mites
- Nosema disease
- Small Hive Beetles
- Poor wintering conditions
- Pesticides
- Weak in the fall
- Colony Collapse Disorder (CCD)
- Don't know
- Other, please specify

14. What **percentage** of your hives did you send to or move into California almond orchards for pollination? The value must be between 0 and 100, inclusive.

15. How many times, on average, did you move your colonies last year?

16. In what zip code is your operation based (optional)?

17. Would you like to continue on to the **National Bee Management Survey**? You will not be able to take the Management portion of this survey at a later date if you indicate "No" (this will take 20 - 30 minutes to complete).

Yes No



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Winter Loss Survey

This ends the winter loss survey.

18. Would you be willing to be contacted by our survey team in order to participate in other honey bee related surveys, review this survey and receive summaries of survey results?

Yes No

19. If you would like to be contacted, please enter your email address here:

20. Do you have any comments about this survey?

Thanks for participating in the 2011-2012 Honey Bee Winter Loss survey!



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Management Survey

The Management Survey begins here

This portion of the survey has 3 parts:

- 1) Questions to quantify losses over the entire season
- 2) Questions to record your management practices
- 3) Questions to understand your demographics

21. What was the **largest** number of living colonies you owned between April 1, 2011 and April 1, 2012?

22. What was the **smallest** number of living colonies you owned between April 1, 2011 and April 1, 2012?

We asked you above about your overwintering losses, now we want to know about Colony Summer Loss.

23. How many **living** colonies did you have last spring (on April 1, 2011)?*

24. How many splits, increases, and / or colonies did you **make / buy** between April 1, 2011 and October 1, 2011?*

"Increases" include successfully hived swarms and/or feral colonies.

25. How many splits, increases, and / or colonies did you **sell or give away** between April 1, 2011 and October 1, 2011?*



Management Loss Summary

26. You indicated you had:

colonies on April 1, 2011

colonies on October 1, 2011

Increased (through purchase or splitting) your operation size between April 1 and October 1 by colonies

Decreased (through giving away or selling) your operation size between April 1 and October 1 by colonies

This means you suffered a total summer (Between April 1 and October 1) mortality of approximately %

How summer losses are calculated: Losses = (Colonies April 1 + Increases – Decreases – Colonies October 1)/(Colonies April 1 + Increases – Decreases)

Is this correct?*

NOTE: If this is not correct please click the Survey's "Back" button below (not your browser's back button) and change your answers until these values are what you expect.

-- Please Select --



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Living colonies by state

27. On December 31, 2011, please list the number of colonies you had in each state.

Instructions: If you are unsure how many colonies were alive on this exact date, assume all colonies that were alive when you last checked before December 31, 2011 were still alive.

	Living Colonies at the end of 2011
Alabama	<input type="text"/>
Alaska	<input type="text"/>
Arizona	<input type="text"/>
Arkansas	<input type="text"/>
California	<input type="text"/>
Colorado	<input type="text"/>

Connecticut	<input type="text"/>	
District of Columbia	<input type="text"/>	
Delaware	<input type="text"/>	
Florida	<input type="text"/>	
Georgia	<input type="text"/>	
Hawaii	<input type="text"/>	
Idaho	<input type="text"/>	
Illinois	<input type="text"/>	
Indiana	<input type="text"/>	
Iowa	<input type="text"/>	
Kansas	<input type="text"/>	
Kentucky	<input type="text"/>	
Louisiana	<input type="text"/>	
Maine	<input type="text"/>	
Maryland	<input type="text"/>	
Massachusetts	<input type="text"/>	
Michigan	<input type="text"/>	
Minnesota	<input type="text"/>	
Mississippi	<input type="text"/>	
Missouri	<input type="text"/>	
Montana	<input type="text"/>	
Nebraska	<input type="text"/>	
Nevada	<input type="text"/>	
New Hampshire	<input type="text"/>	
New Jersey	<input type="text"/>	
New Mexico	<input type="text"/>	
New York	<input type="text"/>	
North Carolina	<input type="text"/>	
North Dakota	<input type="text"/>	
Ohio	<input type="text"/>	

Oklahoma	<input type="text"/>
Oregon	<input type="text"/>
Pennsylvania	<input type="text"/>
Puerto Rico	<input type="text"/>
Rhode Island	<input type="text"/>
South Carolina	<input type="text"/>
South Dakota	<input type="text"/>
Tennessee	<input type="text"/>
Texas	<input type="text"/>
Utah	<input type="text"/>
Vermont	<input type="text"/>
Virginia	<input type="text"/>
Washington	<input type="text"/>
West Virginia	<input type="text"/>
Wisconsin	<input type="text"/>
Wyoming	<input type="text"/>
Other	<input type="text"/>



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Colony Movement

28. If you moved colonies at least once over the last year. Approximately what **percentage** of your operation moved **across state lines** at least once between April 1, 2011 and April 1, 2012? The value must be between 0 and 100, inclusive.

Other



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Colony Management

The following questions are meant to document which management practices you implemented in your operation.

30. Which if any of the following did you apply to a majority of your colonies between April 1, 2011 and April 1, 2012?

Mite and disease control products

- | | |
|--|--|
| <input type="checkbox"/> Fluvalinate-based product (i.e., Apistan) | <input type="checkbox"/> Coumaphos-based product (i.e., CheckMite+) |
| <input type="checkbox"/> Amitraz-based product | <input type="checkbox"/> Fenpyroximate (i.e., Hivastan) |
| <input type="checkbox"/> Hop oil based product (i.e. HopGuard) | <input type="checkbox"/> ApiLife VAR |
| <input type="checkbox"/> Formic Acid (i.e., MiteAway QuickStrips) | <input type="checkbox"/> Oxalic Acid |
| <input type="checkbox"/> Mite-A-Thol (menthol) | <input type="checkbox"/> Sucroside |
| <input type="checkbox"/> Fumagillin (Fumadil B) | <input type="checkbox"/> Nozevit |
| <input type="checkbox"/> Terramycin | <input type="checkbox"/> Tylosin (Tylan) |
| <input type="checkbox"/> ApiGuard | <input type="checkbox"/> Protein patties |
| <input type="checkbox"/> Bee Pro | <input type="checkbox"/> Ener-G Plus bee diet |
| <input type="checkbox"/> Honey -B-Healthy | <input type="checkbox"/> LaFore Patties |
| <input type="checkbox"/> MegaBee | <input type="checkbox"/> Vitafeed Gold |
| <input type="checkbox"/> Vitafeed Green | <input type="checkbox"/> ApiGo |
| <input type="checkbox"/> Sugar (Sucrose) syrup | <input type="checkbox"/> Candy (i.e., Fondant) |
| <input type="checkbox"/> High Fructose Corn Syrup (HFCS) | <input type="checkbox"/> Excess extracted honey |
| <input type="checkbox"/> Capped honey | |
| <input type="checkbox"/> Other, please specify | |



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Fluvalinate Use

31. You indicated you used a **Fluvalinate** based product. Which did you use?

-- None --

32. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Fluvalinate Use

33. How many **Apistan Strips** were applied per colony in each month?

Strips per
Treated
Colony

Apr '11	<input type="text"/>
May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>
Oct '11	<input type="text"/>
Nov '11	<input type="text"/>
Dec '11	<input type="text"/>
Jan '12	<input type="text"/>
Feb '12	<input type="text"/>
Mar '12	<input type="text"/>



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Other Product instead of Apistan Strips

34. If a product other than Apistan was used, how did you make the product? (please give detail instructions)

- Don't Know
- Prefer Not To Say
- Recipe, please specify

35. Please describe how and when your **Fluvalinate** recipe was applied:

Size Of Dose	Doses applied per
--------------	-------------------

		treated colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>



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Coumaphos-based product

36. You indicated you used a **Coumaphos**-based product. Which did you use?

37. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know



Prefer not to say



Other, please specify



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Checkmite+ Use

38. Please describe your use of **CheckMite+ Strips**

	Number strips applied per colony
Apr '11	<input type="text"/>
May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>
Oct '11	<input type="text"/>
Nov '11	<input type="text"/>
Dec '11	<input type="text"/>
Jan '12	<input type="text"/>
Feb '12	<input type="text"/>
Mar '12	<input type="text"/>



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Coumaphos Use

39. If a **Coumaphos** based product other than **CheckMite+** was used, how did you make the product?
(please give detail instructions)

- I Don't Know
- Prefer Not To Say
- Recipe, please specify

40. Please describe how and when your Coumaphos-based recipe was applied:

	Size Of Dose	Doses applied per colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>



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Amitraz Use

41. You indicated you used an **Amitraz**-based product. Did you use

-- None --

42. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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ApiVar Strips

43. Please describe your use of **ApiVar Strips**:

Number
strips
applied per
colony

Apr '11

May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>
Oct '11	<input type="text"/>
Nov '11	<input type="text"/>
Dec '11	<input type="text"/>
Jan '12	<input type="text"/>
Feb '12	<input type="text"/>
Mar '12	<input type="text"/>



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Amitraz Product

44. If an **Amitraz-based product other than ApiVar Strips** was used, how did you make the product? (please give detail instructions)

- I Don't Know
- Prefer Not To Say
- Recipe, please specify

45. Please describe how and when your **Amitraz-based** recipe was applied:

Size Of Dose	Doses applied per colony
--------------	--------------------------

Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>



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HopGuard Use

46. You indicated you used a **Hop-oil based product** such as **HopGuard**. Did you use

47. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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HopGuard

48. You indicated you used **HopGuard**; please describe your use of this product.

	Average Time (in days) between consecutive treatments within one month	Number of strips applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>



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Hop oil based product

49. If a **Hop oil** based product other than **HopGuard** was used, how did you make the product?
(please give detail instructions)

- I Don't Know
- Prefer Not To Say
- Recipe, please specify

50. Please describe how and when your **Hop oil** based product was applied:

	Size Of Dose	Doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>

51. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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ApiLife Var Use

52. You indicated you used **ApiLife Var**; please describe your use of this product.

	Average time (in days) between consecutive treatments within one month	Number of wafers applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>

Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>

53. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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ApiGuard

54. You indicated you used **ApiGuard**; please describe your use of this product.

Size of dose	Average Time (in days) between consecutive treatments within a single	Number of doses applied per treated colony
<input type="text"/>	<input type="text"/>	<input type="text"/>

	month		
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

55. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Formic Acid-based products

56. You indicated you used a **Formic Acid**-based product. Did you use

-- None --

57. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Mite Away II Use

58. You indicated you used **Mite Away II**; please describe your use of this product.

	Number of doses applied per treated colony
Apr '11	<input type="text"/>
May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>

Oct '11	<input type="text"/>	
Nov '11	<input type="text"/>	
Dec '11	<input type="text"/>	
Jan '12	<input type="text"/>	
Feb '12	<input type="text"/>	
Mar '12	<input type="text"/>	



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Mite Away Quick Strips

59. You indicated you used **Mite Away Quick Strips**, please describe your use of this product:

	Size of dose per colony	Time (in days) between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>



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Formic Other Use

60. How did you apply **formic acid**?

- Don't know
- Prefer not to say
- Described below
- Recipe, please specify

61. Please describe how and when your **formic acid** recipe was applied:

	Size of dose per colony	Time (in days) between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>



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Oxalic Acid Used

62. You indicated you used an **oxalic** acid-based product. How did you make the product (please give detail instructions)

- I Don't Know
- Prefer Not To Say
- Recipe, please specify

⏪
⏩

63. How and when did you apply the **oxalic** acid-based product?

Size of dose	Time (in days) between consecutive	Number of doses applied per treated

		treatments within a month	colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

64. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



Mite-a-Thol Used

65. You indicated you used **Mite-a-Thol**. Please fill out the following.

	Number packets applied per treated colony
Apr '11	<input type="text"/>
May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>
Oct '11	<input type="text"/>
Nov '11	<input type="text"/>
Dec '11	<input type="text"/>
Jan '12	<input type="text"/>
Feb '12	<input type="text"/>
Mar '12	<input type="text"/>

66. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Sucroside Used

67. You indicated you used **Sucroside**. Please fill out the following.

	Size of dose per colony	Time (in days) between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

68. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say



Other, please specify



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Fumagilain Used

69. You indicated use of **Fumagillin**. How did you mix Fumagillin prior to application?

- In syrup (sugar, HFCS etc.) at recommended dose and applied as feed
- In syrup (sugar, HFCS etc.) as other does (please specify)
- Prefer not to say
- Other, please specify

70. How and when did you apply your **Fumagillin** mix?

	Type of application (in feed, drench, other?)	Size of dose	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

71. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Nozevit Use

72. You indicated you used **Nozevit**. How did you use it?

- Mixed with feed (i.e. sugar syrup) at recommended dose
- Prefer not to say
- Other, please specify

73. Please fill out the following based on your use of **Nozevit**?

	Type of application (in feed, drench, other?)	Size of dose	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

74. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



Terramycin Use

75. You indicated you used a **Terramycin** based product. Which did you use?

- don't know
- Pre-mixed product used
- Prefer not to say
- Other: recipe, fill in with text

76. How and when did you apply your **Terramycin** mix?

	Size of dose	Time (in days) between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

77. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Tylan Use

78. You indicated you used a **Tylan** based product. How did you make the product (please give detail instructions)

- I Don't Know
- Prefer Not To Say
- Other: recipe, Please specify

79. How and when did you apply your **Tylan** mix?

	Size of dose	Time (in days) between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

80. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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81. How many **Fenpyroximate (i.e., Hivastan)** strips were applied per colony in each month?

Strips per Treated Colony

Apr '11	<input type="text"/>
May '11	<input type="text"/>
Jun '11	<input type="text"/>
Jul '11	<input type="text"/>
Aug '11	<input type="text"/>
Sep '11	<input type="text"/>
Oct '11	<input type="text"/>
Nov '11	<input type="text"/>
Dec '11	<input type="text"/>
Jan '12	<input type="text"/>
Feb '12	<input type="text"/>
Mar '12	<input type="text"/>

82. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Protein Patties

83. You indicated you used **protein patties**. What type of protein patties did you use?

- I Don't know
- Purchased Patties
- Prefer not to say
- self made (specify)

84. If known, please specify **protein patty** name or producer/supplier

85. How and when did you apply your **protein patty** mix?

	Size of dose (patty)	Time (in days) between consecutive feedings within a month	Number of doses applied per colony per treatment
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

86. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Bee Pro

87. Please describe your usage of **Bee Pro**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per colony per application
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

88. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Ener-G Plus bee diet

89. Please describe your usage of **Ener-G Plus bee diet**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per colony per application
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

90. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Honey -B-Healthy

91. How did you mix **Honey-B-Healthy** in order to apply it to colonies:

- I Don't Know
- Prefer Not to Say



Other, please specify

92. How did you apply **Honey-B-Healthy** to colonies?

	Size of dose	Days between consecutive treatments within a month	Number doses applied per colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

93. Did you apply this treatment to?



All of your colonies



Most of your colonies



Only those colonies that needed treatment



Don't know



Prefer not to say



Other, please specify



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LaFore Patties

94. Please describe your usage of **LaFore Patties**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

95. Did you apply this treatment to?

- All of your colonies
- Most of your colonies

Only those colonies that needed treatment

Don't know

Prefer not to say

Other, please specify



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MegaBee

96. Please describe your usage of **MegaBee**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mar '12

97. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Vitafeed Gold

98. Please describe your usage of **Vitafeed Gold**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

99. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Vitafeed Green

100. Please describe your usage of **Vitafeed Green**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>

May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

101. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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ApiGo

102. Please describe your usage of **ApiGo**

	Size of	Days	Number of
--	---------	------	-----------

	dose	between consecutive treatments within a month	doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

103. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



Sucrose (Sugar syrup)

104. Please describe your usage of **Sucrose (Sugar syrup)**

	Size of dose	Number of doses fed per treated colony
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>

105. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Sucrose candy (i.e., Fondant)

106. Please describe your usage of **Sucrose candy (i.e., Fondant)**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

107. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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High Fructose Corn Syrup (HFCS)

108. Please describe your usage of **High Fructose Corn Syrup**

	Size of dose	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

109. Did you apply this treatment to?



All of your colonies

- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Excess Extracted Honey

110. Please describe your usage of **Excess Extracted Honey**

	Amount feed (dose)	Days between consecutive treatments within a month	Number of doses applied per treated colony
Apr '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sep '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

Feb '12	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>	<input type="text"/>

111. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Capped honey

112. Please describe your usage of **Capped Honey**

	Number of frames added per colony	Days between consecutive treatments within a month
Apr '11	<input type="text"/>	<input type="text"/>
May '11	<input type="text"/>	<input type="text"/>
Jun '11	<input type="text"/>	<input type="text"/>
Jul '11	<input type="text"/>	<input type="text"/>
Aug '11	<input type="text"/>	<input type="text"/>

Sep '11	<input type="text"/>	<input type="text"/>
Oct '11	<input type="text"/>	<input type="text"/>
Nov '11	<input type="text"/>	<input type="text"/>
Dec '11	<input type="text"/>	<input type="text"/>
Jan '12	<input type="text"/>	<input type="text"/>
Feb '12	<input type="text"/>	<input type="text"/>
Mar '12	<input type="text"/>	<input type="text"/>

113. Did you apply this treatment to?

- All of your colonies
- Most of your colonies
- Only those colonies that needed treatment
- Don't know
- Prefer not to say
- Other, please specify



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Practices

114. Did you place any products (NOT INCLUDING TRAPS) in your hive to control small hive beetles last year?

- Yes
- No
- Prefer Not to Say

115. If you answered YES above, please elaborate here:



116. Did you use **Remebee** in any of the colonies in your operation last year?

Yes No

117. On average, how often did you sample colonies in your operation to quantify Nosema levels over the last year (April 1 2011 to April 1 2012)?

- Never
- Once
- About once every 4 months (3 times)
- About once every 3 months (4 times)
- About once every 2 months (6 times)
- About once a month (12 times)
- More than once a month
- Other, please specify

118. Which of the following techniques did you use over the last year (April 1 2011 to April 1 2012) to monitor Varroa mite populations in your colonies?

- Mite drop (sticky boards or other collection tray below the hive)
- Powdered sugar roll
- Ether roll
- Visual inspection of adult bees
- Visual inspection of drone brood
- I did not monitor Varroa mites
- Other, please specify

119. Over the last year, did you employ any of the **IPM practices/equipment** listed below?

- Drone comb removal
- Small cell size comb
- Small hive beetle trap
- Screened bottom board



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Practices

120. You indicated that you used **Drone Brood Removal**. How many times, on average did you remove drone brood from each of your colonies?

121. How much capped drone brood did you remove, on average, each time you removed drone brood?

- A full frame (deep) of drone brood
- A full frame (medium) of drone brood
- A full frame (shallow) of drone brood
- Only drone brood placed between frames/brood chambers in colonies
- Other, please specify

122. In what percentage of your colonies did you apply Drone brood removal?

- 0-50%
- 50-99%
- All Colonies



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Small Hive Beetle Product Use

123. You indicated you used a **small hive beetle trap** in some of your operation. Which trap did you use?

124. How did you **bait** the trap?

- Apple cider vinegar
- Mineral oil
- Other, please specify

125. In which **months** did you have baited **small hive beetle traps** in your colonies?

- All months
- Don't Know
- Apr '11
- May '11
- Jun '11
- Jul '11
- Aug '11
- Sep '11
- Oct '11
- Nov '11
- Dec '11
- Jan '12
- Feb '12

Mar '12



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Screen Bottom Boards

126. In what **proportion** of your operation did you use **screened bottom boards**?

- All
- Most (51% or more)
- A minority (less than 50% but more than 0%)
- Don't know

127. In which months did you have your screened bottom board engaged?

- All months
- Don't Know
- Apr '11
- May '11
- Jun '11
- Jul '11
- Aug '11
- Sep '11
- Oct '11
- Nov '11
- Dec '11
- Jan '12
- Feb '12
- Mar '12



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Colony Management

Comb replacement and winter management

128. What **proportions** of your colonies **brood comb** fall into the following age ranges?
If you don't know just skip this question, otherwise the proportions should total 100%.

	Percentage
More than 5 years old	<input type="text"/>
Between 4 and 5 years old	<input type="text"/>
Between 3 and 4 years old	<input type="text"/>
Between 2 and 3 years old	<input type="text"/>
Between 1 and 2 years old	<input type="text"/>
Less than 1 year old	<input type="text"/>

129. On average, how many frames from the brood nest of your colonies did you replace last year?

- Did not replace any frames
- 10% (for example 1 frame per brood box)
- 20% (for example 2 frames per brood box)
- Between 25 and 50% (for example between 3 – 5 frames per brood box)
- More than 50% of frames (more than 5 frames per brood box)

130. Did you do any of the following to prepare for this last winter (2011-2012)?

- Create or engage an upper entrance
- Wrap colonies with insulation
- Wrap colonies with tar paper or wintering sleeve
- Place extra insulation on top of colony

- Equalize colony strength
- Move colonies to southern location
- Move colonies to inside wintering buildings
- I do not prepare my colonies for winter

131. How much time (in hours) over the course of the entire year would you estimate that you or an employee spent on **pest monitoring** activities over and above non-pest production activity (please add in travel time if an extra trip was needed)?

- I Don't Know
- Prefer not to say
- Too difficult to calculate
- I do know, this is the number in hours

132. How much time (in hours) over the course of the entire year would you estimate that you or an employee spent on **chemical treatment applications** over and above non-pest production activity (please add in travel time if an extra trip was needed)?

- I Don't Know
- Prefer not to say
- Too difficult to calculate
- I do know, this is the number in hours

133. How much time (in hours) over the course of the entire year would you estimate that you or an employee spent on **other loss prevention measures** over and above non-pest production activity (please add in travel time if an extra trip was needed)?

- I Don't Know
- Prefer not to say
- Too difficult to calculate
- I do know, this is the number in hours



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Colony Management

Queen type and replacement

134. What type or **race of bees** do you use in your operation?

- New World Carniolan
- New World Carniolan hybrid
- Caucasian
- Caucasian hybrid
- Italian
- Italian hybrid
- Buckfast
- Buckfast hybrid
- Russian
- Russian hybrid
- Varroa Sensitive Hygienic (VSH)
- Minnesota Hygienic
- German black
- Local selected
- Africanized
- Don't know

135. On average **how old** were the queens that headed a majority of your colonies on 1 October 2011?

- Less than 6 months
- Between 6 months and 1 year
- Between 1 and 2 years
- Older than 2 years

Don't know

136. Did you replace the queens in any of your colonies between April 1, 2011 and April 1, 2012?

Yes No



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Colony Management

Queen type and replacement

137. You indicated that you **replaced queens** in at least some of your colonies. In what percentage of the colonies in your operation did you replace queens over the last year?

- None
- All
- Most (80% or more)
- A majority (more than 50% but less than 80%)
- A minority (less than 50% but more than 20%)
- Few (less than 20%)

138. How did you re-queen the colonies that you re-queened last year? (Check all that apply)

- Introduced mated queens
- Introduced virgin queens
- Introduced queen cells
- Permitted colony or split to rear a new replacement queen on its own
- Don't know
- Other, please specify

139. If you introduced mated or virgin queens and/or queen cells, where did you get the majority of these queens?

- From commercial producers
- Reared them myself
- Question not applicable
- Don't know
- Other, please specify

140. Which suppliers and states did you receive your commercially produced queens come from?

- Don't Know
- Prefer Not To Say
- Other, please specify



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Colony Management

Colony Replacement practices

141. Did you start or obtain any new colonies between 1 April 2011 and 1 April 2012?

- Yes No



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Colony Management

142. What proportion (percentage) of the colonies in your operation that were alive on October 1, 2011 came from splits, increases, or packages established or made the previous spring and summer, after April 1, 2011?

- None
- All
- Most (80% or more)
- A majority (more than 50% but less than 80%)
- A minority (less than 50% but more than 20%)
- Few (less than 20%)
- Don't know
- Don't want to answer

143. How did you start or obtain new colonies over the last year?

- Made increases by splitting strong colonies
- Bought and installed packages
- Caught and installed swarms
- Bought hives and/or nucs from another beekeeper

144. If you installed packages of bees over the last year, from what state or country did those packages come?

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Alaska | <input type="checkbox"/> Arizona |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> California | <input type="checkbox"/> Colorado |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Delaware |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Georgia | <input type="checkbox"/> Hawaii |
| <input type="checkbox"/> Idaho | <input type="checkbox"/> Illinois | <input type="checkbox"/> Indiana |
| <input type="checkbox"/> Iowa | <input type="checkbox"/> Kansas | <input type="checkbox"/> Kentucky |
| <input type="checkbox"/> Louisiana | <input type="checkbox"/> Maine | <input type="checkbox"/> Maryland |
| <input type="checkbox"/> Massachusetts | <input type="checkbox"/> Michigan | <input type="checkbox"/> Minnesota |
| <input type="checkbox"/> Mississippi | <input type="checkbox"/> Missouri | <input type="checkbox"/> Montana |

<input type="checkbox"/> Nebraska	<input type="checkbox"/> Nevada	<input type="checkbox"/> New Hampshire
<input type="checkbox"/> New Jersey	<input type="checkbox"/> New Mexico	<input type="checkbox"/> New York
<input type="checkbox"/> North Carolina	<input type="checkbox"/> North Dakota	<input type="checkbox"/> Ohio
<input type="checkbox"/> Oklahoma	<input type="checkbox"/> Oregon	<input type="checkbox"/> Pennsylvania
<input type="checkbox"/> Puerto Rico	<input type="checkbox"/> Rhode Island	<input type="checkbox"/> South Carolina
<input type="checkbox"/> South Dakota	<input type="checkbox"/> Tennessee	<input type="checkbox"/> Texas
<input type="checkbox"/> Utah	<input type="checkbox"/> Vermont	<input type="checkbox"/> Virginia
<input type="checkbox"/> Washington	<input type="checkbox"/> West Virginia	<input type="checkbox"/> Wisconsin
<input type="checkbox"/> Wyoming		
<input type="checkbox"/> Other, please specify		
<input type="text"/>		
<input type="text"/>		



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Colony Management

Replacing dead colonies and re-using equipment

145. Generally, when you found a dead and/or weak colony in your operation over the last year you would:

- Immediately replace the dead colony by splitting frames of bees/brood from other strong colonies into the dead out equipment
- Pack up the dead equipment and store it for re-use at a later date
- A mixture of both, I immediately replaced some and packed up others
- Did not find dead colonies
- Other, please specify

146. Between April 1, 2011 and April 1, 2012, before you re-used brood comb that you had taken out of production or purchased did you?

- I did not reuse any old brood comb
- Cull any particularly old or bad combs and replace them
- Irradiate the comb
- Fumigate the comb with acetic acid
- Freeze the comb
- Store the comb with paradichlorobenzene crystals (moth crystals)
- Did not treat the comb in any particular way
- Other, please specify



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Colony Production

Honey production and forage

147. Over the last year, during which months did you remove or harvest honey from your colonies?

- Apr '11
- May '11
- Jun '11
- Jul '11
- Aug '11
- Sep '11
- Oct '11
- Nov '11
- Dec '11
- Jan '12
- Feb '12
- Mar '12
- Did not remove honey
- Don't know

148. On average, how much honey did the colonies you managed for honey production produce last year (in lbs. per colony)?

149. Which of the following **crops** were the majority of your colonies in proximity to when they were producing honey? (check all that apply)

- Corn
- Sweet corn
- Cotton
- Cane crops (e.g., raspberries, blackberries, etc)
- Citrus
- Alfalfa
- Canola (rape)
- Soybeans
- Blueberries
- Cranberries
- Watermelons
- Cucumbers
- Other melons
- Squash
- Sunflowers
- None of the above
- Don't know
- Other, please specify

150. In your opinion would you say that the amount of honey you produced in the following seasons was above average, average, or below average?

	Above average	Average	Below average	Don't harvest honey in this season
Spring Honey (April to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

June)				
Summer Honey (July to Sept)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fall Honey (Oct to Dec)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Winter Honey (Jan to March)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Colony Production

Pollination

151. Did you derive income from your colonies by renting them out for pollination between April 1, 2011 and April 1, 2012?

Yes No



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Pollination

152. You indicated that you derived income from renting colonies for pollination last year. Which of the following crops were you paid to pollinate over the last year?

	Number of colonies rented for this crop
Almonds	<input type="text"/>
Apples	<input type="text"/>

Plums	<input type="text"/>
Pears	<input type="text"/>
Cherries	<input type="text"/>
Cucumbers	<input type="text"/>
Melons	<input type="text"/>
Canola (rape seed)	<input type="text"/>
Alfalfa (seed production)	<input type="text"/>
Clover (seed production)	<input type="text"/>
Blueberries low bush	<input type="text"/>
Blueberries high bush	<input type="text"/>
Cane berries (e.g., raspberries, blackberries)	<input type="text"/>
Cranberries	<input type="text"/>
Citrus	<input type="text"/>
Squash	<input type="text"/>
Sunflowers	<input type="text"/>
Vegetable seed production	<input type="text"/>
Other	<input type="text"/>



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Hive Management

153. What type of equipment do you keep a majority of your hives?

- Standard Langstroth 10 frame hives
- Standard Langstroth 8 frame hives
- Top bar hives



Other, please specify

154. Over the production season, how large on average are the brood chambers in your colonies?



1 deep (or two mediums)



1 deep and 1 medium



2 deeps



More than 2 deeps



Does not apply



Other, please specify



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Economics

155. What percentage of your annual income was derived from your beekeeping activities last year?



I lost money



None



Less than 5%



Between 5% – 50%



Between 51% – 90%



Over 90%



Prefer not to say



Don't know

156. Over the last year (1 April 2011 to 1 April 2012), for which of the following activities did you use

your colonies? (Check all that apply.)

- To pollinate agricultural crops
- To make and sell honey
- To make honey for personal use only
- To make queens or package bees to sell to other beekeepers
- For enjoyment
- Other, please specify

157. When choosing treatment or feeding strategies for your colonies, would you say that you are:

- Not willing to use any "non-bee produced" products in the hive
- Only willing to use "natural" or "organic" products in the hive
- Prefer to use natural or organic products in the hive but will use synthetic products if needed
- Will use synthetic products if needed
- Other, please specify

158. Are you a certified organic beekeeper?

- Yes
- No
- In transition

159. Approximately how many years have you been beekeeping? (number only)

160. How did you learn beekeeping?

- Friends and Family
- Beekeeping Class
- Self-Taught (books, internet)

Other, please specify

161. Are you a member of a beekeeping organization?

- Local beekeeping group
- State beekeeping organization
- National beekeeping organization
- Not a member of any beekeeping organization
- Prefer not to say

162. What are your primary sources of bee health information? (choose all that apply)

- Friends and Neighbors
- Beekeeping Class
- Online
- Books
- Bee Journals or Magazines
- Beekeeping Association Newsletters
- Beekeeping Conventions
- Other, please specify



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Economics

163. Do you believe that you are using “**Best Management Practices**” in your colonies?

- Yes, always
- Sometimes
- In some hives and not others
- With some aspects of beekeeping and not others
- No
- Don't Know
- Don't know what best practices are
- Don't think best management practices work

164. If not always, what is the primary barrier to adopting "best management strategies"?

- Not enough information about those practices
- Practices too costly
- Practices too labor-intensive
- Other, please specify



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Management Survey

This ends the Management Survey

Thank you for participating in this survey! Results will be posted at the beeinformed.org web site as they become available.

165. Would you like to receive a summary report for this survey?

- Yes No

166. We may wish to contact you if we have questions about your responses. Is this OK?

- Yes No

167. Would you be willing to participate in future beekeeping surveys?

Yes No

168. Did you complete this survey on behalf of someone else?

Yes No

169. Is this your first time answering this survey?

Yes No

170. Where did you hear about this survey?

Organization newsletter

Website

Friend or neighbor

Bee meeting

Other, please specify

171. If you completed this survey last year, would you be willing to let us to track your responses for last year and this year?

Your information will still remain confidential, and no identifying information will be associated with your answers.

Yes No

172. If you said 'Yes' to any question that requires an e-mail address, please provide it here:

173. Do you have any comments about this survey?

⏪ ⏩

THANK YOU! For participating in the Bee Informed Partnership 2012 survey. Please click "Done" to complete the process.
