Market Beef Health Record

Youth Producer:
Name: _____
Address: _____
_____
Phone: _____
QA Program: _____
Date Certified: _____
Fair: _____

Animal Information (Obtain from producer):
Identification #: _____
Brand: _____ Location: _____
Breed/Color: _____
DOB: _____ Castration Date: _____
Date Weaned: _____ Sire ID: _____
Born in: _____ *(Country)*

"Produce healthy and safe beef products by being a knowledgeable and responsible producer"

Date Purchased: _____
Purchased From:
Name: _____
Address: _____
_____
Phone: _____
QA Certification: _____ *(not required)*
Date Certified: _____

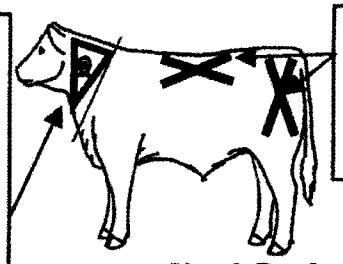
Treatments & Dewormers (Date & Time)	**Condition Being Treated**	**Estimated Weight**	**Treatment Administered** (Medication dispensed, amount and route of administration)	**Drug's Lot Number**	**Name** (Person giving treatment)	**Withdrawal Time** (Instructed)	**Withdrawal Complete** (Date & Time)	**For prescription or extra label drug use, list the veterinarian's name, address, and phone.**

Medicated Feeds *Remember to document ALL medicated feeds and withdrawal times*

Dates Fed	**Medication Name** (Medication added/included in feed and approximate amount of medication)	**Withdrawal Time** (Instructed)	**Withdrawal Complete** (Date & Time)

Dates Fed	**Medication Name** (Medication added/included in feed and approximate amount of medication)	**Withdrawal Time** (Instructed)	**Withdrawal Complete** (Date & Time)

Give **Subcutaneous (Sub-Q) injections** under loose skin of neck, using the tented method. Give **Intra-muscular (IM) injections** in the neck. If label indicates a choice, use **Sub-Q** (under the skin) injections.



NEVER- Inject into the round or the loin area.

I certify that I produced this animal, it was not fed any "prohibited" mammalian protein (i.e. meat & bone meal), per FDA regulation, CFR Title 21, and I have listed ALL products and treatments they received while in my care and all withdrawal times have been met.

Youth Signature: _____ Date: _____

Guardian Signature: _____ Date: _____

Youth Producer's Copy

Prepared by: Sarah M. Smith, Jan Busboom, and Jean Smith, WSU