



R-T TREATMENT RECORD

Name of farm/building identification: PID#:

Site manager: Date:
(yy/mm/dd)

INSTRUCTIONS

This record must be completed for all stages of production and for individual, and group treatment. This record must include treatments administered in water, by injection, topically or orally. Any natural products and homeopathic treatments must also be recorded.

Treatment Start Date	Treatment End Date	Animal, Pen and Room ID	Number of Animals Treated	Weight of Animal(s) Treated	Product Name	Reason for Product Usage	Dosage	Site of Injection	Method of Administration ¹	Withdrawal Period (Days)	Safe Shipping Date	Broken Needle?		Initials		
													YES	NO		
												<input type="checkbox"/>	<input type="checkbox"/>			

¹ Method of administration: IW = in the water; IM = in the muscle; IV = in the vein (intravenous); SQ = under the skin (subcutaneous); T = topical (on the skin); O = oral.

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