

CATTLE HERD GROUP PROCESSING TREATMENT MAP

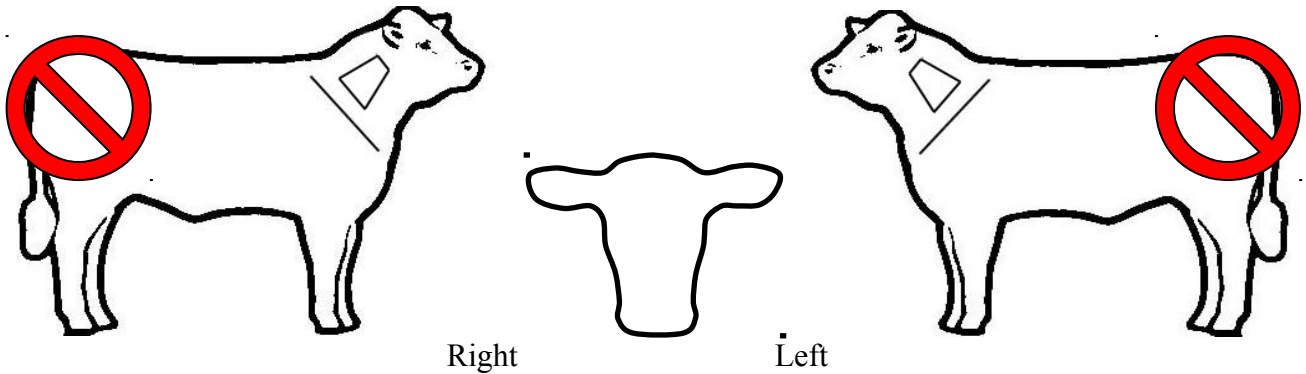
Select SQ products and never give an injection in the rear leg or top butt.

Group: _____ Date: _____ ID: Rt. Ear/ Lft Ear: _____

Booster/Reprocess Date: _____ Pen/Pasture #: _____

Class: S / H / Bulls / Cows Age: _____ Weight: _____ Hd. Processed _____

Other Management (√): Castrate ___ Dehorn ___ Other _____ Crew _____



Product and Company	Lot or Serial #	Exp. Date	ROA*	Dose	Booster Date	Withdrawal Date
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

*ROA – Route of Administration

Comments:
