INDIVIDUAL TREATMENT RECORD

FEEDLOT:_____

Tag:_____ Lot:_____ Pen:_____ Sex:_____ Type:_____

Date	Diagnosis	Temp	WT	Product	Dose	Route	Injection Site	Comments	Withdrawal Date	Pen Move	Crew

- all intramuscular injections must be given only in the neck area
- conduct visual check for needles after each injection