

Veterinary Medicines Regulations

to meet the requirements of the medicine regulations, and farm assurance schemes please record the following details regarding the use of **TUBERCULIN** in your medicine records.

Farm:		CPH: / /		
<i>Name and Address of Person administering Tuberculin</i>		<i>Date of Administration</i>	<i>Number & Description of Animal (s)</i>	
<i>Route of Administration</i>	<i>Quantity Administered</i>	<i>Avian Batch No & Expiry Date</i>	<i>Bovine Batch No & Expiry Date</i>	<i>Withdrawal Period</i>
Intradermal Injection	0.1 ml of Avian & Bovine Tuberculin per animal	No	No	NIL
		Date	Date	

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