

CATTLE HERD REPRODUCTIVE HISTORY

Date: _____

Submitter's Name: _____

Owner name: _____

Address: _____

Property address: _____

Phone: _____

PIC: _____

Herd or Group Details

Total number of adult cows: _____

Total number of heifers: _____

Number of animals purchased within the previous:

4 months: _____

Year: _____

Health status of new additions: _____

Herd vaccination program:

5-in-1

7-in-1

Vibrio

Pesti

Other

Date given:

Nutrition:

Pasture

Hay

Grain

Silage

Reproduction

Mating:

Natural

AI

If natural what is the bull to cow ratio? _____

Have there been any new bulls introduced in the past 12 months? **No**

Yes

Average bull age: _____

Are bulls vaccinated against vibrio/campylobacter? **No**

Yes

Are bulls performance tested?

No

Yes

Are pregnancy exams performed? **No**

Veterinarian

Non veterinarian

If yes are they:

Manual

Ultrasound

Approximate timing

Estimated pregnancy rate _____

Estimated calving rate: _____

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Estimated weaning rate: _____

How many abortions in the past:

Month: _____ **6 months:** _____ **Year:** _____

At what stages of pregnancy: **Early** **Mid** **Late**

Were samples submitted to BSL previously for these: **No** **Yes**

If so please provide the date(s) and accession number(s): _____

Have there been problems in *term* calves born on this farm (circle all that apply)?

Stillborn calves **Deformed calves** **Weak calves** **Ataxic calves**

Other (describe): _____

Health

Have there been any clinical illnesses in the herd in the last 6 months?

No **Yes**

If yes please indicate which problems (circle all that apply):

Respiratory **Enteric** **Genital** **Fever** **Mastitis**

Other (describe and give approximate numbers):
