



HERD HEALTH PLAN VETERINARIAN REVIEW FORM

This form is acceptable to meet the “written herd health plan reviewed at least annually by the Veterinarian of Record” standard within FARM Animal Care Version 4.

Facility Name _____

FARM Animal Care Version 4 standards outline that herd health plans must be reviewed at least annually. This document can be utilized for multiple annual reviews.

YEAR

Facility Owner/Manager Name _____ Review Date _____

Facility Owner/Manager Signature _____

Veterinarian Name _____ Review Date _____

Veterinarian Signature _____

Protocols Reviewed

Pre-Weaned Calf Management	Treatment of Common Diseases	Vaccinations	Biosecurity
Non-Ambulatory Animal Management	→ Mastitis	Lameness Prevention and Treatment	Branding
Fitness to Transport	→ Metritis	Emergency Action or Crisis Plan	Castration
Euthanasia	→ Milk Fever	Pest Control	_____
Difficult Calvings (Dystocia)	→ Ketosis	Fly Control	_____
Milking Procedures	→ Displaced Abomasum	Parasite Control	_____
	→ Pneumonia		_____
	→ Diarrhea		_____

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Veterinarian Signature

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	Vaccinations	
	Lameness Prevention and Treatment	
	Emergency Action or Crisis Plan	
	Pest Control	
	Fly Control	
	Parasite Control	