



Sequential VFD ID Number

Pennox 100-MR (oxytetracycline) Veterinary Feed Directive for use in calf milk replacers or starter feeds

Client: _____
Business or Home Address: _____
Address: _____
Phone #: _____

Veterinarian: _____
Address: _____
Phone #: _____

Approximate number of animals to be treated: _____

Location of animals: _____

Special Instructions and/or other animal identifications:

Indication, Drug Level in Medicated Feed, and Duration of Use (specify additional required information):

For treatment of bacterial enteritis caused by Escherichia coli organisms susceptible to oxytetracycline:

Drug level: _____g/ton in order to provide 10 mg/lb body weight / day
Duration of use: _____ days (7 to 14 days)

Caution: Use of feed containing this Veterinary Feed Directive (VFD) drug in a manner other than as directed on the labeling (extra-label use) is not permitted.

For use for use in calf milk replacers or starter feeds.

Residue Warnings: 5-DAY WITHDRAWAL PERIOD AT 10 MG/LB DOSAGE. THIS DRUG PRODUCT IS NOT APPROVED FOR USE IN FEMALE DAIRY CATTLE 20 MONTHS OF AGE OR OLDER, INCLUDING DRY DAIRY COWS. USE IN THESE CATTLE MAY CAUSE DRUG RESIDUES IN MILK AND/OR IN CALVES BORN TO THESE COWS.

Combination Use:

This VFD only authorizes the use of the VFD drug(s) cited in this order and is not intended to authorize the use of such drug(s) in combination with any other animal drugs.

VFD Issuance Date: _____

VFD Expiration Date: _____
Month/Day/Year
(Not to exceed 6 months from issuance date)

Veterinarian's signature: _____

Copy – Supplier

Copy – Client

Original – Veterinarian