

Pennox (oxytetracycline) Veterinary Feed Directive for use in Sheep

Client: _____ Veterinarian: _____
Business or Home Address: _____
Address: _____
Phone #: _____ 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 the additional required information):

For treatment of bacterial enteritis caused by *Escherichia coli* and bacterial pneumonia caused by *Pasteurella multocida* 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 in Dry Feeds Only. Not for Use in Liquid feed Supplements.

Residue Warnings: 5 day withdrawal period.

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: _____

Original – Veterinarian

Copy – Supplier

Copy – Client