## DEPARTMENT OF

## **Option 1: Individual Animal Pre-Marketing** Checklist

Animal ID: \_\_\_\_\_ Date: \_\_\_\_\_

List any treatments this animal had within the past 90 days:

Drug	Route of Admin. (IM, SQ, IM, IMM)	Dose Given (mL)	Date withdrawal period expired

Have all meat withdrawal periods been met?		NO
Other Factors:		
Was the animal in poor health, or not eating or drinking normally within the past 2 months?		NO
Is the animal able to stand up and walk on its own?		NO
Does the animal have any injuries, signs of disease?		NO
	YES	
Was an extended withhold time, due to poor health, applied?		NO
If yes, what was new expiration date of the withdrawal period?		

I have reviewed this animal's treatment history and condition and have determined that this animal is clear to go to slaughter.

Signature

Date

Last Updated: 11/2/2017

For Additional Information: Jessica Evanson, DVM, MPH, Drug Residue Consultant 651-201-6300 · Jessica.Evanson@state.mn.us · 625 Robert Street North, Saint Paul, MN 55155-2538

In accordance with the Americans with Disabilities Act, this information is available in alternative forms of communication upon request by calling 651-201-6000. TTY users can call the Minnesota Relay Service at 711. The MDA is an equal opportunity employer and provider.