

Livestock Veterinarian's report

Veterinarian's name

Phone

Name of veterinarian's practice

Livestock Details

Owners name(s)

Location of animal at time of disease/illness/accident

Name of animal(s)

Tag/Tattoo No

Age

Breed

Sex

Colour/markings

For what purpose has the animal been used?

Disease/Illness or Injury Details

Date & time of animal inspection

What was your diagnosis of the disease/illness/accident?

State the probable cause of the disease/illness or how the accident occurred

When did the disease/illness/accident first show signs?

Date

Time

In your opinion has the disease/illness or injury been accelerated or caused by lack of care, neglect, management of the animal on the part of the owner or their representative? If Yes, please provide details

Death of Animal

Date & time of death

What was the actual cause of death?

In your opinion was the disease/illness/accident referred to above the sole cause of its death? If No, please provide details

Was the animal destroyed? If Yes, what was the date the animal was destroyed and was the animal destroyed on human grounds or other (if other please elaborate)?

(Post Mortem/Autopsy) Date & time of post mortem

(Post Mortem/Autopsy) Findings

(Post Mortem/Autopsy) Additional remarks

Veterinarian Declaration

I (name) _____,

a graduate veterinarian of (degree) _____,

do solemnly and sincerely declare that the above information, to the best of my knowledge and belief, to be true and correct and I have not withheld any relevant information.

Signature _____,

Address _____

_____, Date _____