

**TUBERCULIN TEST RECORD (Special)**

USDA, APHIS, VS

<b>HERD OWNER - LAST NAME</b> <b>FIRST NAME</b> <b>INITIAL</b>				<b>REASON FOR CFT OR SCT</b>			<b>DATE INJECTED</b>				<b>CFT OR SCT TEST</b>						
				<b>AREA</b> <sup>1</sup>	<b>HERD RETEST</b> <sup>6</sup>		<b>CFT OR SCT</b>		<b>COMPARATIVE CERVICAL</b>		<b>COMPLETE HERD TEST OF ALL ELIGIBLE ANIMALS</b>		<b>NO. OF ELIGIBLE ANIMALS IN HERD</b>				
<b>ROUTE - STREET - ROAD</b>				<b>HERD(RE) ACCREDIT.</b> <sup>2</sup>	<b>TRACING REG. KILL</b> <sup>7</sup>		<b>RETEST OF CFT/SCT SUSPECTS</b>				<input type="checkbox"/> YES <input type="checkbox"/> NO <b>IF NO</b>						
				<b>POST OFFICE</b>		<b>STATE (Including Zip Code)</b>		<b>MILK ORDINANCE</b> <sup>3</sup>		<b>TRACING REACTORS</b> <sup>8</sup>		<b>CC TEST RESULTS</b>					
<b>COUNTY</b>				<b>TOWNSHIP</b>		<b>SECTION</b>		<b>HERD NO.</b>		<b>SALE - SHOW</b> <sup>4</sup>		<b>TRACING EXPOSED</b> <sup>9</sup>		<b>NEG</b> <b>SUS</b> <b>REA</b> <b>TOTAL</b>		<b>COMPARATIVE RETEST</b>	
										<b>IMPORTED</b> <sup>5</sup>		<b>OTHER</b> <sup>10</sup>		<b>TUBERCULIN</b>		<b>SERIAL NO.</b>	
										<b>AVIAN</b>		<b>SERIAL NO.</b>		<b>LICENSE NO.</b>		<b>LOCATION OF CC TEST</b>	
										<b>MAMMALIAN</b>						<input type="checkbox"/> DEER <input type="checkbox"/> ELK	

ANIMAL NUMBER	OFFICIAL IDENTIFICATION NUMBER	OTHER IDENTIFICATION	AGE	BREED	SEX	AVIAN PPD (UPPER)			BOVINE PPD (LOWER)			PREVIOUS CFT OR SCT RESPONSE	CLASSIFICATION (CC TEST) (N S R)	REACTOR TAG NUMBER	REMARKS	
						SKIN THICKNESS			SKIN THICKNESS							
						Milli-meters	Milli-meters	Milli-meters	Milli-meters	Milli-meters	Milli-meters					
						Normal	72 Hours	Increase	Normal	72 Hours	Increase					
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																

<b>SIGNATURE</b>	<b>TITLE</b>	<b>DATE</b>
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**COPY DESIGNATIONS**

**PART 1 - FEDERAL OFFICE**

**PART 2 - STATE OFFICE**

**PART 3 - OWNER COPY**

**PART 4 - REGIONAL EPIDEMIOLOGIST**

**PART 5 - VETERINARIAN COPY**