



# RANGE READY™

## Bull & Heifer Vaccination Protocol Exception Form

Member's Range Ready.com User ID#: \_\_\_\_\_  
 Owner's Name: \_\_\_\_\_  
 Mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Indicate where vaccination regimen exception will occur:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> 2-3 Months of Age   | <input type="checkbox"/> Weaning Booster            | <input type="checkbox"/> Arrival Booster                  |
| <input type="checkbox"/> Pre-Weaning         | <input type="checkbox"/> Bulls: 30-60 days pre-sale | <input type="checkbox"/> Heifers: 4-8 weeks pre-sale      |
| <input type="checkbox"/> Pre-Weaning Booster | <input type="checkbox"/> Upon Arrival               | <input type="checkbox"/> Heifers: 6 months after breeding |
| <input type="checkbox"/> Weaning             |   |   |

Indicate type of vaccine:

- |                                       |   |                                      |
|---------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> MLV          | <input type="checkbox"/> Pasteurella        | <input type="checkbox"/> Clostridial |
| <input type="checkbox"/> Killed Virus | <input type="checkbox"/> Parasite Treatment |                                      |

Reason for protocol change: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Replacement Product

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

BIVI Tech Services Approval

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
Producer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Veterinarian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Boehringer Ingelheim Vetmedica, Inc.  
Technical Services Veterinarian Signature

\_\_\_\_\_  
Date

Return completed form to: **Boehringer Ingelheim Vetmedica, Inc.**  
 Range Ready Exception Form  
 1620 N. Woodbine Road  
 St. Joseph, MO 64506  
 Fax: 816-236-2779

