



Declaration of Vet-Client-Patient Relationship For use of veterinary medicine

Producer Name: _____ OCFB Number: _____

Veterinarian Name: _____

Veterinarian Declaration

As of this date, I have visibly observed the general health status of the cattle in their herd and found to be healthy and are receiving proper care and treatment for routine health conditions. I have verified that this producer works with myself and has in place a protocol to identify treatment, sick cattle and for preventing further illness or cross contamination.

I have reviewed and discussed the use of veterinary medicines with _____, the person responsible for the use of veterinary medicines for this herd. I have advised this person that veterinary medicines must always be used according to label directions, unless a licensed veterinarian who has a valid vet-client-patient relationship (VCPR) with the producer and the producer's herd has provided written direction to do otherwise.

Veterinarian's Signature : _____

Date: _____

Producer Declaration:

As an Ontario Corn Fed Beef Quality Assurance Program producer, I acknowledge that I am responsible for and that I will maintain an ongoing relationship with a licensed veterinarian for animal health and advisory services. I agree that veterinary medicine will always be used according to label directions, unless a licensed veterinarian who has a valid vet-client-patient relationship (VCPR) with me has provided written directions to do otherwise.

Print Name: _____

Signature: _____

Date: _____