



PrimeVAC™ CERTIFIED

Ranch Name: _____ Address: _____

Contact Name: _____ City: _____

Telephone: _____ State: _____ Zip: _____

Email: _____

No. of Head: _____ Breed: _____

Gender: Steer Heifer Mixed BQA Certification Number: _____

The calves listed on this certificate have completed the health requirements for the following Merck Animal Health preconditioning program.

PROGRAM

- PrimeVAC™ 24
- PrimeVAC™ 34
- PrimeVAC™ 45
- PrimeVAC™ Heifer

PROTECTION

Respiratory

- Bovilis® Vista® Once SQ
- Bovilis® Vista® 5 SQ
- Bovilis® Vista® BVD CFP
- Bovilis® Once PMH® IN
- Bovilis® Once PMH® SQ
- Bovilis® Nasalgen® 3
- Bovilis® Nasalgen® 3-PMH

Blackleg

- Bovilis® Vision® 7
- Bovilis® Vision® 7 Somnus
- Bovilis® Vision® 8
- Bovilis® Vision® 8 Somnus
- Bovilis® 20/20 Vision®
- Bovilis® Covexin® 8
- Bovilis® Cavalry® 9

RECOMMENDED

Internal Parasite

- Panacur®
- Safe-Guard®

External Parasite

- Ultra Boss® Pour-On
- Ultra Saber® Pour-On

Implants

- Ralgro®
- Revalor®-G

Pinkeye

- Bovilis® Piliguard® Pinkeye
- Bovilis® 20/20 Vision® 7 with Spur®
- Moraxella Bovoculi Bacterin

Reproductive

- Bovilis® Vista® BVD CFP SQ
- Bovilis® Vista® 5 L5
- Bovilis® Vista® 5 VL5

Certified by:

Owner Name: _____

Owner Signature: _____

Date: _____

Certified by:

Veterinarian Name: _____

Veterinarian Signature: _____

Date: _____

This certificate is provided only as a service to the producer, person or entity whose name appears on the face hereof ("Owner/Manager"). All information is derived from data supplied by the Owner/Manager, who is solely responsible for its accuracy and use. Merck Animal Health make no warranties, express or implied, regarding the accuracy, adequacy, completeness, reliability, usefulness, or legality of any information. Such information is provided "as is", and should be verified by the user before relying upon it for any purpose.