

Fair Pig Questionnaire / Stool Sample Form

Name: _____ Date: _____

Phone # _____ Ear Tag # _____

Breeder: _____

1. Symptoms
2. How long has it been sick?
3. Estimated Weight _____ Type of Feed _____
4. Has it been on medication? YES, what _____ / NO
5. Is this first fecal exam? YES/NO (when) _____
6. What type of pen is it in: _____
7. FFA / 4-H (circle one)
8. How many other pigs are on premises? _____
9. If so, are they all showing symptoms? YES/NO
10. Fecal Results
11. Medications dispensed
12. Withdraw time (needed for record book)

There is no charge for stool sample evaluation. If **medications** are needed through the clinic, **there will be a fee for them.** Stool tests will be run as we get time. You should receive a call no later than the end of the day with the results, which may be after the clinic closes.

Place sample in the cooler at north end of the Building. (With this paperwork) at Floral City Animal Clinic. 4474-D S Florida Avenue, Inverness.

DO NOT BRING SPECIMEN INTO THE CLINIC OR CALL THE CLINIC.

YOU CAN CALL DORA (212-1012) IF YOU DO NOT HEAR THE RESULTS BY THE END OF THE DAY.