



## RED TRACTOR QUARTERLY VETERINARY REPORT (REMOTE)

**CERTIFICATION BODY (✓)**  
Please return scanned copy or clear photo of report to:

NSF Certification Ltd

E: [pigsuk@nsf.org](mailto:pigsuk@nsf.org)

Lloyds Register

E: [redtractor-ca@lr.org](mailto:redtractor-ca@lr.org)

<b>FARM INFORMATION</b>	Assurance no.	Owner of pigs	
Farm name and postcode		Slap mark	
		CPH number	

Declarations by the retained Veterinary Surgeon	True	False	N/A
I have been unable to attend the farm for this quarterly visit due to social distancing measures imposed by Government as a result of COVID-19			
I have completed this Red Tractor Pigs Veterinary Report based on my knowledge of the unit and using information supplied by the producer or their representative			
I confirm that the pigs on these premises are 'under my care'			
I have reviewed the Veterinary Health Plan and discussed any necessary changes with the farmer			
I have discussed with the farmer the status of pig health and welfare on the farm, including mortality levels and other indicators			
Having reviewed the history, I recommend that the farm performs teeth reduction / tail docking ( <i>Delete as appropriate</i> )			
Pigs brought onto the unit from outside the UK, since the last quarterly visit, have been imported in compliance with the NPA Imports Protocol			
I have reviewed a copy of the farm's recent medicine administration records and I am satisfied they are being completed correctly			
Evidence of recent movement records was presented during the remote vet assessment			
Antibiotics prescribed for use on this unit are in accordance at all times with the Pig Veterinary Society's (PVS) Prescribing Principles for Antimicrobials, which reflect RUMA guidelines			
I have reviewed the collated antibiotic data for the unit(s) in the last 12 months			
The use of any Class 3 antibiotics (as defined in the most up to date copy of the PVS Prescribing Principles for Antimicrobials) has been reviewed and the VHP updated to record the justification			

Additional comments:

<b>VETERINARY SURGEON'S NAME AND PRACTICE</b>		<b>PVS NUMBER</b>	
<b>VETERINARY SURGEON'S SIGNATURE</b>		<b>DATE OF REMOTE ASSESSMENT</b>	