Veterinary Feed Directive for Chickens ChlorMax® (chlortetracycline)

/eterina \ddress	arian:	Business or
	email: (optional)	Phone #:
n <u>dic</u> atio	ons, Drug Level, and Duration of Use: (select	one and specify additional required information) vitis caused by <i>Mycoplasma synoviae</i> susceptible to (ton)
	2) Chickens: Control of chronic respiratory disease (CRD) and air sac infection caused by Mycoplasma gallisepticum and Escherichia coli susceptible to chlortetracycline. Drug level:g/ton (200 to 400 g/ton) Duration of use:days (7 to 14 days)	
	 Chickens: Reduction of mortality due chlortetracycline. Drug level: 500 g/ton Duration of use: 5 days 	e to Escherichia coli infections susceptible to
******** USE (OF FEED CONTAINING THIS VETERINARY F	EED DIRECTIVE (VFD) DRUG IN A MANNER OTHER THAN AS (EXTRA-LABEL USE) IS NOT PERMITTED.
Premis	kimate number of Chickens to be treated:se or Location of animals:se or Location of animals:security and the control of the	
Affirma	ation of Intent (for combination VFD drugs): ch	eck the appropriate box:
	This VFD only authorizes the use of the VFD drug(s) cited in this order and is not intended to authorize the use of such drug(s) in combination with any other animal drugs.	
	This VFD authorizes the use of the VFD drug(s) cited in this order in the following FDA-approved, conditionally approved, or indexed combination(s) in medicated feed that contains the VFD drug(s) as a component. (List the specific approved combination)	
	This VFD authorizes the use of the VFD drug(s) cited in this order in any FDA-approved, conditionally approved, or indexed combination(s) in medicated feed that contains the VFD drug(s) as a component.	
	Warning: Do not feed to chickens producing eq Indication 1, 2: No withdrawal period required. Indication 3: Withdraw 24 hours prior to slaugh	
Date of '	VFD Issuance:(dd/mm/yyyy)	Date of VFD Expiration: (dd/mm/yyyy) (Cannot exceed 6 months after issuance)
/eterina	arian's signature:	