625 Robert St. N., St. Paul, MN 55155-2538 www.mda.state.mn.us

Dairy and Meat Inspection Division Phone: 651-201-6300 Fax: 651-201-6116 Email: Dairy.Results@state.mn.us

## Positive Drug Residue Report Form DR5 - DAIRY FARM FOLLOW-UP & REINSTATEMENT SAMPLE

PASTEURIZED MILK ORDINANCE (PMO) - APPENDIX N

Contact the farm's inspector and fax or email this form within 24 hours: 651-201-6116 or Dairy.Results@state.mn.us

<b>Producer Information</b>	1				
Name of Producer		Pla	Plant Name and City		
Farm Visit and Bulk 1	ank Recheck Ir	nformation			
Date of Farm Visit Name of Animal Drug Use					
Possible Cause(s) of Positive Drug	Residue Finding				
Date of Sample Collection	Time	am	pm		
Bulk Tank Temperature	°F				
Name of Field Representative		Sa	ampler/Hauler Licens	e No.	
The producer's reinstatement san the producer's permit. Name of Confirmation Laborator					
City		State			
Name of Certified Industry Super	visor				
Date of Test Te	st Kit Used		_ BETA LACTAM	Other	
Test Value	Positive NF	=			
If the test value is negative, the p	producer is on temporar	y status for up to	30 days.		
If the test value is positive, the san	nple must be re-tested in	duplicate with a po	ositive and negative o	control by the same a	analyst.
Duplicate #1 Test Value	Positve	NF			
Duplicate #2 Test Value	Positve	NF			
If any or both of the divisions	o toot poetivo				
<ul><li>If one or both of the duplicate</li><li>The producer's bulk tank m</li></ul>		and			
I ne producer's bulk tank m Future pickup of the producer.	•		nt tacting actablish	as the mill is no l	onger positive for

## **Comments**

drug residues.