Beefmaster Breeders United

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Ultrasound Scanning - Barn Worksheet

Scanning Technician: _____

Breeder Name:
Membership Number:
Address:

Calving Year/Season: /
Date:
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Calf	Birth Date	Sex	Dam	Sire	Scan		Scan Date	Group Code	Test Type	Scan Sex	Diet	Remarks
					Weight	Wt Date						

ANY FURTHER BREAKDOWN SHOULD BE INDICATED BY GROUP CODE

TEST TYPE
C = Central Test, D = Developing Heifer, F = Feed Lot, R = Ranch Test

DIET
0 Unknown, 1 0% Concentrate, 2 <50% Concentrate, 3 >50% Concentrate

109396

SUBMIT