

Farrowing House Record Sheet

Litter Number: _____

Farrowing date: _____

Sire ID: _____

Born: _____

Sow Tag #: _____

Born Alive: _____

Sow Ear Notch: _____

After transfers: _____

Sow Parity: _____

Weaned: _____

Notes on Sow Performance:

Weighed: _____

Litter Weight: _____

Date Weighed: _____

Checklist:

- Needle Teeth _____
- Iodine Naval _____
- Tail Dock _____
- Iron Shot _____
- Ear Notch _____
- Castrate _____

Pig Identification (sex)(teats per side)

Medications Used

	Sex	Teats		Sex	Teats
1	_____	_____	8	_____	_____
2	_____	_____	9	_____	_____
3	_____	_____	10	_____	_____
4	_____	_____	11	_____	_____
5	_____	_____	12	_____	_____
6	_____	_____	13	_____	_____
7	_____	_____	14	_____	_____

Date	Medication
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Pig Deaths

Date	Cause
_____	_____
_____	_____
_____	_____

This worksheet has been put together to assist record keeping in the farrowing house. This is not to be sent to the office. It is for the breeder's use on the farm.