



Bull Breeding Soundness Evaluation

Guidelines Established by Society For Theriogenology

P.O. Box 3007 Montgomery, AL 36109

Phone 334/395-4666 • Fax 334/270-3399 • www.therio.org

OWNER <i>Angie Long</i>	CASE NO.	DATE <i>6-3-21</i>
ADDRESS <i>Buffalo, WY</i>	BULL NAME <i>Flatheads Tamdu</i>	BREED <i>Highlander</i>
ZIP <i>82834</i>	I.D. NO. <i>840003149560357</i>	Brand <input type="checkbox"/> Tattoo <input type="checkbox"/> Ear Tag <input type="checkbox"/>
TELEPHONE ()	BIRTH DATE	AGE (MO.) <i>4 year old</i>
HISTORY: Previous BSE	DATE	CASE NO.
		CLASSIFICATION

PHYSICAL EXAMINATION	SEMEN EXAMINATION		
Body Condition Score _____ Thin <input type="checkbox"/> Moderate <input type="checkbox"/> Good <input checked="" type="checkbox"/> Obese <input type="checkbox"/> Beef 1,2,3,4,5,6,7,8,9 Pelvic Ht. _____ Width _____ Area _____ Dairy 1,2,3,4,5	Collection Method EE <input checked="" type="checkbox"/> AV <input type="checkbox"/> Massage <input type="checkbox"/> Response: Erection <input checked="" type="checkbox"/> Protrusion <input type="checkbox"/> Ejaculation <input checked="" type="checkbox"/>		
Feet/Legs <input checked="" type="checkbox"/>	Semen Characteristics	Ejaculate 1	Ejaculate 2
Eyes <input checked="" type="checkbox"/>	Motility Gross (or) _____ individual (%)	<i>rigid</i>	
Vesicular Glands <input checked="" type="checkbox"/>		% Normal Cells	<i>90%</i>
Ampullae/Prostate <input checked="" type="checkbox"/>	% Primary Abnormalities	<i>8%</i>	
Inguinal Rings <input checked="" type="checkbox"/>	% Secondary Abnormalities	<i>2%</i>	
Penis/Prepuce <input checked="" type="checkbox"/>	WBC, RBC, Other	<i>—</i>	
Testes/Spermatic Cord <input checked="" type="checkbox"/>			
Epididymides <input checked="" type="checkbox"/>			
Scrotum (Shape) <input checked="" type="checkbox"/>			

Other	<p align="center">CLASSIFICATION</p> <p>Interpretation of data resulting from this examination would indicate that on this date, this bull is a:</p> <p><input checked="" type="checkbox"/> Satisfactory potential breeder <input type="checkbox"/> Unsatisfactory potential breeder <input type="checkbox"/> Classification Deferred</p> <p>Re-examination recommended on _____ DATE</p> <p>Signed: <i>[Signature]</i> MEMBER-SOCIETY FOR THERIOGENOLOGY</p> <p>Clinic: <i>Big Horn Vet Hospital</i></p>
SCROTAL CIRCUMFERENCE (CM) <i>37.25</i>	
This bull has been examined for physical soundness and quality of semen only. Unless otherwise noted, no diagnostic test were undertaken for libido, mating ability or infectious disease status of this bull.	
Remarks and Interpretation (diagnosis, prognosis, recommendations) <i>Trich Tested</i>	