

MANAGEMENT QUESTIONNAIRE

Farm _____

Please fill out this form with information from the last 12 months.

[Dairy Comp 305 software commands are in brackets and can be ignored if you don't use the program.]

What is your major concern regarding reproduction on your farm? _____

Meeting One date: _____ **Meeting Four date:** _____

PRODUCTION		
QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Herd size (lactating and dry cows) [SUM DIM MILK M305 PCTF PCTP FOR LACT>0 BY LCTGP then BY RPRO]	_____ COWS	_____ COWS
Number of first lactation cows [Same command]	_____ COWS	_____ COWS
Rolling herd average (RHA) or lbs/cows/day or mature equivalent (ME) 305 [Same command]	RHA _____ lbs/cow/d ____ ME 305 _____	RHA _____ lbs/cow/d ____ ME 305 _____
Milk fat % (last month) [Same command]	____%	____%
Milk protein % (last month) [Same command]	____%	____%
Breed [SUM DIM BY CBRD]	<input type="radio"/> Holstein <input type="radio"/> Jersey <input type="radio"/> Crossbred <input type="radio"/> Other _____	<input type="radio"/> Holstein <input type="radio"/> Jersey <input type="radio"/> Crossbred <input type="radio"/> Other _____
Number of milking cows [COUNT FOR RC=1-5 LACT>0]	_____ COWS	_____ COWS
Herd average days in milk (DIM) for milking cows [SUM DIM FOR LACT>0 RC=1-5]	_____ d	_____ d

(continued)



What is the average days dry for your herd? [SUM DDRY]	____d	____d
What is your bulk tank somatic cell score (SCC)? [SUM SCC FOR SCC>200 FOR LACT>0]	____cells/ml	____cells/ml
ARE THERE ANY CONCERNS REGARDING PRODUCTION? _____		

GENERAL MANAGEMENT

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
What is your voluntary waiting period (VWP)? [GRAPH BRED1 BY DIM or GRAPH BRED1 FOR BRED1>0 LACT>0\H]	____d	____d
How often do you have meetings with your veterinarian and reproductive team to discuss reproduction issues in your herd?	<input type="radio"/> Yearly <input type="radio"/> Monthly <input type="radio"/> Weekly	<input type="radio"/> Yearly <input type="radio"/> Monthly <input type="radio"/> Weekly
How many times each day are cows milked?	<input type="radio"/> 1x <input type="radio"/> 2x <input type="radio"/> 3x	<input type="radio"/> 1x <input type="radio"/> 2x <input type="radio"/> 3x
Do you forestrip?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Do you use bovine somatotropin (bST)? What % of the herd?	<input type="radio"/> Yes <input type="radio"/> No _____%	<input type="radio"/> Yes <input type="radio"/> No _____%
What is your grouping strategy?	<input type="radio"/> Only one pen for all cows <input type="radio"/> Stage of lactation <input type="radio"/> Production <input type="radio"/> Reproduction <input type="radio"/> Other _____	<input type="radio"/> Only one pen for all cows <input type="radio"/> Stage of lactation <input type="radio"/> Production <input type="radio"/> Reproduction <input type="radio"/> Other _____

ARE THERE ANY CONCERNS REGARDING GENERAL MANAGEMENT? _____

(continued)



PREGNANCY RATE

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
What is the whole herd current 21-d pregnancy rate? Adjusted to the actual VWP [BREDSUM\EAV (VWP number)]	_____ %	_____ %
Unadjusted to the actual VWP (50-d VWP) [BREDSUM\EA]	_____ %	_____ %
What is the AI 21-d pregnancy rate? Adjusted to the actual VWP [BREDSUM\EV (VWP number)]	_____ %	_____ %
Unadjusted to the actual VWP (50-d VWP) [BREDSUM\E]	_____ %	_____ %
ARE THERE ANY CONCERNS REGARDING PREGNANCY RATE? _____ _____ _____		

AI INSEMINATION RISK

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Current insemination risk (IR) [BREDSUM\EV (VWP number)]	_____ %	_____ %
Is there variability in IR by season? If yes, how? [BREDSUM\E]	<input type="radio"/> Yes <input type="radio"/> No _____ _____	<input type="radio"/> Yes <input type="radio"/> No _____ _____
Is there variability in IR by lactation number? If yes, enter IR by lactation number. [BREDSUM FOR LCTGP=1\E] [BREDSUM FOR LCTGP=2\E]	<input type="radio"/> Yes <input type="radio"/> No Lactation 1 ___ % Lactation ≥2 ___ %	<input type="radio"/> Yes <input type="radio"/> No Lactation 1 ___ % Lactation ≥2 ___ %
What % of your cows were inseminated within 21d of the VWP? (for the last 6 months) [PCT BRED1 < (VWP + 21) FOR LACT>0]	_____ %	_____ %
What are your average days to first insemination for cow in 1st and ≥2 lactation? [SUM BRED1 FOR LACT>0 BY LCTGP]	Lactation 1 ___ d Lactation ≥2 ___ d	Lactation 1 ___ d Lactation ≥2 ___ d
What is your average interval between inseminations? [SUM HINT FOR LACT>0 BY LCTGP]	Lactation 1 ___ d Lactation ≥2 ___ d	Lactation 1 ___ d Lactation ≥2 ___ d

(continued)



What % of your cows did not receive their first AI breeding by 100 DIM? <small>[PCT DIM>100 BRÉD1=0 FOR LACT>0 BY LCTGP]</small>	_____ %	_____ %
What % of your cows received an AI service within a 4–17d period from the previous breeding? <small>[BREDSUM FOR LACT>0\]</small>	_____ %	_____ %
What is the stocking density (number of cows and stalls) in the breeding group? <small>[SUM PEN FOR LACT>0 BY PEN]</small>	_____ cows _____ stalls	_____ cows _____ stalls

ARE THERE ANY CONCERNS REGARDING SERVICE RATE? _____

What is the minimum production of pregnant cows to maintain herd size (the pregnancy hard count)? <small>[GRAPH WKCC FOR LACT>0]</small>	ANSWER (Meeting One) Total herd size (lactating + dry cows) _____ cows Replacement (culling) rate (____%) – _____ cows Pregnancy loss (____%) + _____ cows Total pregnancies needed = _____ pregnancies Desired calving interval (CI) _____ months $\frac{\text{Pregnancies needed}}{\text{desired CI}} = \text{(Pregnancies needed per month)}$ $\frac{\text{Pregnancies needed per month}}{\text{Conception Rate}} = \text{(Cows inseminated per month)}$
	ANSWER (Meeting Four) Total herd size (lactating + dry cows) _____ cows Replacement (culling) rate (____%) – _____ cows Pregnancy loss (____%) + _____ cows Total pregnancies needed = _____ pregnancies Desired calving interval (CI) _____ months $\frac{\text{Pregnancies needed}}{\text{desired CI}} = \text{(Pregnancies needed per month)}$ $\frac{\text{Pregnancies needed per month}}{\text{Conception Rate}} = \text{(Cows inseminated per month)}$

(continued)



ESTROUS DETECTION

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
What is the predominant method used to detect cows in estrus? <i>(Check one.)</i>	<input type="radio"/> No heat detection <input type="radio"/> Tail chalk or paint <input type="radio"/> Visual observation <input type="radio"/> Pedometers <input type="radio"/> Pressure patches <input type="radio"/> Activity monitors <input type="radio"/> Combination (describe) _____ <input type="radio"/> Other _____ _____	<input type="radio"/> No heat detection <input type="radio"/> Tail chalk or paint <input type="radio"/> Visual observation <input type="radio"/> Pedometers <input type="radio"/> Pressure patches <input type="radio"/> Activity monitors <input type="radio"/> Combination (describe) _____ <input type="radio"/> Other _____ _____
Is estrous detection performed by farm personnel or outsourced to a professional technician?	<input type="radio"/> On-farm personnel <input type="radio"/> Professional technician	<input type="radio"/> On-farm personnel <input type="radio"/> Professional technician
How many times per day are cows observed for estrus? For how long?	Times/day: _____ Minutes: _____	Times/day: _____ Minutes: _____
Where are cows observed for estrus?	<input type="radio"/> Pen <input type="radio"/> Parlor <input type="radio"/> To or from parlor <input type="radio"/> Other	<input type="radio"/> Pen <input type="radio"/> Parlor <input type="radio"/> To or from parlor <input type="radio"/> Other
How many people are responsible for estrus detection?	1 2 3 4 5 6	1 2 3 4 5 6
Is estrous detection combined with other activities?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
On what kind of surface are cows standing when observed for estrus?	<input type="radio"/> Concrete <input type="radio"/> Dirt	<input type="radio"/> Concrete <input type="radio"/> Dirt
Do you know the % of anovular (i.e., non-cycling) cows in your herd?	<input type="radio"/> Yes <input type="radio"/> No If yes, estimate: ____ %	<input type="radio"/> Yes <input type="radio"/> No If yes, estimate: ____ %
How did you determine the % of anovular cows?	<input type="radio"/> Palpation <input type="radio"/> Blood progesterone	<input type="radio"/> Palpation <input type="radio"/> Blood progesterone
ARE THERE ANY CONCERNS REGARDING ESTRUS DETECTION? _____ _____ _____		

(continued)



MALE FERTILITY

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Do you use a bull to breed your cows? <i>(If your answer is no, skip next four questions.)</i>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
What is your cow-to-bull ratio?	_____	_____
Based on which parameter do you move cows to the bull pen? <i>(Estimate % by parameter.)</i>	Failed inseminations ____% Days in milk ____% Other ____%	Failed inseminations ____% Days in milk ____% Other ____%
Do you submit your bulls to a breeding soundness examination?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
What is your bull pregnancy rate (PR)?	_____%	_____%
Do you use sexed semen in cows? <i>(If you only have bulls, skip questions until end of this section.)</i>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Seldom	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Seldom
Do you use sire conception rate rankings to choose sires?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Do you use daughter pregnancy rate rankings to choose sires?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Do you have a mating program?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
What semen do you use on repeat service animals?	<input type="radio"/> Same as 1 st service <input type="radio"/> Young sire	<input type="radio"/> Same as 1 st service <input type="radio"/> Young sire
What price range is your semen?	Between \$_____ and \$_____	Between \$_____ and \$_____
ARE THERE ANY CONCERNS REGARDING MALE FERTILITY? _____ _____		

(continued)



SYNCHRONIZATION PROTOCOLS AND BREEDING

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Do you use estrous synchronization or timed AI protocols?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
How do you use these protocols? <i>(Estimate % of use.)</i>	Setting up cows for first service _____% Resynchronizing 2 nd and later services _____% Breeding cows with ovarian cysts _____% Breeding anestrous or anovular cows _____% Other _____%	Setting up cows for first service _____% Resynchronizing 2 nd and later services _____% Breeding cows with ovarian cysts _____% Breeding anestrous or anovular cows _____% Other _____%
Which method is most often used to submit animals for their first and later services? <small>[BREDSUM\XBO]</small>	1 st serv. ≥ 2 nd serv. Heat detection _____% _____% PGF _{2α} only _____% _____% OvSynch _____% _____% PreSynch _____% _____% Double Ovsynch _____% _____% CIDR synch _____% _____% Other _____% _____%	1 st serv. ≥ 2 nd serv. Heat detection _____% _____% PGF _{2α} only _____% _____% OvSynch _____% _____% PreSynch _____% _____% Double Ovsynch _____% _____% CIDR synch _____% _____% Other _____% _____%
Which products and what doses do you use?	Gonadotropin (GnRH) product: _____ Dose: _____ ml Prostaglandin (PGF _{2α}) product: _____ Dose: _____ ml	Gonadotropin (GnRH) product: _____ Dose: _____ ml Prostaglandin (PGF _{2α}) product: _____ Dose: _____ ml
How many people are in charge of giving the injections for the reproductive program?	_____	_____
ARE THERE ANY CONCERNS REGARDING SYNCHRONIZATION AND BREEDING? _____ _____		

(continued)



Meeting One

Diagram your protocol for enrollment and re-enrollment. Include the timing of injections (AM-PM) and inseminations.

Enrollment DIM

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

P=PGF_{2α} G= GnRH T= TAI C= CIDR

Re-enrollment days since bred

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

H= Herd check

(continued)



Meeting Four

Diagram your protocol for enrollment and re-enrollment. Include the timing of injections (AM-PM) and inseminations.

Enrollment DIM

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
P=PGF _{2α} G= GnRH T= TAI C= CIDR						

Re-enrollment days since bred

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
H= Herd check						

(continued)



TRANSITION COW MANAGEMENT

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Is there a routine body condition scoring (BCS) program for postpartum cows?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Do more than 15% of the cows in the breeding group have a BCS of >3.50 or <1.75? (Refer to BCS chart provided.)	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Can you tell if the loss in BC was during the dry period, post fresh or both?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Did you recently perform a locomotion score on the breeding group pen?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
What percentage of your breeding group had locomotion scores ≥ 3 ?	___ %	___ %
What is the most common foot problem reported?		
Do you use footbaths? What product do you use? How often do your cows use the footbath?	<input type="radio"/> Yes <input type="radio"/> No _____ _____	<input type="radio"/> Yes <input type="radio"/> No _____ _____
How often do you have your cows' hooves trimmed?	_____	_____
Is your herd on a regular hoof trimming program?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Were any of these postpartum metabolic diseases a problem during the last 3 months? <small>[EVENTS\ 5]</small>	Ketosis ___% Milk Fever ___% Metritis ___% Mastitis ___% RP ___% Pneumonia ___% DA ___%	Ketosis ___% Milk Fever ___% Metritis ___% Mastitis ___% RP ___% Pneumonia ___% DA ___%
Do you use the Transition Cow Index?	<input type="radio"/> Yes <input type="radio"/> No Value: _____	<input type="radio"/> Yes <input type="radio"/> No Value: _____
What is your week 4 milk average for your cows?	_____ I don't have daily milk weights Lactation 1 _____ Lactation ≥ 2 _____	_____ I don't have daily milk weights Lactation 1 _____ Lactation ≥ 2 _____
Does the first milk fat/milk protein ratio test indicate problem cows or groups?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

(continued)

How many cows were sold and died ≤60 DIM?
 [EVENTS\6] (add sold and died <30 and 30-60 DIM and divide it by total # fresh)

_____ % sold
and died

_____ % sold
and died

ARE THERE ANY CONCERNS REGARDING YOUR TRANSITION COW MANAGEMENT? _____

CONCEPTION RATE

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Current overall conception rate (CR) [BREDSUM\B]	_____ %	_____ %
By lactation group? [go to OPTIONS and select lactation number]	Lactation 1 _____ Lactation ≥2 _____	Lactation 1 _____ Lactation ≥2 _____
By technician? [go to OPTIONS and select By Technician]	Tech 1 _____ % Tech 2 _____ % Tech 3 _____ %	Tech 1 _____ % Tech 2 _____ % Tech 3 _____ %
By day of the week? [go to OPTIONS and select By Day of the Week]	S _____ % M _____ % T _____ % W _____ % Th _____ % F _____ % S _____ %	S _____ % M _____ % T _____ % W _____ % Th _____ % F _____ % S _____ %
Is there any variability in CR by season? [go to OPTIONS and select By Calendar Month]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
What is your timed AI CR for first service? [BREDSUM\XBO]	_____ %	_____ %
What is your timed AI CR for ≥ second services? [BREDSUM\XBO]	_____ %	_____ %
What is your first service CR to estrus breedings? [BREDSUM\XBO]	_____ %	_____ %
What are your second and later services CR at estrus? [BREDSUM\XBO]	_____ %	_____ %

ARE THERE ANY CONCERNS REGARDING CONCEPTION RATE? _____

(continued)

AI EFFICIENCY – ACCURACY OF HEAT DETECTION – TIMING OF AI

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Who is responsible for artificial insemination on your farm? (<i>% of cows bred</i>)	Professional AI technician _____% Other _____%	Professional AI technician _____% Other _____%
How many people are involved in the reproductive management of the farm?	_____	_____
Where do you restrain your cows for insemination?	<input type="radio"/> Parlor <input type="radio"/> Palpation rail <input type="radio"/> Headlocks <input type="radio"/> Freestalls <input type="radio"/> Other _____	<input type="radio"/> Parlor <input type="radio"/> Palpation rail <input type="radio"/> Headlocks <input type="radio"/> Freestalls <input type="radio"/> Other _____
When did you last train the AI technician?	<input type="radio"/> I don't have an AI technician <input type="radio"/> Two years ago <input type="radio"/> Last year <input type="radio"/> Never <input type="radio"/> Other _____	<input type="radio"/> I don't have an AI technician <input type="radio"/> Two years ago <input type="radio"/> Last year <input type="radio"/> Never <input type="radio"/> Other _____
What is the maximum number of straws thawed at once?	_____	_____
What % of cows were inseminated on the basis of true standing estrus?	_____%	_____%
What % of cows were inseminated on the basis of secondary signs of estrus (rubbed tail chalk, activated Kmar, etc)?	_____%	_____%
How many times per day are cows inseminated?	<input type="radio"/> Once a day <input type="radio"/> AM-PM	<input type="radio"/> Once a day <input type="radio"/> AM-PM
How many hours after cows are detected in estrus are they inseminated?	_____h	_____h

ARE THERE ANY CONCERNS REGARDING AI EFFICIENCY, ACCURACY OF HEAT DETECTION, OR TIMING OF AI? _____

(continued)

PREGNANCY DIAGNOSIS

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
How frequently are pregnancies diagnosed?	<input type="radio"/> Biweekly <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Other _____	<input type="radio"/> Biweekly <input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Other _____
How many days post insemination are pregnancies diagnosed?	___ to ___d	___ to ___d
What method is used for pregnancy diagnosis?	<input type="radio"/> Palpation <input type="radio"/> Ultrasound <input type="radio"/> Blood test	<input type="radio"/> Palpation <input type="radio"/> Ultrasound <input type="radio"/> Blood test
Who diagnoses pregnancies?	<input type="radio"/> Veterinarian <input type="radio"/> Non-veterinarian	<input type="radio"/> Veterinarian <input type="radio"/> Non-veterinarian
Are pregnancies reconfirmed?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
How many days after insemination are pregnancies reconfirmed?	<input type="radio"/> Recheck 1 ___d <input type="radio"/> Recheck 2 ___d <input type="radio"/> Recheck 3 ___d	<input type="radio"/> Recheck 1 ___d <input type="radio"/> Recheck 2 ___d <input type="radio"/> Recheck 3 ___d
ARE THERE ANY CONCERNS REGARDING PREGNANCY DIAGNOSIS? _____ _____ _____		

(continued)

FEMALE FERTILITY

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
What percentage of your herd do you cull annually? <small>[EVENTS\5 FOR LACT>0]</small>	____%	____%
What % of your cows left the herd last year for reproductive reasons? <small>[ECON\0]</small>	____%	____%
For the last 12 months, rank the top three reasons you decided to stop inseminating a cow (1 = most important)	___ # of breedings ___ Health issues ___ Conformation ___ \$ cull vs. replace ___ Milk production ___ DIM ___ Other	___ # of breedings ___ Health issues ___ Conformation ___ \$ cull vs. replace ___ Milk production ___ DIM ___ Other
What is your abortion rate? <small>[BREDSUM\E]</small>	____%	____%
How many cases of clinical mastitis are diagnosed each month?	____ cases/month	____ cases/month
What is the percentage of cows with a SCC of more than 200,000 cells/ml?	____%	____%
What is your new mastitis infection rate?	____%	____%
Are special needs cows kept in the calving area?	<input type="radio"/> Never <input type="radio"/> Seldom <input type="radio"/> Often <input type="radio"/> Always	<input type="radio"/> Never <input type="radio"/> Seldom <input type="radio"/> Often <input type="radio"/> Always
Are you using a vaccination program to prevent any of the following diseases that can affect reproduction? (Check all that apply.)	<input type="radio"/> IBR <input type="radio"/> BVD <input type="radio"/> L. hardjo-bovis <input type="radio"/> Brucellosis <input type="radio"/> Clostridium <input type="radio"/> Other _____	<input type="radio"/> IBR <input type="radio"/> BVD <input type="radio"/> L. hardjo-bovis <input type="radio"/> Brucellosis <input type="radio"/> Clostridium <input type="radio"/> Other _____
When was the vaccination plan last reviewed?	(approx. date) _____	(approx. date) _____
ARE THERE ANY CONCERNS REGARDING FEMALE FERTILITY? _____ _____		

(continued)

NUTRITION

QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)																								
Estimate typical bunk space (inches per cow) for each of the following groups.	Pre fresh _____ in Post fresh _____ in Lactating _____ in	Pre fresh _____ in Post fresh _____ in Lactating _____ in																								
What type of bedding do you have in each area?	Breeding pen _____ Calving facilities _____ Post fresh facilities _____	Breeding pen _____ Calving facilities _____ Post fresh facilities _____																								
How many barns do you have? How many rows does your barn have?	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 Barn 1: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows Barn 2: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows Barn 3: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 Barn 1: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows Barn 2: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows Barn 3: <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 rows																								
What kind of heat abatement is used for cows that are actively being inseminated?	<input type="radio"/> Recirculation fans <input type="radio"/> Sprinklers <input type="radio"/> Cross-ventilation <input type="radio"/> None	<input type="radio"/> Recirculation fans <input type="radio"/> Sprinklers <input type="radio"/> Cross-ventilation <input type="radio"/> None																								
Where are sprinklers and fans located?	<table style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td style="text-align: center;">Sprinklers</td> <td style="text-align: center;">Fans</td> </tr> <tr> <td>Holding area</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Feed bunk</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Stall</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </table>		Sprinklers	Fans	Holding area	<input type="radio"/>	<input type="radio"/>	Feed bunk	<input type="radio"/>	<input type="radio"/>	Stall	<input type="radio"/>	<input type="radio"/>	<table style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td style="text-align: center;">Sprinklers</td> <td style="text-align: center;">Fans</td> </tr> <tr> <td>Holding area</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Feed bunk</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td>Stall</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </table>		Sprinklers	Fans	Holding area	<input type="radio"/>	<input type="radio"/>	Feed bunk	<input type="radio"/>	<input type="radio"/>	Stall	<input type="radio"/>	<input type="radio"/>
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Stall	<input type="radio"/>	<input type="radio"/>																								
What is your frequency of feeding and of feed push up per day?	Winter: Summer: Feeding ____/d Feeding ____/d Push up ____/d Push up ____/d	Winter: Summer: Feeding ____/d Feeding ____/d Push up ____/d Push up ____/d																								
What is your feed refusal target for each of the following groups?	Pre fresh _____% Post fresh _____% Lactating _____%	Pre fresh _____% Post fresh _____% Lactating _____%																								
What is your typical frequency of feed testing and ration formulation?	Feed testing _____ Ration formulation _____	Feed testing _____ Ration formulation _____																								

(continued)

Do you feed more than one ration to your lactating cow groups? If yes, how many different rations?	<input type="radio"/> Yes <input type="radio"/> No _____	<input type="radio"/> Yes <input type="radio"/> No _____
ARE THERE ANY CONCERNS REGARDING NUTRITION? _____ _____		

REPLACEMENTS		
QUESTION	ANSWER (Meeting One)	ANSWER (Meeting Four)
Are heifers raised on your farm? <small>[BREDSUM\Y]</small>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Based on what parameter(s) are heifers inseminated? <i>(Check all that apply.)</i>	<input type="radio"/> Weight <input type="radio"/> Height <input type="radio"/> Age	<input type="radio"/> Weight <input type="radio"/> Height <input type="radio"/> Age
What is the conception rate of your heifers? <small>[BREDSUM\EY]</small>	_____%	_____%
What is the pregnancy rate of your heifers? <small>[BREDSUM\EY]</small>	_____%	_____%
What is the average age at calving of your heifers? <small>[SUM AGEFB FOR LACT=1]</small>	_____months	_____months
Do you use sexed semen on your heifers?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
ARE THERE ANY CONCERNS REGARDING HEIFER RAISING? _____ _____		

After Meeting One return the original (white) copy, and after Meeting Four return the second (yellow) copy to:
 UW-Extension Reproductive Management Team, Department of Dairy Science, UW-Madison,
 Rm. 264, 1675 Observatory Dr., Madison, WI 53706-1284. Fax: (608) 263-9412.