



# Ontario Association of Bovine Practitioners

## UPDATE

June 2011

### **PRESIDENT'S MESSAGE—Dr. Lance Males**

One of the OABP highlights of the past few months has to be the successful spring conference co-hosted with the Ontario Agri-Business Association. Dr. Dave Douglas and the Continuing Education Committee deserve congratulations for coordinating an agenda that attracted record setting attendance for a bovine practitioner CE event. That committee is already in the advanced stages of planning an exciting Fall CE session, scheduled for November 16 and 17, 2011. Based on feedback from sponsors and participants, we will be trying something new this fall by adding a meal to the Wednesday evening program. Look for details in the fall newsletter.

Prior to the spring CE, CVO hosted an afternoon session on Large Animal Medical Records. Ms. Karen Smythe and Dr. Willy Armstrong presented the guidelines, and outlined a few key differences from the companion animal requirements. There will be a number of challenges as practices adapt to fulfilling CVO expectations. One scenario that came up during the workshop was how to implement the recommendation to document oral advice given while driving between calls (using a hands free device, of course!). One potential solution is to have reception staff create a "telephone record" when the client calls. They record owner name, complaint, and have some standardized questions to ask to obtain a relevant history. Between calls, the veterinarian telephones the clinic and has the receptionist read back the telephone records. The vet can direct the receptionist to seek more information, book an appointment for examination, or provide advice. The staff member records the veterinary recommendations, and telephones the client. If medication is to be dispensed, a copy of the record goes with the medication. In all cases, the telephone record is placed in the client file at the clinic.

We invite practitioners that feel they have efficient or innovative record templates to forward them to CVO and OABP so that we can share them amongst membership on our website.

With CQM upon us, the OABP Executive has been struggling with how to share information on extralabel drug usage and withdrawal suggestions. Simply posting gFARAD responses on the website raises the concern of keeping suggestions current (for example, a 1.0 ml oxytocin i.m. injection response from a few years ago may still show a 24 hr milk withhold and not reflect more recent label claims). After much discussion, we decided to share a few recent responses in the newsletter, with an archived copy being available on the website. Practitioners bear the responsibility to ensure that their ELDU withdrawal suggestions are still current, so the decision to utilize older gFARAD responses should be done with caution.

I hope that the rain experienced in many parts of Ontario changes over to better weather in time for your summer holidays.  
- Lance

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### **Quote of the Day**

***The key is not to  
prioritize what's on  
your schedule, but  
to schedule your  
priorities.***

***Stephen R. Covey***

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## ***2011 OABP EXECUTIVE***

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<b>2nd Vice-President:</b>	Dr. Phil Meadows
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	Dr. Jason Brownridge	Dr. Kelly Haelzle	Dr. Stephen LeBlanc
	Dr. Chris Church	Dr. Adam Haight	Dr. Rob Walsh
	Amanda Topp (OVC Student Representative)		

If you are interested in becoming a member of the Executive, please contact the OABP office at oabpruth@bell.net.

## ***CONGRATULATIONS***

Dr. Jim Fairles was presented with the OVMA Award of Merit in recognition of his distinguished service to the veterinary profession.

After graduating from the Ontario Veterinary College in 1980, Dr. Jim Fairles was a partner of Harriston-Mount Forest Veterinary Services, and later owned his own clinic in Mount Forest. Dr. Fairles worked with the Canadian International Development Agency (CIDA) for two years as a Swine Veterinarian in China, where he worked in training veterinarians in swine health and production. Dr. Fairles currently works as the Client Services Veterinarian at the Animal Health Laboratory at the University of Guelph.

Dr. Fairles is involved with various veterinary associations on the local, provincial and national levels. He has previously served as Eastern Canada's representative in the American Association of Bovine Practitioners, and was actively involved with the Ontario Association of Bovine Practitioners for several years. Dr. Fairles is an active member of the Grey-Bruce Veterinary Association (GBVA). He serves as the Ontario representative on the Canadian Veterinary Medical Association (CVMA) council, chair of the Canadian Animal Health Coalition and sits on the CVMA Business Management Committee. Dr. Fairles is also the CVMA Liaison Representative on the OVMA Board of Directors, the Treasurer of Veterinarians without Borders, and Vice President of CVMA.

Congratulations Jim!

## ***EDITOR'S NOTES—Dr. Phil Meadows***



Over the past few months, the OABP has been involved with several organizations to address pertinent issues relating to our profession. This edition of the newsletter contains several more pages than recent newsletters, in an attempt to keep our membership up to date with these activities. Thanks again to Ruth Cudmore (OABP Executive Assistant) for doing a great job of putting this newsletter together.

- Phil

**OABP CONTINUING EDUCATION—Dr. Dave Douglas****Spring OABP/OABA CE Summary**

I would like to thank everyone who participated as a registrant or sponsor at our joint meeting with OABA last month. We had fantastic attendance, both Wednesday evening and Thursday. Our short agri-business presentations were well received and I believe that this portion of the program will be repeated. Other highlights included Greg Penner reviewing rumen acidosis and pH regulation of the rumen – acid removal by passage, bicarbonate and absorption. There are animals which are resistant to rumen acidosis and largely this is due to an above average ability to absorb acid. No known reason why. Dr. Todd Duffield provided reasons for poor transition cow results which included poorly planned fresh groups, mixing pre-fresh heifers and cows, inadequate calving area and close up diets too high in NDF. Tom Overton also reviewed transition cow management and explained the end result of overfeeding prepartum cows....large decreases in DMI close to calving, sluggish DMI post calving, rapid BCS loss, above average level of ketosis and depressed colostrum yield. Rick Brouk discussed heat stress and gave us the items he uses to monitor peak milks by month and preg rates. In his opinion, your best bang for the buck in cooling cows are in order - the holding area, the resting area and the feed area. Rick Grant spoke about stocking densities and gave his reasons as to why mature cows and heifers should not be mixed. If mixed together with cows, heifers will: have reduced DMI - 10%; reduced rest - 20%; milk reduction- 9%; and excessive BCS loss and reduced drinking, rumination and milk fat. Finally, Dr. Dave Kelton gave his thoughts on disease recording and its value: benchmarking, biosecurity, genetic selection, surveillance and research.

**Fall 2011 CE Plans**

Our meeting next fall is pretty much set. Here are the dates to keep in mind: ***Wednesday, November 16 and Thursday, November 17, 2011 at the Holiday Inn Guelph.*** We will continue our evening session as it has been well received. We are adding something new to the evening program however - a buffet dinner will be available during the registration period before the speaker sessions. We found this request on a number of registrant comments. Now you will be able to arrive on time without having to rush through a fast food meal and have dinner prior to the meeting. This should provide everyone a relaxed environment in order to enjoy our opening speakers. Our main speaker this fall is Dr. Theo Lam of the Dutch Udder Health Centre. Dr. Lam has worked with the Canadian Bovine Mastitis Research Network. He will speak to us in three sessions covering the following topics: Staph aureus and MRSA; mastitis problem solving; and, motivating producers to address mastitis issues. We will also have sessions on the economics of large animal practice, economics of dairy farming, new technologies, and of course our student presentations. Keep these two days open for this fall!

**CE Suggestions?**

As we are your Continuing Education Committee, if there are other topics you would like to see us organize, please contact any one of us on the Board of Directors with suggestions. CE events in the past include the Ultrasound course which we do anticipate running again. Something else?? Your comments on evaluation sheets really do help us move ahead in what we believe is the right direction.

**VETERINARY PRODUCT WITHDRAWAL INFORMATION—Dr. Phil Meadows**

For our members in the trenches who need to provide “off label” drug withdrawal information to clients, collecting all the data can be an onerous task at any time. With the Canadian Quality Milk (CQM) program rolling out this year, dairy veterinarians will be required to provide scripts in a more formal format for traditional off label drug use as well as some newer situations.

Currently, veterinarians can submit withdrawal information requests to the Canadian gFARAD (cgFARAD) in order to receive science based withdrawal recommendations. The OABP Directors want to facilitate the sharing of cgFARAD responses with respect to off label drug withdrawals. We have decided to create this column in our newsletter to provide cgFARAD withdrawal recommendations from questions that have been submitted by our members to cgFARAD.

We believe it is possible that veterinarians could be using some products and not providing withdrawal information because older labels do not indicate this as a requirement. While Health Canada, Veterinary Drugs Directorate (VDD) reviewers have indicated it may be safe to assume no milk or meat withdrawal periods are required when none are listed on the label for **very recently labeled** products, they also indicate that this is not true for older products.

Our intent is to provide this information on a “product” basis, not on a cow by cow treatment basis. Our initial focus will be on commonly used products for cattle where labels have indications for “dairy cattle conditions” but the labels do not indicate full meat or milk withdrawal times, and it is likely that this should be considered.

If you have any comments about this column or would like to share a cgFARAD response, please email Ruth Cudmore ([oabpruth@bell.net](mailto:oabpruth@bell.net)).

**Please note: Information not included on the label of a product may change over time. The cgFARAD withdrawal information in this column is current as of the date the submission was received by the veterinarian who contacted cgFARAD. It will still be an individual veterinarian’s responsibility to ensure information they provide with a product prescribed for extralabel use is valid, as is described in the provincial Veterinarian’s Act.**



**gFARAD Western Centre**  
**Western College of**  
**Veterinary Medicine**  
**52 Campus Drive**  
**Saskatoon, SK S7N 5B4**  
**Phone: 306-966-7359**  
**Fax: 306-966-7376**  
**www.cgfarad.usask.ca**

**Submission #1**

Product: **Dexamethasone 2 (Numerous brand names, labels similar)**

Dose: **10 ml (20mg) IM** (adult cow ~500kg)

Date cgFARAD responded: Oct. 31<sup>st</sup>, 2009

**Milk Withdrawal: 96hrs**

**Meat Withdrawal: 10days**

Excerpts from cgFARAD response

“Please advise about: Dexamethasone 2 at a total dose of 20 mg for treatment of ketosis in dairy cattle. It is given to cows with severe ketosis, usually a single injection, but sometimes 2 to 3x, with 48 hrs between injections.

From the cgFARAD pharmacologist: So at the moment, I am unable to make a withdrawal recommendation for the label dose of dexamethasone that I feel sure will prevent violative residues from being detected. In the meantime, I suggest using a minimal 10 day withdrawal for dexamethasone, with the rationale that this is likely safe for human consumption and is based upon the USP’s published expert opinions. However, this may not prevent residues from being detected by the CFIA and condemnation of the treated animal. Therefore, the Canadian gFARAD recommends a withdrawal interval of 10 days for meat and 96 hours for milk, which should be sufficient so that detectable residues are not found. Because the Canadian gFARAD withdrawal recommendation is not an official withdrawal time and is based on data that has not been reviewed nor approved by the Veterinary Drugs Directorate or the Canadian Food Inspection Agency, responsibility for residue violations rests with the attending veterinarian.”

**Submission #2**

Product: **Flucort (0.5mg/ml Flumethasone)**

Dose: **10 ml (5mg) IM or IV** (adult cow ~500kg)

Date cgFARAD responded: Jan. 17<sup>th</sup>, 2007

**Milk Withdrawal: 72hrs**

**Meat Withdrawal: 4 days**

**CABV/ACVB UPDATE—Dr. Randy Graham**

- **Antimicrobial Stewardship in Agriculture and Veterinary Medicine Conference**, October 30 – November 2, 2011, Marriott Toronto Hotel [www.antimicrobialcanada.com](http://www.antimicrobialcanada.com) This conference features national and international experts on various aspects of antimicrobial drug stewardship in agriculture and veterinary medicine. Antimicrobial resistance impacts animal welfare, public health, food safety, and environmental health. If you are interested in this conference look at the website mentioned above.
- **Canadian Veterinary Reserve (CVR)** is a program of the CVMA. The CVR is seeking applications from veterinarians, especially those with food animal experience. The CVR provides on-line training, basic training and finally readiness training. CVR trained veterinarians provide emergency and disaster relief for livestock, pets, and wildlife upon request by the government. If interested please contact the CVR administrator at [reserve@cvma-acmv.org](mailto:reserve@cvma-acmv.org) or visit the website at [www.canadianveterinarians.net](http://www.canadianveterinarians.net)
- Enclosed is a **window sticker** for you to display as a "MEMBER" of CABV. CABV encourages you to place this decal in a prominent place in your clinic or vehicle as a means of promoting the national association.
- CABV's **Annual General Meeting** will once again be held in conjunction with the AABP Conference (September 22-24 in St. Louis, Missouri). The AGM is scheduled for Thursday, September 22 (lunch hour). To provide an opportunity for members from across Canada to socialize, a social function will be held on Friday, September 23 from 8 – 10 p.m. More details to follow.
- Members are encouraged to visit the **CABV website** ([www.cabv.ca](http://www.cabv.ca)) and participate in the "FORUM". Also, as a reminder a "Classifieds" page has been added to the website. As a member, you may place an ad free-of-charge (up to 100 words) relating to sale of practice, buying and selling of used equipment, or employment opportunities. The ad will appear for a one-month period.



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<sup>1</sup> LeBlanc, S.J. Postpartum uterine disease and dairy herd reproductive performance: A review. *The Vet J.* 2008;176:102-114.

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***BEEF CALF CLUBS AND THE FEEDER CALF ENHANCEMENT PROJECT***  
***Paul Stiles and Dan Ferguson (OCA), Dr. Ann Godkin (OMAFRA)***

Why do Ontario's large feedlot operators look to western Canada to fill their lots each year? First, Ontario's cow-calf herds produce about half the calves needed by Ontario's feedlots. Second, feedlot owners find it more complicated to work with a large number of independent, small cow-calf herd owners who can't produce large numbers of uniform calves at one time. These herd owners have limited time and resources to dedicate to calf marketing.

This latter reason, while revealing a problem, also points to an obvious opportunity. What if producers with similar type cattle and calving periods were to form marketing groups to present large offerings of uniformly prepared calves at one sale to feedlot operators? And what if those producers worked together with the feedlot operators to find out how their calves performed and could then use that information to improve future lots of calves?

Forming calf marketing groups ("calf clubs") isn't new. The concept has existed for years. Ontario Premium Added Calves (OPAC) and Source Qualified Ontario Calves (SQOC) are two examples of group marketing initiatives that have run in the past. Currently, the most notable and successful are the four calf clubs that sell at the Keady Livestock Market in western Ontario during Calf-o-Rama week every October. These clubs offer calves that have been vaccinated according to a standard protocol and certify that calves have been properly dehorned and castrated.

In 2010, two new clubs were formed. The South Coast Calf Club attracts members from Brant, Norfolk, Haldimand, and Niagara Counties. The first sale, held at Hagersville in November, featured 149 calves. This was a significant accomplishment in a short time. Dr. Mackenzie Littlejohn initiated the development of the South West Calf Club which held a sale in Brussels in November. This club attracted members from Middlesex, Elgin, Oxford, and Lambton Counties. The South West's club sale "piggybacked" onto a regular calf sale and featured over 80 club calves. John Mielhausen, President of the Bruce Peninsula Charolais Calf Club, Dr. Mac Littlejohn, and Sandra Vos from the South Coast Calf Club have been featured speakers at a number of meetings around Ontario, taking the message of the benefit of proactive marketing of calves. We hope this encourages the development of more clubs.

The Ontario Cattlemen's Association (OCA) aims to expand the calf club marketing concept throughout the province. This direction has been mandated by the strong producer support of a resolution at OCA's Annual General Meeting in 2010. In early 2010, OCA launched a program entitled the Feeder Calf Enhancement Project (FCEP). OCA has committed up to \$200,000 over four years to focus on expanding existing calf clubs and to facilitate the development of new clubs. Last summer (2010), OCA secured additional funds (\$116,000) from the Agriculture Management Institute (AMI) which will be used to increase awareness and support for the FCEP until December, 2012.

Clubs generally work with a veterinarian and a calf sale organizer to establish their basic health and vaccination protocols. Specific vaccine antigens and brands of vaccine may be included in club protocols and in calf sale marketing plans. Given the broad geographic spread of each club's membership, individual herd owners work with their own local herd veterinarians to prepare calves and purchase vaccines. These veterinarians, those with whom producers have established their Vet-Client-Patient Relationship (VCPR), have the final say on the suitability of the club health and vaccination protocols for their clients. While adherence to club protocols is required for marketing via the calf sale, herd veterinarians may recommend additional procedures or to fine tune recommendations for their clients.

Calf clubs support local vet clinics. Beef producers are well aware that a loss of support for local large animal veterinarians has the potential to lead to veterinary service shortages in some areas of Ontario.

In addition to a price premium on calves, as has been the case in previous years, calf club members benefit by working with like minded, progressive cow-calf producers. Benefits include learning opportunities, utilization of improved health and vaccination protocols, process verification, and greater attention to detail, which leads to better health outcomes. The clubs also provide unique educational opportunities for producers and veterinary practitioners regarding health and marketing strategies.

A second phase of the FCEP will include the establishment of one or more "Progressive Beef Producer" groups, similar to the Progressive Dairy Operators and the Large Flock Operators (sheep), to facilitate transfer of information, club development, and communications.

If you have questions about the FCEP or Calf Clubs please contact Paul or Dan at OCA 519-824-0334 or Ann at 519-846-3409.

## **MANDATORY ANIMAL HEALTH REQUIREMENTS FOR ONTARIO 4-H SHOWS—Drs. Henry Ceelen and Adam Haight**

Veterinarians have been involved many times in determining whether a particular animal has been infected/affected by a particular disease entity at a 4-H or other cattle show, and then handed the responsibility of deciding whether the animal and the exhibitor should be expelled from the show or not, based on the presence or absence of a disease. Show committees have too often ignored or avoided the issue of standardized mandatory health requirements for show cattle. When health requirements are not equivalent or the rules are not applied consistently within jurisdictions or between jurisdictions, exhibitors and 4H leaders become confused and resentful when disqualifications occur. The biggest losers are the exhibitors - the 4-Hers - our aspiring dairy and beef farmers of the future.

The Executive of the Ontario Association of Bovine Practitioners (OABP) have come to the conclusion that there must be a better, more proactive method of dealing with these situations that is fairer to all parties. 4H Ontario has welcomed the collaboration on the development of a program to educate and improve the knowledge and showmanship of their members and leaders.

Recently, 4-H Ontario invited stakeholders and interested parties to a meeting to discuss this issue. The goal of the collaborative working group is to establish a set of health guidelines for 4H calves and 4-H shows in Ontario. The group has the mandate to determine the following:

1. Should there be mandatory province-wide health requirements for **ALL** 4-H calves at **ALL** shows?
2. If so, what should the health standards be?
3. Finally, who will enforce and police these standards?

The OABP Executive has provided their initial perspective on these important questions in the information that follows.

(cont'd on next page...)



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**MANDATORY ANIMAL HEALTH REQUIREMENTS FOR ONTARIO 4-H SHOWS (cont'd)*****Should there be province-wide 4-H calf health standards?***

We believe that the answer to this question should be "Yes". If province-wide calf health standards were implemented, it would be easy to educate the 4-H organization, local 4-H leaders, 4-Hers and their parents on the standards, and to explain why particular standards are necessary and important. The standards would avoid the confusion that presently exists, wherein a particular calf may be eligible to be exhibited at the county level in spite of the presence of a contagious disease, be one of the best at the county level and therefore eligible for the Royal Agricultural Winter Fair (RAWF), but rejected at the RAWF because it failed the health exam at the RAWF. Bovine veterinarians would welcome being *proactively* involved in the education process at the provincial and county level. Discussing health standards annually at the calf club level, early in the 4-H year would be effective.

***What should the health standards be?***

The OABP Executive formed a subcommittee to discuss this issue. The consensus of the subcommittee was that the 4-H calves should be free of **ANY evidence of communicable diseases including and especially ringworm and warts**. Additionally, **they should be appropriately vaccinated against the common contagious viral diseases prior to a show(s)**. It should also be understood that the calf must otherwise be healthy: bright and alert, normal appetite and temperature, and free of such medical conditions as respiratory disease or diarrhea. If the calf is under treatment for any condition at the time of the show, it must be accompanied by documentation from the herd veterinarian indicating the identity of the animal, and the treatment it is undergoing.

Ringworm and warts are both highly contagious diseases. **Ringworm** is also a zoonotic disease, which means it can be spread from cattle to humans. It is caused by a fungus that invades hair, hair follicles and the surrounding skin tissue. The body mounts an immune response to the fungus, but it can take months before the fungus is eliminated and the skin lesions fully healed. Immunity is typically short-lived and incomplete after infection. Severe infections are typically confined to debilitated or immune suppressed animals. Immune suppression is caused by such things as poor nutrition, parasitism and other disease states (pneumonia, scours). Spread occurs from direct contact or by contaminated fomites such as grooming tools, clipper blades, or tack. As a result, cattle shows can contribute significantly to the spread of the disease.

**Warts** are caused by a virus. Spread occurs by direct contact, fomites as per ringworm, and also possibly by insects. Warts typically appear two months after exposure to the virus and may last over a year. Immunity usually develops three to four weeks after initial infection, but infection occasionally recurs, probably due to loss of immunity. Treatment is often not undertaken because the infection is relatively short-lived and because many treatments are of questionable effectiveness. Surgical excision is the most common therapy employed, but care must be taken to wait until the warts stop growing in size or are starting to regress. Premature excision appears to stimulate growth of warts and encourage recurrence of the warts. Affected animals should be isolated, but because of the long incubation period, unaffected animals are often already exposed by the time initial infection is apparent.

There presently are no commercial vaccines available for warts or ringworm. Therefore, the primary focus of prevention is avoidance of contact with affected cattle. The purchase of infected cattle and the co-mingling of cattle at shows, sales, and in communal calf, heifer or dry cow raising facilities are the primary methods that these diseases are introduced to farms. On some farms, ringworm or warts are endemic on the farm, often in a particular age of cattle. On these farms, 4-H calves should be housed in separate facilities from their herd mates of a similar age. Ideally (providing that the pre-weaned calves are not affected by ringworm or warts), the show calves should be housed separately from their herd

(cont'd on next page....)

**MANDATORY ANIMAL HEALTH REQUIREMENTS FOR ONTARIO 4-H SHOWS (cont'd)**

mates of a similar age. Ideally (providing that the pre-weaned calves are not affected by ringworm or warts), the show calves should be housed separately from their herd mates from weaning through the entire duration of the show season. For home herd biosecurity reasons, they should remain segregated (quarantined) from the resident herd for several months after the last show to reduce the risk that they will introduce a contagious disease to the resident herd. This means, at a minimum, not in physical contact (including through a gate) and not sharing any common feeding or water access.

All 4-H calves should be vaccinated for the common highly contagious viral diseases including **IBR** (Infectious Bovine Rhinotracheitis), **BVD** (Bovine Viral Diarrhea), **BRSV** (Bovine Respiratory Syncytial Virus), and **PI-3**

(Parainfluenza Virus 3). This will protect the health of the show calf but also the home herd when the calf returns. This can be accomplished with multiple doses of a killed vaccine or a live virus vaccine following the manufacturer's and/or herd veterinarian's instructions regarding the age of the calf at the time of vaccination, number of doses required, and route of administration. Existing vaccines are highly effective in the prevention of these diseases. Calves must have completed the recommended vaccination program at least two weeks prior to the first show they are to participate in. Therefore, careful planning is the key to the success of this health standard.

**Who should enforce the health standards?**

Currently, veterinarians are primarily consulted to provide their expertise **at the time of the show**. These situations can be highly volatile and stressful for all involved. A veterinarian can become the target of criticism if he/she disqualifies the calf in question. At the county level, the veterinarian could be in a conflict of interest if the calf in question were a client's calf. We suggest

*(cont'd on next page....)*

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## MANDATORY ANIMAL HEALTH REQUIREMENTS FOR ONTARIO 4-H SHOWS (*cont'd*)

that all parties are losers in these situations, and that these situations should be avoided at all cost.

Responsibility for the enforcement of the health standards should be shared among the provincial 4-H organization, the calf club leaders, calf owners, the parents of 4-H members, and the 4-H members themselves. 4H and the club leaders need to clearly communicate what the health requirements are, why they are important, and what the consequences of not complying with the health standards will be. Bovine veterinarians would welcome the opportunity of providing education for the members of the 4H calf clubs and their leaders. This can be best accomplished by a veterinarian attending a calf club meeting early in the 4-H year, to explain and discuss the health requirements with 4-H Club leaders, parents, owners and 4-H members. The health standards should be reinforced throughout the year by the club leaders.

In preparation for all 4-H Shows, the OABP Executive recommends that the parents of 4-H members and/or the owners of the calves, examine their calves at their respective farms ***in the week prior to the each 4-H show***, to ensure that the 4-H calves to be exhibited are completely free of ringworm, warts, and other communicable diseases, and have been vaccinated appropriately. After examining the calf, if they are unsure if the calf is eligible to be shown, they should contact the 4-H leader, who should then examine the calf to make the final determination, prior to show day. If the leader requires further assistance to make that determination, he/she should feel free to consult the herd veterinarian.

The **OABP Executive recommends a "completely free"** policy where debates on whether the disease is still "alive", "active" and "contagious" are avoided. **There must be absolutely no visible sign of ringworm, warts or other communicable disease on the calves.** Finally, a 4-H Calf Passport program could be reintroduced in Ontario to document the exhibitor's compliance with the health standards for the full show season.

Presently, in Ontario health requirements for 4-H calves for eligibility to attend the county, regional, provincial and national shows are either poorly explained and/or poorly and inconsistently enforced. 4-H Ontario believes strongly in holding shows that highlight healthy animals. Research is currently underway and discussions among the various stakeholders have begun, for the development of new learning tools and recommendations for Club activities and shows. As always, 4-H Ontario's focus is on a positive learning experience of members. The OABP, including both executive and the member veterinarians, welcome the opportunity to assist in the development of show calf health standards and an accompanying educational program.

Both the OABP Executive and 4-H Ontario hope that this joint educational initiative leads to better education about health improvement programs for 4-H participants and healthier 4-H show calves.

### **Addendum: Where Are We Now?**

*The article on 4-H standards was published in March, 2011 with collaboration from 4-H Ontario and OMAFRA. It was quickly followed by a Factsheet from 4-H Ontario on this issue. That Factsheet can best be summarized as a watered-down version of our standards, and our approach. The OABP expressed our disappointment to 4-H Ontario regarding the Factsheet, but continue to dialogue with them.*

*To date, few (if any) veterinarians have been asked to discuss health standards at the calf club level (based on a survey of attendees to the Dairy Health Management Certificate Program (DHMCP) Reunion meeting on May 31—June 2, 2011).*

*Therefore, we are asking dairy practitioners to take the lead moving this initiative forward. This can best be accomplished by contacting local 4-H Calf Club leaders asking to be invited to a club meeting to explain the health standards and why they are important. OABP is developing a Power Point presentation for our members for use at these meetings. If any of you would like some clarification or assistance in this endeavour, please feel free to contact the OABP.*

*The long-term goals are to have health standards enforced consistently at all 4-H County, regional and major shows across Ontario; and to have enforcement occur at the farm level such that **all** animals exhibited at **all** shows are healthy, properly immunized, and free of any evidence of ringworm, warts, or other contagious or infectious disease.*

**CANADIAN QUALITY MILK (CQM) UPDATE—Alex Hamilton, DFO**

Following are a number of questions I recently received. My answers follow the questions:

**Q: *If written records are being kept, do they have to be in pen or is pencil fine?***

A: Records should be written in pen. This provides some measure of confidence that the record is permanent.

**Q: *On Record 13 (Equipment Cleanliness record) where it asks for the temperature of the pre-rinse or wash water - does there need to be an entry for this, or because the TTR keeps this record is this fine? (Given temperature are normal and no alarms are set off).***

A: All TTRs in Ontario record wash water temperatures and provide regulatory alarms so there is no need for a producer to keep manual records unless the TTR is temporarily out of commission.

**Q: *One of our farms has heifers receiving feed medicated with Deccox housed in the same barn as the milking cows. Cows go out to an exercise yard daily and during the moving process in theory could access the feed from the heifer manger. As is, would this constitute a major demerit or simply a minor demerit? (Deccox is not for use in lactating cows). Please let us know so we can proceed as necessary with this farm - we have a few suggestions on what we can do if changes need to be made.***

A: If the cows have access to the medicated feed it would constitute a major risk to the milk supply. The producer must therefore take steps to prevent cows having access to the medicated feed or the problem will be evaluated as a Major non-conformance when validated. Please ask the producer to make the necessary changes to his procedures to ensure lactating cows do not have access to the medicated feed.

**Q: *Dish soap (like Palmolive or Sunlight) is frequently found in milk houses - will this still be found acceptable or does this product have to be removed as it's not on the label for use in milk houses?***

A: Dish soap is not currently on the safe products list so according to CQM requirements cannot be used on animals without a veterinary prescription. The product is not labeled to be used to clean dairy equipment so according to the regulations it should not be stored in the milk house.

Note: Soap used for hand washing can be considered part of the milking process so is allowed to be in the milk house. So if liquid dish soap is used to for hand washing then the storage of the product would be acceptable.

**Q: *Cow names versus #'s. If a producer has CCIA eartags in all of his cows, which link to their pedigree from Holstein Canada, can they use the cow's name to identify her in the treatment record? Some producers do not know each cow's eartag # by memory, but know their cows by name. Assuming a relief milker could verify the name with the # in her pedigree if there were any question as to which animal was treated, could names be used?***

A: CQM requires that all animals be identified while on the farm and be identified with NLID tags when they leave the farm. All treatments must be recorded using the animal I.D. The simplest solution that is acceptable for a producer who wants to record the name of the animal in the treatment record is to have a list of the CCIA tag numbers with associated names of the animals as an appendix to the

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## CANADIAN QUALITY MILK (CQM) UPDATE (cont'd)

treatment record. This procedure provides a management protocol that meets the need of the producer while meeting CQM requirements for proper recording of animal treatments.

**Q: Eartags get ripped out frequently. One producer claimed that his cows lose eartags all the time in the headlocks of his dry cow freestall area. So, he does not put eartags in all of his cows anymore, until they leave the farm. During lactation, the cows are in tiestalls with I.D. cards above them. He would like to use the cow's name in the treatment record, instead of the tag #. Is this possible?**

A: Stall cards alone as a means of identifying cattle is not acceptable. CQM requires that animals be uniquely and permanently identified to prevent animals from being treated or milked in error. Once identified, animals treatments can be recorded using their names as described in the previous answer.

**Q: Whole herd treatments. If a producer is treating every animal in the barn on the same day, with a product such as a pour-on endectocide, does he have to record every animal's # in the treatment record or can he simply state that the entire herd was treated? The producer who asked this question treats his whole herd (over 250 head) with Cydectin on the same day. These animals have a range of #'s, since they come from many different farms. Or could he simply state that all animals were treated between the lowest # in the barn (ie. #1) and the highest (ie. # 1000)?**

A: Group treatments can be recorded as "all dairy cows" or as group of cows, i.e. - "cow #1 to #250" to simplify the animal treatment recording process.

**Q: Self-declaration in Year 2. Will DFO be mailing out these Self-Declaration Questionnaires before they are due?**

A: Starting November 1, 2011 producers will receive a notice six weeks before their Self Declaration (S.D) is due. We will include a copy of the S. D. form with their notice in the event the producers chooses to complete their form manually however we will encouraged producers to complete their Self Declaration electronically. Producers who send manually completed forms to DFO for processing will be assessed a \$50.00 fee.

## CVO—LARGE ANIMAL MEDICAL RECORDS

At the spring OABP/OABA conference, the CVO sponsored an information session on large animal medical record requirements. The following are two of the questions that were raised, along with CVO's response. Thanks to Karen Smythe at CVO for her answers.

**Question:** Many large animal practices routinely attach a sticker with clinic name and address to every unopened box of medication that we dispense (for example, mastitis treatment). Is this an absolute requirement, or just good practice?

**Answer:** Since the Regulation refers to individual containers only--the rules for which are stated in Reg sec.27(3), as per the Q&A below)--the application of a label with the clinic name and address on unopened boxes of medication is not a requirement. However, such a label is recommended as an identifier for the source of the product inside the box.

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## CVO—LARGE ANIMAL MEDICAL RECORDS (*cont'd*)

**Question:** Do containers of all dispensed items need to have a label on them that includes the owner/client name?

**Answer:** There is an exemption to the requirement for container labels to include the name of the owner of the animal(s) for drugs approved "For Veterinary Use Only" (these are F2 drugs in Schedule E).

Here is the relevant section of Reg. 1093, followed by the exemption with conditions for the exemption in **bold typeface**:

- (3) A member who dispenses a drug shall mark the container in which the drug is dispensed with,
  - (a) the name, strength and quantity of the drug;
  - (b) the date the drug is dispensed;
  - (c) the name and address of the member;
  - (d) the identity of the animal or group of animals for which it is dispensed;
  - (e) the name of the owner of the animal or animals; and
  - (f) the prescribed directions for use. R.R.O. 1990, Reg. 1093, s. 27 (3).

(4) Except for a drug marked C1, C2, C3, F1 or N in Schedule E, **subsection (3) does not apply** if the container in which a drug is dispensed is the **original and unopened container** in which the drug was packaged, **the original label on the container** has not been altered and the prescribed directions for use **are the same as the directions for use on the original label**. R.R.O. 1990, Reg. 1093, s. 27 (4); O. Reg. 161/04, s. 15.

The information about these dispensed drugs as required under the Regulation ss 27(1) [name of the owner, name, strength, quantity, & directions, if different from the label] must still be recorded somewhere in the medical record, of course-- just not on the label!

Please let your members know that they are welcome to contact me anytime (Karen Smythe, Policy and Quality Assurance Program Manager, CVO, Email: [ksmythe@cvo.org](mailto:ksmythe@cvo.org)) with questions about the rules and regulations, and my colleagues and I will endeavour to answer promptly.

## OVC RESEARCH SUMMARY

### **Efficacy of halofuginone lactate in the prevention of cryptosporidiosis in dairy calves**

Trotz-Williams LA, Jarvie BD, Peregrine AS, Duffield TF, Leslie KE. Ontario Veterinary College, University of Guelph, Guelph, Ontario N1G 2W1, Canada. Vet Rec. 2011 May 14;168(19):509.

#### Abstract

To evaluate the efficacy of halofuginone lactate (Halocur; Intervet) when used prophylactically against cryptosporidiosis in dairy calves, 513 Holstein heifer calves were randomly distributed between two experimental groups. Those in the treatment group (n=259) received 0.1 mg halofuginone base per kg bodyweight daily in a 10 ml solution, for the first seven days following birth, while those in the control group (n=254) received an equal volume of a placebo solution. Faecal samples were collected weekly from all calves until three weeks of age to test for *Cryptosporidium* oocysts and to assess the diarrhoeal status. Growth parameters of the calves were also recorded at approximately four months of age. Calves that received halofuginone were significantly less likely to shed *Cryptosporidium* oocysts during the course of the study than placebo-treated calves (odds ratio 0.6, 95 per cent confidence interval 0.4 to 0.9, P=0.009). Mean growth measurements of calves in the treated group were consistently higher than those of the control calves (hipometer-derived P=0.052, wither height P=0.097) and mortality was lower in the treated group (P=0.07). However, these differences were not statistically significant (P>0.05). No association was found between the prophylactic use of halofuginone and the incidence of calf diarrhoea. (Note: Halofuginone is not approved for use in Canada.)

***ONTARIO JOHNE'S PROGRAM UPDATE—Dr. Chris Church, OABP  
Representative to the Ontario Johnes Working Group***

As many of you are aware, a number of industry partners have joined together to help fund Johne's testing in dairy herds across the province. Testing is available for all herds, either by milk for those on test through CanWest DHI, or by blood via the Animal Health Laboratory. In order to receive reimbursement for testing, producers must:

- 1) Complete a "Risk Assessment and Management plan" (RAMP) with a trained practitioner, and
- 2) Destroy any animals with a titre equal to or over 1.0. These can be buried on farm, composted or sent to dead stock.

Producers are eligible to be reimbursed \$500 per high titre animal removed if all program requirements are completed.

As of December, 665 herds had volunteered for testing. Of the 47,095 animals tested, 70 had a titre of 1.0 or higher. Unfortunately, not all of these animals were successfully removed from the herd. Many of the producers polled stated that they simply forgot and sent the cow through the food chain. These infected cows will have very high numbers of MAP in their lymph nodes and intestinal track. To ensure these cows do not reach slaughter or other dairy herds, the program will be contacting the herd veterinarian the owner has identified on their testing submission form, by fax as soon as possible after a high titre cow is identified on laboratory testing for the Johne's program. We ask that you please notify the producer as soon as possible to discuss removal of these cows. This will give you the opportunity to remind the producer of the risk these cows pose to their own herd and to others.

The Johnes coordinator will also be sending you a poster you can display in your clinic that will help remind clients of these details shortly.

As laboratory capacity is limited, testing in the Johne's program is being offered in "windows" by county and township. Included with this newsletter is a schedule of testing windows so that you can remind producers in your own practices as their unique testing opportunity approaches. This schedule can also be found on the Johnes Education and Management Assistance Program website at [www.johnes.ca](http://www.johnes.ca). Follow the "schedule" link.

If you have any questions regarding further details, please contact Nicole Perkins, Ontario Johne's program coordinator, at [johnes@uoguelph.ca](mailto:johnes@uoguelph.ca) or by cell phone at 226-979-1664.

***OVC RESEARCH SUMMARY***

**Estimation of genetic parameters for measures of calf survival in a population of Holstein heifer calves from a heifer-raising facility in New York State**

Henderson L, Miglior F, Sewalem A, Kelton D, Robinson A, Leslie KE.

Department of Population Medicine, University of Guelph, Guelph, Ontario, N1G 2W1, Canada.

J Dairy Sci. 2011 Jan;94(1):461-70.

Abstract

The objectives of this study were to estimate the genetic parameters of survival to weaning and survival to exit for a population of Holstein calves from New York State, as well as to associate the estimated breeding values determined in the current study with traits from ongoing genetic evaluations used in Canada and the United States. Data were recorded for 7,372 heifer calves at a commercial rearing facility in New York State from arrival at 1 to 7 d of age for the duration of

**OVC RESEARCH SUMMARY (cont'd)**

stay at the facility (on average, heifers departed the facility 1 mo before calving). Performance and disease up to weaning and mortality before and after weaning were recorded. Analyzed data were limited to daughters of sires with at least 10 calves originating from farms that had sent a minimum of 5 calves to be raised at the facility. As such, calves from 264 sires and 36 herds were studied using 2 statistical methods. The first method, calf survival, used a Weibull proportional hazards model, with survival defined as age at culling, death, or censoring. The second method, a 2-trait sire model, included survival from arrival to weaning (SUV1) and survival from weaning to exit (SUV2). Both models included fixed effects of arrival weight, serum total protein, weaning weight, season and year of birth, and calving ease score. Herd and sire were included as random effects. Significant associations among all fixed effects and calf survival were observed. In general, very light or heavy weight at arrival, low total protein, low weaning weight, and difficult birth increased risk of mortality for calves. The heritability of survival from the first method was 0.063. The heritabilities from the linear model were 0.001 for SUV1 and 0.036 for SUV2. The genetic correlation between SUV1 and SUV2 was 0.58. Genetic variance was close to zero for survival of calves to weaning, but was greater for survival after weaning through the growing period. Breeding values were estimated for SUV1 and SUV2 and correlated with routinely evaluated traits from Canadian and US genetic evaluations. Significant associations between genetic evaluations for survival traits and routinely evaluated traits in Canada and the United States were found, in particular with conformation body traits, somatic cell score, fertility, and longevity.

**FREE SUBSCRIPTION TO "BOVINE VETERINARIAN" MAGAZINE**

Bayer Animal Health has teamed up with the USA-based *Bovine Veterinarian* magazine and are pleased to offer complimentary subscriptions to Canadian veterinarians starting in July 2011.

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**APPRECIATION**

Dear OABP,

On behalf of the University of Guelph, I would like to thank you for OABP's recent donation of \$750 to the Ontario Association of Bovine Practitioner's Award.

We are indebted to OABP for this meaningful investment in the U of G and its students. Your generosity will leave a permanent and lasting legacy and will help sustain our commitment to accessible and affordable education and to retaining the brightest, most innovative minds across disciplines and around the world. With this gift, OABP is supporting the leaders of tomorrow and expand our capacity for transformational collaboration towards issues that matter most—food, water, animal human health, community and environment.

Once again, please accept my sincere appreciation on behalf of the entire University of Guelph. OABP's support is helping to build a better planet and contribute to extraordinary change that will impact quality of life and the world in which we live both locally and around the globe. Thank you for sharing our vision and for your partnership with the University of Guelph.

Sincerely, Lisa Woodcock  
Associate Director  
Annual Giving, Alumni Affairs

**ONTARIO ASSOCIATION OF BOVINE PRACTITIONERS**

Promoting bovine medicine for the  
Veterinary Practitioners of Ontario

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We're on the Web!  
[www.oabp.ca](http://www.oabp.ca)

**DATES TO MARK ON YOUR CALENDAR.....**

- June 15 to 18 ACVIM Forum, Denver, Colorado. Please visit the conference website at [www.acvimforum.org](http://www.acvimforum.org) for more information about the event.
- August 25-27 American Embryo Transfer Association & Canadian Embryo Transfer Association 2011 AETA & CETA/ACTE Joint Scientific Convention, San Antonio, Texas For information, please visit the website at <http://www.ceta.ca/convention.htm> or the AETA website at <http://www.aeta.org/2011/>
- Sept. 22-24 AABP Annual Conference, St. Louis, Missouri. [www.aabp.org](http://www.aabp.org)
- Oct. 30 to Nov. 2 Antimicrobial Stewardship in Agriculture and Veterinary Medicine Conference. [www.antimicrobialcanada.com](http://www.antimicrobialcanada.com)
- November 16-17 OABP Fall Continuing Education Meeting and Annual General Meeting, Holiday Inn, Guelph

