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Linwood Veterinary Services

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We will provide industry-leading, reliable, knowledgeable service, in a friendly, courteous and timely manner, to benefit our clients and the communities we serve.

Linwood Clinic Hours: Mon-Fri 7am – 5pm Sat 7am – 12pm Hwy 89 Clinic: Mon-Sat 7am-1 pm

NOTE: BOTH CLINICS ARE CLOSED SUNDAY

Orders for Delivery: call by 9:30 am at the latest for same day local delivery Monday to Friday

24 Hour Emergency Vet Service 1-800-663-2941

APRIL 2015 NEWSLETTER

May is Rabies Vaccination Month

Your herd veterinarian will be prepared to vaccinate **all dogs and horses** on farm for rabies in **May** . Please let the office know how many of each will need to be vaccinated for rabies. Review notes below for other horse vaccines.

Equine Vaccination

Minimum Recommended (Core) Vaccines for Southern Ontario include:

Rabies (Highly advisable)

• A fatal disease and present in the wild animal population of Ontario.

Tetanus

• Is a bacterium that lives in the horse's bowel and the soil and if given the opportunity, may enter and infect wounds, the uterus at foaling or the navel of newborn foals causing a fatal paralysis.

Eastern and Western Equine Encephalomyelitis (EEE and WEE)

- Highly infective viruses spread by mosquitoes and high mortality rates and are seen
 West Nile Virus (WNV)
 - Virus which causes neurological symptoms as also seen with EEE and WEE.

Additional Suggested Vaccines for our area include:

Strangles (S. equi)

• Highly contagious upper respiratory bacterial infection that produces nasal discharge, fever and enlarged lymph nodes easily spreading from horse to horse.

Equine Herpes Virus (EHV-1, Rhinopneumonitis, or "Rhino")

Virus which may cause respiratory disease but may also cause abortion in pregnant mares.

Vaccine Schedule

A foal or adult which hasn't been vaccinated before will require a primary series of two shots about four to six weeks apart. In most cases, healthy foals born to vaccinated dams may be initially vaccinated at four to six months of age.

Adults are usually vaccinated annually. We want to vaccinate 4-6 weeks before foaling and colostrum production in mares to protect newborns, and consider our annual boosters before mosquito season begins. It then makes sense to do annual vaccinations in March. Vaccination helps to minimize the risk of disease. Each farm has different needs and by consulting with your veterinarian, an annual vaccination plan can be tailored to your situation.

How to Avoid Drug Residues

□Basic	
□Ar	nimal identification
□ID	of treated animals
□Re	ecord keeping
□Co	ommunication
□Pr	otocols for milking management of treated animals
□AI	orage and management of livestock medicines I drug use with valid VCPR (Veterinary Client Patient Relationship) ritten instructions for administration
□w	ithdrawal for meat and milk
Individual A	Animal Testing
The following are situations where testing milk is beneficial:	
\square When co	ws/ewes are added to the herd and the treatment history is not known.
☐ If a cow/ is in ques	ewe freshens/lambs earlier than expected and the dry period mastitis treatment withdrawal stion
☐ With any	Extra Label Drug Use (ELDU)
☐ If a treate	ed animal loses it's treated identification, or record
\square If an anin	mal is treated with multiple drugs at once

Sheep/Goat Milk

- Milk must go through regulatory testing before it is accepted for milk processing.
- Accredited laboratories (AHL in Guelph) are used so residue results are accurate.
- Individual tank milk samples are taken on-farm at milk pick-up.
- Milk sample is used from the truck, representing a sample from all the farms.
- Milk will not be processed if it tests positive for any drug residues.
- If the truck is positive, the milk samples collected on-farm will be tested.
- The farm that is positive for drug residues will be financially penalized.

Normal umbilical cords

Ever wondered what is a normal size umbilical cord?

- At birth the average diameter was about 7/8"(22.8mm). Range 3/4" 1".
- At 24 hours the average diameter was about 1/4"(7.64mm). Range 1/8" 1/2".

An estimate of this "normal shrink" rate suggests that even though an umbilical cord is still 1/2" in diameter at 24 hours, while somewhat unusual, does not mean an infection has begun. Ensure that the umbilical area is dipped/sprayed with lodine which is 7% or greater. Monitor this calf for the following 2 weeks for navel ill and to ensure that the umbilical cord continues to shrink as it dries up.