What Should Cattle Producers Expect from Their Vet?

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The veterinary client-patient relationship (VCPR) has been getting a lot of attention lately with all the Veterinary Feed Directive discussion. Ask cattlemen what that relationship means to them and you likely will get a range of responses from ‘a vet is an expense’ to ‘a vet is a good investment’ to ‘my vet is important to my operation.’ To me a VCPR can be described in 5 Ps: protective, preventive, proactive, productive, and profitable.

Having a relationship with a good cattle vet protects your assets. Many good cattle vets are part of your client’s herd almost as much as if it was their own. Whether it’s recommending a biosecurity plan, identifying on-farm herd health risks or maintaining vigilance to head off introduction of foreign animal diseases, cattle vets are at the forefront of protecting their client’s herd and our national cow herd. Accredited cattle vets are part of a communication network and notified by USDA if there is a threat to their client’s cattle herd. Also, if a veterinarian is aware of a danger or risk to livestock in the area, he/she can alert the producer to take adequate precautions.

Modern cattle vets have moved away from the traditional ‘fire engine’ practice of emergencies or treating sick towards more preventive health programs. Prevention is more than just vaccinations; it includes good herd nutrition (including vitamins and minerals), timely herd checks, effective receiving programs, biocontainment plans and quick intervention to check additional problems. The old adage “an ounce of prevention is worth a pound of cure” is still just as true as ever. Emergencies happen and cattle get sick and require attention. In veterinarians need to be available when clients and patients need their help, but an effective prevention program reduces the frequency of these events. An effective prevention plan saves labor and money, improves production, and reduces the need for antimicrobials.

Good cattle vets are proactive. Whether it’s dealing with potential risks on the farm or educating clients on Best Management Practices (BMPs), new vaccine strategies, good cattle vets are on the cutting edge of beef production and health. Client communication and education can be chute-side, during a farm walk-through, or through client education meetings with regional or industry experts.

Helping clients explore and implement new technology or adapt new management strategies is an important part of high quality veterinary service. Veterinarians have access to a wide network of experts and colleagues. They can use these networks to learn about new technologies or management techniques to improve client’s herd health and production.

Veterinarians are another set of eyes and may see parts of client’s facilities or operation that could be improved. Producers can be proactive too by asking their vet’s opinion on things like low stress handling, facility design, reducing antimicrobial use, fetal programming, heifer development and reproductive efficiency, effective receiving program, implant strategies, etc.

A healthy herd is a productive herd. The purpose of a herd health program is to achieve herd production goals. Modern veterinary services include new roles on production medicine and management. Cow herd fertility is essential for success of the cow-calf producer. Strategic procedures like bull breeding soundness exams, estrus detection, pregnancy diagnosis, and selective culling improve the efficiency and productivity of cow herds.

Profitability is essential. The relationship has to be a win-win for the cattleman and their veterinarian. Cattlemen have a lot invested in their cattle enterprises and veterinarians have a lot invested in their educations and veterinary businesses. Any good veterinarian knows their client’s success is also his or her success. Veterinarians that are good business people often make good business recommendations to their clients. Herd health recommendations have to be economical and effective.

Most cattle veterinarians that I know try to bring real value to their client’s operations. If your relationship with your current veterinarian is getting the job done don’t be afraid to ask their advice about what they think you might do better. If you’re not satisfied you are getting good value from your current relationship, then don’t hesitate to bring it up and if you or they want a change you should do them. The best trait a vet can have is the ability to listen to you. After all, it’s your operation and your goals.

REGULATIONS REGARDING ANIMAL HEALTH PRODUCTS

VCPR

The veterinarian-client-patient relationship (VCPR) is the basis for interaction among veterinarians, their clients, and their patients and is critical to cattle health and well-being. There is a federal definition for a VCPR and state definitions for VCPRs exist under the state veterinary practice acts. In reference to the VFD, FDA has identified a list of the VCPR jurisdiction for the state or federal definition at the following link: http://www.fda.gov/AnimalVeterinary/DevelopmentApprovalProcess/ucm460406.htm

In general, a VCPR exists when:

- The veterinarian has assumed the responsibility for making clinical judgments regarding the health of the animal and the need for medical treatment, and the client has agreed to follow the veterinarian’s instructions.
- The veterinarian has sufficient knowledge of the animal to initiate at least a general or preliminary diagnosis of the medical condition of the animal. This means the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal by virtue of an examination of the animal or the medically appropriate and timely visits to the premises where the animal is kept.
- The veterinarian is responsible for maintaining and evaluating case and treatment records, and is readily available for follow-up evaluation in the event of adverse reactions or failure of the treatment regimen.

According to the American Association of Bovine Practitioners (AABP) the following areas are considered critical components for establishing and maintaining a valid VCPR.

Written Agreement

- A veterinary practice or individual should establish a written agreement with the client that identifies the farm veterinarian who is accountable for drug use and treatments administered to the cattle on the farm operation. If more than one veterinarian is involved in the veterinary relationship on the operation, then the agreement should establish which one has the overall responsibility for treatment protocols, drug inventories, prescriptions, personnel training, and drug use on the operation. The identified veterinarian is referred to as the Veterinarian of Record.

Veterinary Oversight

- The Veterinarian of Record is the responsible party for providing appropriate oversight of drug use on the operation. Such oversight is a critical component of establishing, maintaining and validating a VCPR. This oversight should include, but may not be limited to, establishment of treatment protocols, training of personnel, review of treatment records, monitoring drug inventories, and assuring appropriate labeling of drugs.
- Veterinary oversight of drug use should include all drugs used on the farm regardless of the distribution of the drugs to the farm. Regular farm visits are an essential component to providing such oversight, however this can be supplemented through laboratory data evaluation, records evaluation, and telephonic and electronic communication. The timeliness of farm visits should be determined by the Veterinarian of Record based on the type and size of the operation.

Relationship with Consultants and other Veterinarians

- If a veterinarian who is not the Veterinarian of Record provides professional services in any type of consultative or advisory capacity, then it is incumbent on that veterinarian to ensure that the Veterinarian of Record is contacted and informed of their findings and recommendations. No protocols or procedures that have been established by the Veterinarian of Record should be changed unless or until there is an agreement by all parties about such changes. The agreement between the Veterinarian of Record and the client should establish which management groups of the farm operation are covered in the agreement. For instance, reproduction, milk quality,青年期/青年时期的喂养, feedlot, cow-calf, and sick animal treatments are possible identifiable areas.

Treatment Protocols

Protocols and treatment guidelines for commonly occurring, easily recognizable conditions should be established in writing and agreed upon by all parties involved, signed and dated. Training of personnel authorized to use drugs on the operation should be undertaken and periodically reviewed. The frequency of such training and review should be determined by the size and type of the operation, the rate of personnel turnover, and the changes in protocols and procedures. The treatment protocols and procedures should include all drugs used on the operation (over the-counter, prescription, extra-label, Veterinary Feed Directive, water soluble). All protocols should clearly define when to quit treating and seek professional help (poor response, increase in severity of signs).

Written/Electronic Treatment Record

- Written/electronic treatment records of all animals or groups of animals treated are an essential component of maintaining and establishing the VCPR and to document all treatments provided. A treatment record should include, at a minimum, the date, identification of animal(s), drug(s) used, frequency, duration, dose, route, appropriate meat/milk withdrawal intervals, and the person administering the treatment. Periodic and timely review of the treatment records, drug inventories and usage is an important part of oversight by the Veterinarian of Record.

Prescription Drugs

- Provision of drugs or drug prescriptions should be for specific time frame/appropriate animal, the scope and type of operation involved and only for the management groups within the operation for which the Veterinarian of Record has direct involvement and oversight. Additionally, failure to follow agreed upon protocols and procedures should be grounds for denial of provision of drugs or prescriptions except for an individual patient needing treatment at the time of examination. Routine examination of drug inventories on farm and product purchase records (pricing information is unnecessary) review are recommended. Cooperation with distributors is encouraged. Establishment of a VCP for the sole purpose of the sale of drugs or increased sales of a particular brand of drug product is not a valid or ethical reason for having a VCPR.