


Ranching 101

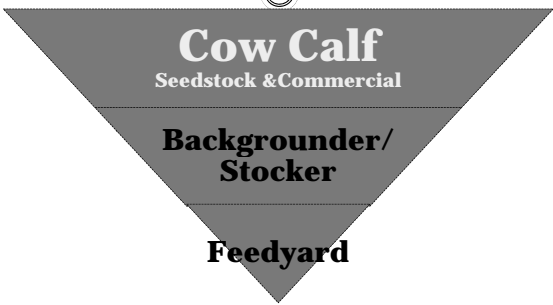
ANIMAL HEALTH AND DISEASE MANAGEMENT
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So you want to be a rancher...

- Why?
 - Taxes
 - Hobby
 - Tradition
 - Beef production
 - Nothing better to spend money on



Areas of Industry



Cow Calf
Seedstock & Commercial

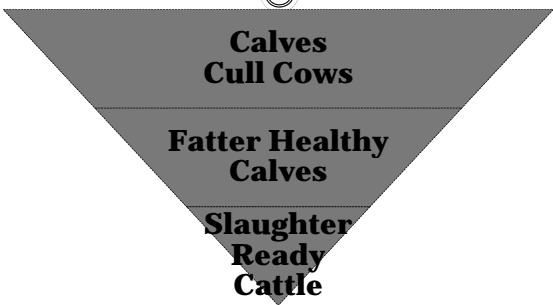
**Backgrounder/
Stocker**

Feedyard

Where Does a Vet Fit In

- Goal of vet medicine is to make your product the most profitable.
- Definition of most profitable depends on your production goals.
 - Right back to the why

Generalized Product Goals



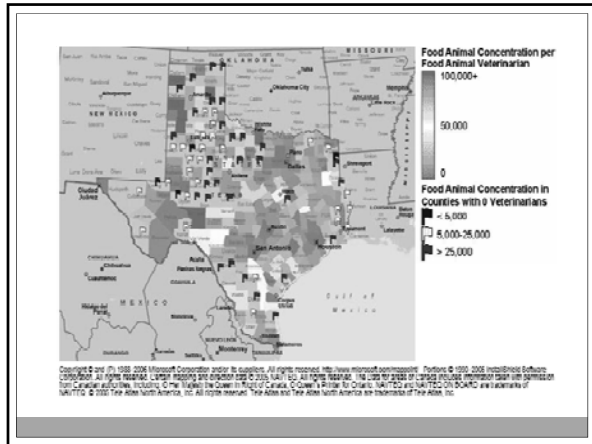
**Calves
Cull Cows**

**Fatter Healthy
Calves**

**Slaughter
Ready
Cattle**



How Do I Choose a Vet

- Not just availability or proximity
- Want a vet that offers you planning and prevention
 - Disasters = \$\$\$\$
- Willing to teach or help where needed
- Maintains emergency hours
- Plays by the rules



How to treat your vet...

1. Have a chute!!
2. Have a chute!!!
3. Have a chute!!!!

How to treat your vet...

- Pay your bill
- Don't break the rules of drugs – or any at all
- Don't break the “when to call the vet” rules

How To Use Your Vet

1. Establish Production Goals
 - Why are you playing this game
 - What area of industry fits your land and lifestyle
 - What are your profit goals
 - What are you willing to input
2. How do I reach those goals.
 - Ranching or Herd Health plan
 - ✦ More on this later

How To Use Your Vet

3. How do I avoid problems
4. How do I make my product marketable.
5. How do I handle problems along the way.
6. Holy crap...disaster!!!!

BREAK TIME!

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“THE Herd Health Plan”

- **Better titled a ranching plan**
 - MUST be based on goals and available input
 - MUST include more than vaccination protocol

Ranching Plan vs Herd Health Protocol

- **Who knows their stocking rate?**
- **Who knows the quality of their hay?**
- **Who knows how much they are spending on protein?**
- **Who knows their pregnancy rate?**
 - Calving rate?
 - ADG?
 - Weaning rate?
 - Average weaning weight?

Herd Health Plan VS Ranch Plan

- **Remember the goal is a marketable product!**



Where to start...

1. **Find a vet that is willing to work with you to write a plan**
 - You will normally pay an hourly rate for these services
2. **Ranch visit**
 - Talk about and decide on your goals
 - See where you are now

3. Team analysis of your operation and goals

- Vet
- County agent
- Nutritionist
- Range specialist

4. Establish production parameters

- Stocking capacity
- Stocking rate
 - ✦ Consider input, profit desired
- 5. **Facility inputs needed**
 - Prioritize
- 6. **Find and buy cattle or reconstruct current herd if needed**

7. Herd Health Protocol

- Receiving cattle
- Heifer development
- Breeding
- Calving
- Vaccine plans
- Parasite control
- Records
- Biosecurity/Biocontainment

Break Time



Herd Health Protocols

1. Receiving Cattle

- Cows or Heifers
 - 30 day isolation from animals in the herd
 - Vaccinate up to herd standards
 - Palpate to pregnancy check
 - Deworm
 - Prophylactic treatment – anaplasmosis/leptospirosis
 - Diagnostic Testing – BVD/Johnes/BLV
- Bulls
 - Fertility Test
 - Trich Testing
 - Anaplasmosis Testing or treatment
 - Vibrio vaccine – double dose
 - 30 day isolation from cows and herd bulls
 - Vaccinate up to herd standards
 - Deworm
 - Diagnostic Testing - BVD

Herd Health Protocols

2. Heifer Development

- Development vs Replacement
 - Economics game!
 - Remember bulls
- Feed to 65% adult weight before breeding
- Goal is 90% adult weight at calving
- Vaccinate for your future – more later
- Repro tract scores - simply puberty (+/-)

Herd Health Protocols

3. Breeding

- Have a season!!! 60 days is best 90 will work
- Heifers start 30d before cows – this will help with #4
- Innumerable articles on financial and management benefits
- Be tough
- Take the bulls out!!!!

Herd Health Protocols

4. Calving

- If you did #3 right you will have a season here too
 - Much shorter time to worry
- Palpate cows– this depends on your goals
 - Convenience
 - Minimize input costs on an open cow/heifer
 - At least 30d after bulls are removed
- Heifers are the problem children

Herd Health Protocols

5. Vaccines – no standard animal

- Heifers
- Cows
- Calves (steers)
- Bulls

**** Rules of engagement – no drug names****

Cow/Calf Vaccine Protocol	Respiratory	Clostridium ("Blackleg")	Pasturella	L. somnus	Brucellosis ("Bangs")	Lepto	Vibrio	Footrot
Calves Preweaning (3 weeks)	MU 3way	3way						
Cows At Weaning	5way Killed-AVOD MU					II		
Calves at Weaning (Timers or Heifer heifers)	MU 5way	3way	II	II				
Heifers - Prebreeding	MU 5way	3way			Amor-3yr	II		
Bulls	Killed 5way					II	Double Dose II	

6. Parasite Control

- Depends on where you live
- North TX
 - Bulls and cows 2 times a year
 - Calves over 3 months 2 times a year
 - Better to use name brands
 - Injectables are better than pour ons but pour ons have a place


7. Records

- Crap in crap out
- You cant improve if you don't know where you are
- Vaccines
 - What given to
 - Time
 - Location
 - Serial number

8. Biosecurity/Biocontainment

- Receiving protocols!
- Know what you're buying
- Be aware

Break Time



Calves: Name that disease...

Common Diseases – Calves

- **Pink eye – Moraxella bovis**
 - Calves or new introductions
 - Summer normally
 - Watery and cloudy eyes
 - Corneal ulcers
 - Consult with vet – can normally be treated by owner
 - Vaccine questionable

Name that disease...



- **“Blackleg” – clostridial disease**
 - Down or dead calves
 - Bubble wrap under skin
 - Call a vet to confirm and develop treatment protocol for other calves
 - Vaccine is great & CHEAP – Use it

Name that disease...



- **Pneumonia – Bovine Respiratory Disease Complex**
 - Talk to a vet – especially until you get the hang of treatment
 - ✦ Antibiotics – almost always a prescription drug
 - ✦ +/- Flunixin meglumine
 - Vaccines are great but you may still have some problems

Name that disease...

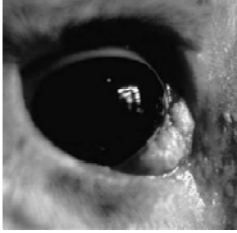


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- “Scours”
 - Viral
 - Bacterial
 - Both
 - Biocontainment
 - Large environmental impact
 - Call your vet – babies will die

Cows : Name the disease...

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Common Diseases Cows

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- “Cancer Eye” – Squamous Cell Carcinoma
 - White faced cattle – Hereford
 - Need a vet
 - Early on can be frozen or burned off
 - Late stage – enucleation
 - True decision is to cull or not to cull
 - Depends on stage

Name the disease..

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- “Down cow”
 - Need a vet
 - Caused by numerous things
 - 5 M’s
 - Mastitis
 - Metritis
 - Musculoskeletal
 - Metabolic
 - Malnutrition
 - Best chance of getting up is with prompt medical attention

Name that disease...

○




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- **Prolapse**
 - Different levels
 - ✦ Vaginal
 - ✦ Cervical
 - ✦ Uterine
 - Need a vet – the bigger the **FASTER**
 - ✦ Uterine – lethal – move slowly to chute – **DO NOT HAUL**

Is this a disease...

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- **Dystocia – stuck calf!**
- **Rules of 3**
 - 2 feet and a head or tail **BEFORE** you pull
 - 30 minutes without progress

Abortion or Dead Calves

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- Always call a vetsooner the better
- Make your rule 2 dead babies = call the vet
- Wrecks can happen fast even with the help of a vet – stop the ones you can

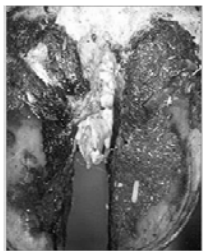
Open Cows

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- Your vet will help you with this while/after palpating for pregnancy.

Name the disease...

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Bulls: Common Diseases

- “Foot Rot” - *Fusobacterium necrophorum*
 - Wet months
 - Limping/lame
 - Swelling above coronary band
 - Smell
 - Consult vet – normally owner can treat
 - Vaccine

Name that disease...



Penile or leg injuries

- Always call your vet!
- You lose the most calves with a bull out
(Lost cow = 1 calf Lost bull = up to 30 lost calves)

When to call your vet...

- Calf Pull Rules of 3
- 2 dead babies – or anything else
- And a partridge in a pear tree
- In and it needs to be out
- Out and it needs to be in
- Early

When to NOT call your vet

- When the animals not yours
- When you have no intention of paying your bill
- When you want to break the law
- When cow is not caught
- Tomorrow

Rules of Drugs!!

- We need them
- Don't be afraid to use them
- **MUST** use them correctly
 - WITHDRAWAL TIMES
 - WITHDRAWAL TIMES
 - WITHDRAWAL TIMES
- **MUST** use them legally
- **MUST** remember how to treat our vet
- Don't give them to yourself.

Drugs you can get without a vet.

- **Oxytetracycline**
 - Antibiotic
 - Foot rot, Pink eye, anaplasmosis
 - 1 – 2 injections total
- **Penicillin –**
 - Antibiotic -
 - Blackleg, general usage
 - 2 injections/ day
- **Dewormers**

Drugs you need a script for...

- **All other antibiotics**
- **Flunixin meglamine – antiinflammatory**
- **B12**
- **Dexamethasone**
- **Reproduction drugs**
- **Lidocaine**

Drugs you cannot get from your vet..

- **Controlled anesthetic agents**
- **Illegal drugs for food animals – JAIL BAIT**
 - DES – “estrogen”
 - Chloramphenicol – antibiotic – causes severe anemia in humans
 - Nitroimidazoles - Metronidazole
 - Nitrofurans – Furasin – yellow stuff in some wound sprays
 - Clenbuterol – respiratory dilator – ok in horses
 - Dipyrone - NSAID
 - Glycopeptides - vancomycin
 - Gentian violet
 - Phenylbutazone – “Bute” – ok in horses

How to get a script from my vet...

1. **Vet can see each patient and treat accordingly**
 - Smaller operations
 - Operations lacking labor or facilities to treat alone
2. **Valid veterinary client patient relationship**
 - Ongoing scripts or scripts over the phone

How to get a script from my vet...

- **Veterinary client patient relationship**
- **Salt Creek Vet Definition**
 - Minimum of 4 visits a year
 - At least 2 on location
 - One consult
 - One producer meeting – example tonight
 - May require more depending on situation and case
 - As directed by the state
 - Special cases
 - Need to document

SUBCHAPTER H. PRACTICE BY VETERINARIAN

§801.351. EXISTENCE OF VETERINARIAN-CLIENT-PATIENT RELATIONSHIP.

- (a) A person may not practice veterinary medicine unless a veterinarian-client-patient relationship exists. A veterinarian-client-patient relationship exists if the veterinarian:
- (1) assumes responsibility for medical judgments regarding the health of an animal and a client, who is the owner or other caretaker of the animal, agrees to follow the veterinarian's instructions;
 - (2) possesses sufficient knowledge of the animal to initiate at least a general or preliminary diagnosis of the animal's medical condition; and
 - (3) is readily available to provide, or has provided, follow-up medical care in the event of an adverse reaction to, or a failure of, the regimen of therapy provided by the veterinarian.
- (b) A veterinarian possesses sufficient knowledge of the animal for purposes of Subsection (a)(2) if the veterinarian has recently seen, or is personally acquainted with, the keeping and care of the animal by:
- (1) examining the animal; or
 - (2) making medically appropriate and timely visits to the premises on which the animal is kept.
- (c) A veterinarian-client-patient relationship may not be established solely by telephone or electronic means.

More Info



- <http://aevm.tamu.edu/publications/beef-cattle/>