



River Valley Veterinary Clinic July 2018 Newsletter

by Carrie Bargren, DVM

RVVC News & Events

Drs. Stika and Inlow Moving to Greener Pastures

It is with both sadness and great excitement to announce that Dr. Nessa Stika and Dr. Allison Inlow will be leaving the River Valley Veterinary family in the middle of July.

Dr. Nessa will be heading back home to work for South Winn Vet Clinic in Ossian, Iowa, and also working as the herd veterinarian on her family's 800 cow dairy farm. She has brought entertainment in workplace with phrases such as "screaming hot ketosis". Words are inadequate to express our gratefulness and appreciation of the incomparable work performance and attitude she has displayed during her three years at RVVC. It has been an honor watching her grow her skills professionally and expand her family. Saying goodbye is never easy, especially to someone who has been such a valued team member. All at RVVC wish you the best now and into the future.

Dr. Allison will be heading home to California and will be working at Billingsley Veterinary Clinic in Tehachapi, California as a mixed animal veterinarian. On her way back to South Valley California, she is excited to take a detour through New Mexico to see the White Sands National Monument. SOME of us...will miss the frequent visits of her pet snakes! But in all seriousness, it has been an honor to work with her at RVVC over the past year.

We couldn't have asked for anyone better to join our team to help and learn in our time of need. She has been a very

dependable, supportive, and willing to step in when and where ever she was needed. While it is difficult to bid her farewell as she heads closer to home to start a new phase of her career, we sincerely wish her continued success in all her future endeavors. You will be greatly missed, but we are very excited for your opportunity.

– Ashley Kruse, DVM

Thank You, From Dr. Knoll

A note of thanks to the clinic staff and clients for the nice party on June 1st. Thanks to those of you that made it. I know that it's a busy time of year for you all. To our clients, thanks for sharing your livestock and your passion for agriculture with me. More importantly, thanks for sharing your friendship and families. We've won some and we've lost some. You have been supportive and understanding. I plan to take some time away from veterinary medicine. I don't think I'll miss the nights on call and below zero herd checks but I will definitely miss you. Thanks for the memories. God bless you.

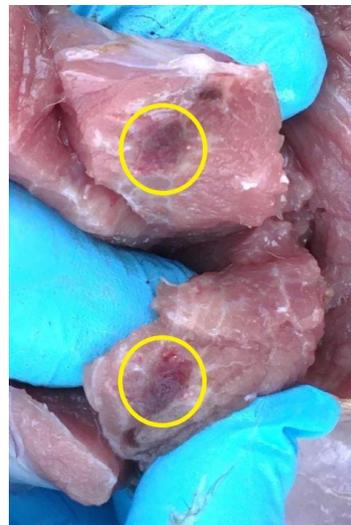
– Mike Knoll, DVM

10 Things to Remember about "The Beef Side of Milk"

Thank you to everyone who made it to our Producer Meeting Friday June 29th on "The Beef Side of Milk" presented by Dr. Dick Wallace from Zoetis. In case you missed it, here are 10 things to remember from his talk, as well as some images of real injection site lesions we had on display. Pictures of all the lesions will be on the digital version of the newsletter on our website.

1. Good Restraint Animal movement causes needle movement during injection, leading to muscle damage and incorrect route of injection. Good restraint also improves safety for the administrator.

2. Location! Location! Location! When possible give injections in the neck vs. the back leg. The neck is a less expensive cut and if a lesion is found, trimmers take a large chunk of meat out around the lesion to ensure meat safety, so better to risk losing the cheaper cut. Also, SQ injections are less likely to cause a local lesion than IM, so give injections SQ when the label allows.



Lesion from Banamine given IM 7 days ago, circled in yellow. Note that Banamine MUST BE GIVEN IV. It was given IM here to show the lasting lesions that form when Banamine is given illegally.

3. Needle Size Matters Choose needle size and length based on the product being given and how. 16g needles for giving thick products, 18g needles for thinner liquids. Longer 1.5in needles for IM injections and shorter 1in or 1/2in needles for SQ injections.

4. Needle Care Sharp needles cause less tissue damage, change every 10-15 animals. Change needles with any damage or contamination.

5. Syringe Care Dirty syringes can cause injection site lesions or even abscesses. Change out disposable syringes frequently. Clean reusable syringes with boiling water only, as soap or disinfectant residues can kill modified live vaccines.

6. Route, Dose and Product must all be correct. Choose the product that is appropriate for the condition with the help of your veterinarian. Don't give more than 10mL per injection site and space sites one hand width apart.

7. Records are a Must! Every time an animal is treated, record the following: Animal ID, date treated, drug used, dose used, route and location used, name of who administered drug and both the meat and milk withdrawal time.

8. Review Records Before Marketing The FDA is looking for drug residues at slaughter. If they see an injection site lesion, they will test the lesion for residues and flag the carcass for closer inspection. Inspectors are already on high alert for animals with black and white spots and a fully developed udder, so double check withdrawal times before shipping a dairy cow. 75% of meat residues come from Penicillin, Banamine and Sulfadimethoxine.

9. Lesions Happen Meat withdrawal times consider not only the time it takes for the drug to be metabolized and excreted by the body but also the time it takes for the local reaction to heal at the injection site. If a drug is given by the incorrect route, the lesions can be much more significant and take longer than the labeled withdrawal time.

10. Please come to our Producer Meetings! We think they are incredibly useful and fun and we look forward to having more. And there will be food! Future dates will be published in the newsletter as soon as we have them scheduled and we'll likely post it on Facebook as well. If you have any subjects that you'd like us to cover, we're always looking for more ideas.



Lesion from Bovishield 5L5 given IM 7 days ago. This is a cross-section of the lesion, which is the white discoloration between Dr. Kruse's thumbs.



Nasty yellow/green lesion from Oxytetracycline 200 given SQ 7 days ago. This lesion followed the narrow path of the needle under the skin.