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### August 2009

How's this for efficiency? I rang the X-ray department in Stratford the other day to book a follow up x-ray on my neck before visiting the surgeon next month. At least I thought it was the Stratford department I was ringing- it was a 765 number after all. However it turned out that I was automatically forwarded to New Plymouth who then transferred me back to Stratford, who upon hearing that I wanted to book an X-ray at their Stratford clinic transferred me to Hawera where they made the booking for me to be X-rayed in Stratford! Six months ago I phoned Stratford, spoke to the lady who does the x-rays and booked myself in. Under the 'new' system, what took one phone call before now takes at least 3. Is that somehow supposed to streamline the health system and save money? I think not. Sometimes I think it is a deliberate attempt to frustrate patients ("customers") to the point where half of them will give up completely thereby reducing waiting list numbers. We thought we might introduce a new phone system here in time for spring after hours. When you ring our number, it will be answered by someone in Delhi, who will in turn e-mail the details of your call to a person in Gore (via their Uzbekistan office), who will text our after hours lady, Pam, who will immediately contact you by carrier pigeon. Nice and simple. That way at least half of you will have given up and most of our patients will have died before we even get in our car, saving us time and you money. What do you think?

So, if we do actually make it to your farm this spring what will we find? From what I've seen and heard, not a lot of grass and cows in thinner condition on average than most of you would like. Combine that with nasty weather and it could make for a challenging spring. Part of Andrew's latest National fertility research involves condition scoring cows before calving and with some averages as low as 4.1, this would tend to support what we are seeing and hearing. Bear that in mind when dealing with thin cows this spring. Starter drenches after calving, covers, B12 injections and trace element supplementation where needed will all help as we try to reduce the impact of loss of even more condition in the 4-6 week period after calving. Poor, or in some cases non-existent cashflow is only going to make things tougher still. Speaking of which, if you find yourself in a position where you are having real problems meeting your commitments, please let us know. As long as we are aware of any problems you are having paying your bills, we will in most cases be able to come to some arrangement with you to make things a bit easier until money begins flowing again. All it takes is a quiet word or phone call and will be handled with discretion. Just talk to us.

Finally, in explanation of the "Tui" notice on the back of this newsletter, apparently I am also the Domain Chairman as well as default mayor of Mangatainoka. It's news to me, but if that's the case I guess I should live up to my civic responsibilities and go visit 'the girls' more regularly.

Good luck this spring and please don't forget the nice clean bucket of hot water and a towel when we visit to calve your cow this spring. Many thanks.

### Veterinarians

Alistair McDougall BVSc - CEO  
 Giles Gilling BVSc BSc MRCVS  
 Andrew Weir BVSc  
 Jim Robins BVSc, BSc, DipPharm  
 Polly Otterson BVSc, MSc, MRCVS  
 Andy Aitken BVM&S, MRCVS  
 Teresa Carr BVSc  
 Adrian Clark BVSc  
 Linley Gilling BVSc  
 Lindsay Lash BVSc

### Office

Joan Hughes      John Larkin BBS  
 Nina Bloemen    Lisa Goldsworthy  
 Jill Watson       Frank Suter

## Bobby Calf Best Practice Guidelines for Farmers

### Fit for transport

- Four days old/dry navel/hard hooves/no disease
- Active and alert/no injuries/fed and watered.

### On the Farm

- Feed colostrum to all calves
- Give calves access to good quality water at all times
- Protect calves from the wind, rain and cold at all times
- Handle calves gently and with care at all times
- Only select fit and healthy calves for transport

### Why care about your bobby calves?

They aren't replacements; they aren't worth much and they aren't going to be around for long, so why care about them? Well, for a start, the Animal Welfare Act 1999 places a 'duty of care' on all those involved with livestock. Failure to meet the needs of a bobby calf may lead to prosecution. At the very least, calves require a warm, sheltered environment & regular feeding in order to meet their welfare needs while in your care.

Meat processing Inspectors take an active interest in bobby calf welfare and follow up on all cases where problems are identified. This year MAF welfare group will be taking a particular interest in bobby calf welfare as well. While it's possible that you won't get caught if you don't look after your bobby calves, is it really worth it not to care about them?



## Assisting at Calving

You should provide assistance to calving heifers and cows when any of the following occur:

- Heifers not making progress within 2 hours after the first signs of abdominal straining
- Cows not calved within 2 hours after the first signs of abdominal straining
- Calving has not occurred within 3-4 hours after membranes have ruptured
- Delivery has commenced; the calf's legs or head are (just) visible externally and it is obvious the presentation is abnormal
- Delivery has commenced; the calf's legs or head are (just) visible externally and the calf is not delivered within 30 minutes for cows, 1 hour for heifers
- If you see the calf's tongue hanging out



If you think that a cow may have calved (e.g. she may have placenta hanging from the vulva) but have not found the calf, perform a vaginal exam to ensure that she has in fact calved.

If you assist too early, the cervix and vagina may not be fully dilated and by pulling you risk severe trauma to the cow and more difficulty in removing the calf.

If you cannot feel the calf's head, do not presume that the two legs presented are hind limbs. They may in fact be front legs and the head is twisted back (our most common presentation when called out). Check to make sure you can positively identify the hocks of both back legs and the calf's tail before attempting to pull a backwards calf.

If a cow shows signs of discomfort during the course of the day (e.g. getting up and down, licking or kicking flanks, etc) bring her in and examine her. If the cervix feels closed but things are 'tight' and 'not right' she may have a twisted uterus and needs immediate veterinary attention.

If you cannot bring the calf into the correct position within 10 minutes, or if you are not sure what you are feeling or how to proceed, stop and seek immediate assistance.



Make sure you keep things as clean as possible by using plenty of hot water, disinfectant and soap plus plenty of lubricant. Always have a clean bucket available to use when calving cows – a quick rinse of a bucket that has been used to carry milk or colostrum is not suitable.

## Managing Mastitis Checklist for this season

Your cows are under constant threat from infections that can cause mastitis. But with good understanding and careful management they can be controlled and you can keep your production on track.

Following (*courtesy of Schering-Plough Animal Health*) are best practice mastitis management techniques.

### Dealing with clinical cases

- Mastitis cases are marked and separated from the main herd during the entire treatment and withholding period
- Cows are treated with a mastitis product that works and that you have faith in
- Withholding periods are strictly observed
- All mastitis cases and treatments are carefully recorded
- Repeat offenders which do not respond to treatment are culled
- Mastitis treatment and prevention programme is discussed with your veterinarian



### At calving

- Cows calve onto clean pasture, avoiding mud or stand-off areas
- Once newborn calves have received a good feed of colostrum, suckling is minimised

### Colostrum milking

- Colostrum cows are kept as a separate mob
- Cows are checked frequently for signs of clinical mastitis
- Cows are milked out carefully and thoroughly for 8 milkings (10 for heifers)
- Milk is tested for sub-clinical mastitis before cows join the main herd

### During lactation

- Bulk tank somatic cell counts are monitored; any increases are investigated
- Signs of clinical mastitis are watched for and cases investigated
- Effective teat spraying is practised after every milking - from season start to season finish
- Hygiene is maintained (e.g. clinicals milked last, damaged teats treated, clean races maintained)
- The milking plant is monitored and faults remedied promptly

## TROUBLESHOOTING GUIDE FOR GOOD CALF REARING

The success of good rearing depends on many factors - not just the milk being fed. These are:

1. The selection of a healthy good quality calf - no twins, no induced calves
2. The colostrum intake of that calf - 10% of bodyweight in two divided feeds in first 24 hours
3. The careful transport of that calf to the calf shed - clean (Virkoned) transport trailer
4. Spray or dip navels with iodine to prevent infections
5. Housing - pen sizes, ventilation, drainage and bedding
6. Milk product (CMR or milk) - volume and frequency of feeding
7. Supply good quality meal, fibre and water
8. Good feeding utensils - teat feeders, clean and working well
9. Daily observation of health and disease
10. Effective prevention of disease and proper treatments at therapeutic levels
11. Good quality staff - preferably one person in charge, calf rearing should be high priority
12. For serious health challenges, consult your veterinarian.
13. Have good quality electrolytes handy - treatment sooner is better and more cost effective with fewer losses.



When you walk into a calf barn use all your senses to assess calf health.

1. Watch calves moving, standing up and stretching
2. The colour and consistency of the faeces
3. Discharge from the mouth or nose - saliva, mucous, blood or pus

### LOOK

1. Look at the navel and joints
2. Skin soft and shiny
3. Eyes bright and alert
4. The willingness to drink and eat

### LISTEN

1. Coughing
2. Bellowing
3. Grinding of the teeth

### SMELL

1. Smell of the faeces
2. Smell of the bedding and air
3. Smell of milk, meal, hay and water

### TASTE

1. Any product offered to the calf should be palatable and free from fungi and moulds
3. Taste the milk, meal, fibre and water

## REHYDRATION OF CALVES

Calves that are scouring are losing body water; body salts (electrolytes) and energy. Weight loss can be dramatic and fatal. These ingredients must all be replaced as quickly as possible. Irrespective of the cause of the diarrhoea (nutritional or infectious) the treatment is the same. That is to replace the lost fluids and help to maintain the energy of the calf. This is best done by giving good quality electrolytes during the period of diarrhoea and the recovery period.

Oral electrolytes by themselves are lower in energy than milk, so milk feeding during the scouring period should be continued as much as possible. Milk should never be withheld for longer than 24 hours. Feed electrolytes only for the first 12 hours then alternate milk and electrolyte feeds. For mild scours electrolyte powder can be added to milk but you must make plenty of clean water available and the calf must be able to get to it.

CALF SYMPTOMS	% DEHYDRATION
Diarrhoea only	5%
Eyes slightly sunken, skin slow to flatten if pinched, gums sticky, calf depressed	7%
Eyes sunken, skin slow to flatten if pinched, gums sticky, calf depressed	9%*
Eyes very sunken, skin won't flatten out if pinched, calf cannot stand	12%*

\* These calves will need additional intravenous fluids administered by a vet.

Note: Any calf that has scoured for one day is at least 5% dehydrated.

The following table relates to a 45kg calf:

Degree of dehydration %	Maintenance water required litres/day	Amount of extra fluid needed to restore body water litres/day	Total fluids required litres/day
2%	4.5	1	5.5
5%	4.5	2.3	6.8
10%	4.5	4.5	9

**Give no more than 2 litres per feed. The dehydrated calf needs to be fed 3-4 times per day.**

## Calf De-horning Revamp

After the difficulties in providing our premium calf de-horning service last year we have reviewed our systems and come up with a new, hopefully more efficient, version for this season.

In the past we have limited the number of calves de-horned at any one session to 20 or 25 based on the fact that on average a sedated calf stays asleep for about an hour. It became difficult and dangerous if a single vet was sedating more calves than that plus monitoring their status while doing the job.

This year we will be de-horning in teams of two - primarily Adrian and/or Andy or Lindsay with the help of our large animal technician/nurse Jill. The plan is to book in calf de-horning on certain days and they will come and do all your calves between the ages of 2-6 weeks in one go. Remember this is a premium service and isn't designed to compete on price. If you want your calves sedated and dehorned in a stress and pain free way, this is the method for you. If you don't there are plenty of people out there offering lower cost alternatives.

The cost will be a visit fee + \$6.85 (incl.GST) per calf. Phone the clinic to book your calves in early.



## Screening of Young Stock for BVD

BVD is one of the most common viral infections in NZ dairy cattle. It is estimated to cost the industry about \$45 million per year or close to \$100 per cow in infected herds. This is through decreased reproductive efficiency, less milk production, higher somatic cell counts and increased animal health costs.

Heifer replacements are an important source of continued infection for the herd so it is important that these are screened for persistent BVD infection prior to entering the herd.

This testing can be done at any time prior to entering the herd. However, it does make sound economic and disease control sense to do this as early as possible – preferably whilst calves are still indoors being reared.

This is because any BVD carriers present in the calves can be removed from the farm before they have a chance to spread infection to older animals.

Testing is simple. It involves collecting either a blood sample or minute piece of ear skin from each replacement heifer.

Talk to your vet about getting these tests done.

For more information on BVD, refer to [www.controlbvd.org.nz](http://www.controlbvd.org.nz)



## RFMs - Retained Foetal Membranes -The Latest

RFMs, or the smell of spring, have a colourful past and the way we have treated them has changed dramatically over the years. When I first qualified we used to pull, tug, lean and generally wrestle them out if we could and then throw in a handful of pessaries or irrigate the uterus with Lotagen. How times have changed-it seems that the damage we did to the uterus greatly reduced the chances of that cow getting in calf quickly or at all. The latest research and advice points towards leaving them alone for as long as it takes with no treatment, unless the cow is sick, and then identifying those cows as At Risk cows for treatment closer to mating.

Membranes are considered retained if they haven't been expelled within 12 hours of delivering a calf. If they aren't released in that time, the progressive decline in uterine activity means that they will probably not be released until they have undergone 'liquefying putrefaction' (nice!) and will be spontaneously expelled about 6-10 days later. Obviously the uterus at this time has considerable amounts of infection in it and that will require treatment, probably with a Metricure a week or so after that. These are your so-called "At Risk" cows. If we try and force the removal of those membranes, we simply slow the whole process down and damage the lining of the uterus at the same time.

**What causes RFMs?** A few known risk factors include:

- \* Abortion
- \* Primary uterine inertia (i.e. an exhausted uterus that loses the ability to contract and expel membranes)
- \* Low selenium
- \* Difficult calvings
- \* Abnormal gestation length, either too short or too long
- \* Twins or induced calvings
- \* Milk fever

### Latest recommendations in treatment:

Ideally, removal of membranes should not be attempted until at least 96 hours after calving, and, even then, it should be limited to withdrawal of membranes that have already detached. If attempts to remove are unsuccessful, they should be cut off at the level of the vulva and left until they are shed naturally.

No further treatment is given unless the cow appears ill. If they are sick, veterinary attention should be sought and antibiotics are probably required.

### Not recommended:

Forced manual removal (as explained above)

Oxytocin-this only works if given at the time of calving. It won't do anything a few days later

Pessaries- there is plenty of evidence that pessaries probably delay shedding of membranes so tend to impair rather than improve subsequent fertility.

Once the membranes have gone, identify these cows for examination and treatment with Metricure about a month before calving or as soon as two weeks after calving if they are obviously infected.

## Reproduction Planning – already???

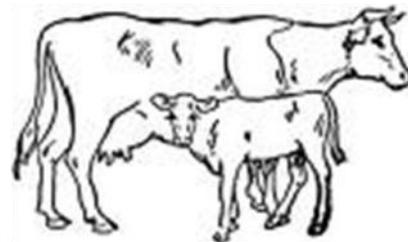
I know what you're thinking: "we haven't even started calving and those buggers are talking about mating already" or words to that effect.

Well, unfortunately for most of us by the time calving has finished, mating is right around the corner and any planning then is probably about a month late.

Many of you in recent years have taken advantage of our offer for a planned repro package with regard to your non-cyclers. Essentially you tell us when your planned start of mating is, what you want to use for your non-cyclers (either Cidr program or OvSynch) and then we print out a lovely multi-coloured page with key dates and events for you to follow. Essentially it just formalises what you intended to do anyway but once it's on paper and booked in, you are more likely to follow through and get it done early, which is the best return on investment when it comes to dealing with your non-cyclers.

That complimentary service is available once again this season, so if you are really on the ball why not call us before you get busy and we'll put a program together for you. Giles is even figuring out a way to produce a larger, laminated version that you can pin up in your office or on the cowshed wall.

Meanwhile Polly has suggested a 'review' session for those of you who would like to look over what you did last season, whether you felt it was successful or not and a discussion as to how you would like it to proceed this year. That would be more in depth, probably about an hour, so would incur a charge. However she has also suggested that we do the first 10 review sessions free of charge (bless her) so if you are keen and get in early you have an opportunity to talk through your repro program with one of our "In-Calf Vets" for an hour, for free, where amongst other things they can calculate your performance "gap" (the gap between your results and industry top quartile targets) and see where you should best concentrate your efforts. Interested? Give us a call and talk to Polly, Teresa or Andy.



## Metrichecking and At-Risk Cows

I think it would be fair to say that most of you are by now well aware of the benefits of metrichecking cows and treating them with Metricure 4-6 weeks prior to mating. Many of you have chosen to check your whole herds in recent years and on some farms this has uncovered a significant number of cows that would otherwise have been left undiagnosed and either got in calf late or not at all due to an undiscovered uterine infection.

For others though, all whole herd metrichecking did was identify cows they already had on their list of "At-Risk" cows and for them it could rightly be argued that checking the whole herd was a waste of money.

In a year where cashflow is going to be a real problem I imagine all of you are looking at areas where you may be able to save a bit of money. This is one area. Before we got into whole herd checks we used to bang on and on about recording "At-Risk" cows and getting them checked and treated before mating.

Remember them?

At-Risk cows are any cows that have a higher risk of uterine damage/infection after calving, which if left untreated, will have a significant impact on whether they get in calf either late or at all. We used to encourage you to record all those cows. Writing stuff down doesn't cost you anything except a little time. I would suggest that in the interests of saving money, if nothing else, you start recording your "At-Risk" cows once again.

At-Risk cows include any cows that had:

- Abnormal calving (e.g. assisted, twins, slips, inductions, dead calves, calving paralysis)
- Retained Foetal membranes
- Vaginal discharge
- Metabolic disease (e.g. milk fever)

These cows have a much higher risk of developing endometritis and should be checked and in most cases treated with Metricure 2-4 weeks after calving so they are cleaned up and ready to conceive come mating time. Identify and record those cows as they occur, and put them up for examination and/or treatment **2-4 weeks after calving.**

For those of you who still want it, we will be available to check your whole herd.

For some of you, we also have the option of you purchasing your own Metrichecker and doing the job yourself, thereby saving on vet fees. If you are an AB technician you can even treat them yourself after discussion with your vet otherwise just pull them aside and get us in to treat them the following day.

This option won't suit all of you so have a chat with your area vet about this, but it is an option to consider and in a year when all costs are being closely monitored, it may be an option worth considering.



## EMBRYO TRANSFER

This season we are working in conjunction with Embryo Transfer Services, Hamilton - Dr Percy Sharp, BVSc - to offer on-farm embryo transfer services using an export accredited mobile laboratory. We will be assisting Percy with scheduling and programming of donors.

### Multiple Ovulation and Embryo Transfer (MOET)

On-Farm flushing of donors for clients preferring to use this more established system of embryo production. 25 Years experience at embryo collection from superovulated donors, transfer of fresh and frozen embryos and freezing of embryos in One-Step Thaw method.

### TVR Oocyte Collection and Processing at IVP International lab

On-Farm collections from heifers and milking, dry and pregnant donor cows for the production of IVP (In-vitro Produced) embryos (Test-tube Embryos).

### Non Surgical Embryo Implants

Implanting fresh and frozen embryos into recipient cows using both One-Step and Three-Step Thaw methods. Embryo Transfer Services contract IVP International ([www.ivpinternational.com](http://www.ivpinternational.com)) to do the fertilization and culture of the TVR (Transvaginal Recovery) collected Oocytes (Eggs).

For more information please contact Polly at the clinic or go to [www.etservices.co.nz](http://www.etservices.co.nz)

## Celibacy

*Many aspects of human sexuality are very puzzling. Take celibacy. This can be a choice, or a condition imposed by environmental factors.*

*While attending a Marriage Awareness Weekend, Robert and Mary listened to the instructor declare*

*“It is essential that husbands and wives know the things that are important to each other.”*

*He addressed the men.*

*“Can you each name your wife’s favourite flower?”*

*Robert leaned over, touched Mary’s arm gently and whispered,*

*“Self - raising, isn’t it?”*

*Thus began Robert’s long life of celibacy.*



*How to tell if you are a Loser*

## Fitness for Transport to Slaughter



Reminders on what can and can’t go to the works with a vet certificate. Remember we are certifying these animals can go to slaughter for *Human Consumption*.

**Vet declarations are required** for all animals going to the works that are:

- Injured
- Suffering from disease
- “Abnormal”
- Been subject to any treatment or exposed to any chemical residue

### What cannot go to the works?

- Cow showing nervous symptoms
- Vaginal, rectal or uterine prolapse
- Retained Foetal membranes
- Abscess discharging pus
- Cancer eye extending to surrounding tissues, eye socket, Lymph nodes, discharging pus or liable to bleed
- Pyrexia (Fever/High Temperature)
- A blind animal on its own
- Recently calved or close to calving (less than 1 month)
- Cow at risk of metabolic problems (milk fever etc)
- Recently fractured leg
- Amputated foot or limb

### What can go (subject to Vet certification)?

- Blind animal with some herd mates
- Healed fractured leg (assuming the animal hasn’t been left in obvious pain during healing process, so a simple stable fracture rather than an open, infected compound one)
- Amputated claw if cow can bear weight and walk on remaining claw without unreasonable pain or distress
- Lamé if weight bearing fully on all 4 limbs

## Prelamb treatment options to optimize productivity

The period of time around lambing (periparturient period or PPP), is one of the most stressful times for a ewe. Generally feed is tight, 1-3 lambs are growing in utero and the ewe is generally losing weight. When this occurs, immunity lapses and ewes are more susceptible to infection of internal parasites.



If they have an existing parasite burden, egg suppression by the ewe is reduced and these worms will produce more eggs. As new larvae are ingested, they have a better chance of becoming established (than in a healthier ewe on a rising plane of nutrition) so producing a new generation of eggs and larvae to contaminate the pasture.

The timing and duration of the PPP is variable. It can occur before, during or after lambing—depending on factors such as ewe age, number of lambs carried and stress (nutrition/weather/poor or losing body condition).

There is a cost to the animal in fighting this infection - both in suppressing egg production and preventing new infection establishing. Protein and energy are diverted from foetal growth, ewe weight maintenance or milk production and used instead to fight the parasites. This is a direct loss to the ewe and production.

Treating ewes pre lamb with the appropriate anthelmintic can help prevent these production losses. Not all sheep on a farm or farms in New Zealand are the same, they have different requirements so different products should be used. Strategic use of the right product will ensure maximum response for the money invested.

Two injectable options available this season are Eweguard (with or without selenium and selenium and B12) and Cydectin Long Acting Injection for Sheep.

Eweguard is a convenient drench and vaccine, combining a 6 in 1 vaccine (the five clostridial diseases - Tetanus, Pulpy Kidney, Blackleg, Malignant Oedema & Black disease and caseous lymphadenitis) with a long lasting moxidectin worm drench. Eweguard will treat existing worm infections, help prevent the rise in worm egg output of ewes at lambing time (thereby reducing contamination of eggs in the lambing paddock) and protect against reinfection of *Ostertagia circumcincta* for at least 35 days and *Trichostrongylus colubriformis* for at least 7 days. These are two of the most important production limiting worms found during the late winter/spring period.

Eweguard Plus Se B12 also provides a supplemental source of vitamin B12 to the ewe which will increase vitamin B12 content in her milk. As the reticulo-rumen of the lamb is not functional during the first few weeks of life it is dependant on the vitamin B12 stored in the liver and the milk vitamin B12 content of milk to meet its requirements. Lamb survivability and early growth rates can be increased on cobalt deficient pastures, by supplementing the ewe during pregnancy.

For those ewes requiring even more protection from worms - because they are in poor condition, grass covers are very low or the pre lamb drench takes place some time out from lambing, such as in the high country or very extensive properties - then Cydectin Long Acting Injection for Sheep is a great alternative. It is an injectable drench of moxidectin in an oil based formulation that has proven potency and even longer persistent activity. It prevents reinfection of *O. circumcincta* for 112 days, and *T. colubriformis* for 42 days.

The benefits of using a long acting treatment on pregnant ewes have been well documented in New Zealand trials. Eweguard was proven to increase production, with treated ewes producing 4.6kg more lamb weight at weaning compared to untreated controls and also producing 4.4kg more lamb weight at weaning when compared to ewes treated with an albendazole capsule.

Another trial in 2-tooth ewes in lamb with twins compared those treated with Cydectin Long Acting Injection for Sheep and a control group. Both groups lost weight during the trial but the treated group lost 2.6kg *less* weight, therefore lambing in better condition and better able to feed the lamb.

Ewes lambing in good condition will produce a healthier more vigorous lamb and will produce more milk therefore maximizing lamb growth rates right from the start.

Internal parasites in lambing ewes are a hidden cost that farmers can't afford not to kill.



See John for all your pre-lamb requirements —

- Eweguard
- Cydectin LA
- Drench capsules
- Ultravac



### Cashback is Back

Purchase Rumensin TT or Rumensin Drenchable liquid and receive cashback with every drum you buy  
See John for details

## Sheep Scanning

Once again we are pleased to have David Lloyd scanning ewes, and after last year's drought-affected average of 126%, this year the going rate is above 150%, and many are above 180% - so the potential for bearings problems is back as well (very few last year). David is leaving most farms with a 'nice' problem; with lamb prices now expected to be a little down on this year's lolly scramble, the emphasis is now on maximising lamb survival rates. More on this will come with your individual scanning results letter.



*He looks busy - doesn't he!*

## Found on the web ([www.realbeer.co.nz](http://www.realbeer.co.nz))



*"Default Mayor of Mangatainoka, Alistair McDougall supports the Tui girls"*  
**AND WE ALL THOUGHT HE LIVED IN OAKURA!!**

Choose between  
**A quality  
 Windstopper Jersey**  
 or  
**Muckboots**



when you  
 purchase  
 selected Merial Ancare products



**The movies come to Eltham Vets**  
**Don't forget to go and see Predicament and see our historic building**



## Working Dog Wanted

For 200 cow dairy farm.

Would suit older huntaway/heading dog.  
 Must be well trained, sound & have a good temperament.  
 Contact Lisa at the clinic

## The eXplorist 500 GPS

(our vetdectin promotion)

was won by

**Brendan Hintz.**

Brendan was thrilled & Tash & the kids are relieved he will have less chance of getting lost on one of his hunting trips.

