# Finding the herd problem in the single case

Meredyth Jones, DVM, MS, DACVIM Oklahoma State University, Stillwater, OK 74078 Large Animal Consulting & Education, Perkins, OK 74059

### **Abstract**

Economic realities and need for improved efficiency have required a shift in large animal veterinary practice towards more population-level consultation, with veterinarians spending less of their time treating individual animals. The population, however, is comprised of individuals who provide valuable information about the state of the herd. When presented with the individual animal who is demonstrating overt disease or poor production, the veterinarian has an opportunity to scale-up their impact by using the information obtained from the individual to benefit the herd. Veterinarians should develop a full-service mindset, which includes obtaining a definitive diagnosis through thorough history-taking, physical examination, ancillary diagnostic techniques, and premise visits. Written reports which include stepwise and attainable recommendations are used to improve communication and provide clarity regarding expectations for both the producer and the veterinarian. Follow up calls and visits demonstrate genuine concern on the part of the veterinarian for their client's success, and are an invaluable learning opportunity for the veterinarian. Professional growth for the veterinarian includes learning what works and what doesn't in a given situation. Subsequent herds under the care of a veterinarian practicing the 'no news is good news' approach fail to receive the full benefit of a veterinarian who has disciplined him or herself to follow through on every case. Veterinarians have an opportunity to become indispensable to their clients by channeling every piece of data that may be obtained from the individual to benefit the health and welfare of the herd.

**Key words:** physical examination, herd health, population medicine, diagnosis

## Résumé

La réalité économique et le besoin d'accroître le niveau d'efficacité ont exigé une réorientation dans la pratique vétérinaire des grands animaux vers plus de consultation au niveau de la population. Par conséquent, les vétérinaires passent moins de temps à soigner les animaux. La population, toutefois, comprend des individus qui fournissent une information importante sur l'état du troupeau. Faisant face à un animal qui montre une maladie apparente ou qui produit peu, le vétérinaire a la chance d'extrapoler les impacts en utilisant l'information obtenue auprès de l'individu pour faire bénéficier le troupeau. Le vétérinaire devrait développer une

mentalité de service global incluant l'obtention d'un diagnostic définitif par l'entremise des antécédents médicaux, de l'examen physique, des techniques auxiliaires de diagnostic et des visites sur le site. Les rapports écrits incluant des recommandations réalistes et incrémentales sont utilisés pour faciliter la communication et clarifier les attentes autant pour le producteur que pour le vétérinaire. Des appels de suivi ou des visites démontrent un véritable souci du vétérinaire pour le succès du producteur et sont une précieuse occasion d'apprendre pour le vétérinaire. Comprendre ce qui fonctionne ou ne fonctionne pas dans une situation particulière aide au développement professionnel du vétérinaire. Les autres troupeaux sous le soin d'un vétérinaire prônant la philosophie « pas de nouvelles bonnes nouvelles » ne vont pas recevoir tous les bénéfices d'un vétérinaire qui s'efforce à donner suite dans chaque cas. Les vétérinaires ont la chance de devenir indispensable auprès de leurs clients en exploitant chaque élément de données provenant d'un individu pour améliorer la santé et le bien-être du troupeau.

### Introduction

While the opportunity to benefit the health and welfare of a single animal is sufficient enough calling, the opportunity to impact the lives of groups of animals certainly multiplies impact and reward. As food animal veterinarians, our potential for population impact is built-in, even for our smallest livestock producers. There can be no herd impact without first starting with the individual, making individual-animal diagnostic skills critical for even large-operation consultants. Further, in order for clients to trust us with multiple animals, we must first show our skill with one.

## **Obtain a Definitive Diagnosis**

Obtaining a definitive diagnosis is the critical first step in benefitting the herd on the basis of the individual animal. It all begins with a quality and thorough physical examination. The physical exam in cattle has been reviewed (see Resources) and even the most experienced veterinarian can benefit from regular review of techniques, parameters, and interpretation of the physical examination of the ruminant. A quality physical exam can result in a definitive clinical diagnosis without ancillary diagnostic testing in many cases. In the book *Every Patient Tells a Story*, physician Dr. Lisa Sanders notes that in 70% of human cases, a correct diagnosis may be obtained through historical findings alone. Of the remaining 30% of cases, 50% of those are solved by the physical exami-

Figure 1. Regional method of physical examination of the ruminant.

Left forelimb region	000	Left abdominal region	P	Left hindlimb region	000
Neck		Umbilicus		Left prefemoral lymph node	
Jugular furrow		Penis, prepuce		Limb, hoof	
Left prescapular lymph node		Rumen motility		Mammary gland	
Limb, hoof		Percuss, succuss abdomen		Popliteal lymph node	
Heart		Ballotte			
Lungs					
Brisket					
Rear	<b>S</b>	Right hindlimb region	ø	Right abdominal region.	<b>*</b>
Abdominal contour		Right prefemoral lymph node		Percuss, succuss abdomen	
Limb conformation		Limb, hoof		Ballotte	
Perineum, tail		Mammary gland			
Temperature		Popliteal lymph node			
Vulvar mucus membranes					
Supramammary lymph nodes Mammary gland					
Scrotum					
Disks form the boundary		H I		5 - 1 / 1 1 - 1	
Right forelimb region		Head		Rectal exam (cattle)	
Heart		Facial symmetry		Rumen	
Lungs		Parotid lymph nodes		Inguinal lymph nodes	
Brisket		Mandible		Sublumbar lymph nodes	
Right prescapular lymph node		Submandibular lymph nodes		Cecum	
Limb, hoof		Nose		Small intestine	
Neck		Ears		Peritoneum	
Jugular furrow		Eyes, sclera		Penis	
				Seminal vesicles, prostate	
		Oral exam		Uterus, vagina, cervix	
		Teeth		Inguinal rings	
		Mucosa		Left kidney	
		Tongue		Urinary bladder	

nation. The importance of a thorough physical examination cannot be overstated.

My personal habit is to examine ruminants topographically rather than by body system. My evaluation always starts with evaluation from a distance for mental status, abdominal contour, and conformation/stance/ambulation. For the hands-on examination, I work starting at the left shoulder, progressing down the left side, working at the back end, moving up the right side caudal to cranial and ending with the head.

## **Get out There**

Despite a perceived shift away from ambulatory work in large animal veterinary medicine in the interest of efficiency, there can simply be no replacement for putting eyes on the environments in which animals live. The best historical questioning cannot result in an adequate picture of the environmental and management factors which impact

animal health and welfare. A trip to the operation allows for evaluation of herdmates, observation of animal interactions, feeding practices, pasture status, sample collection, and more specific questions about management decisions than can be made empirically from an off-site location.

I charge an hourly consultation fee in addition to mileage, procedure, and laboratory fees for these on-site visits. While it can take some persuasion to convince clients (and some veterinarians) as such, for true herd-level problems, a visit like this can actually improve efficiency in achieving a diagnosis and resolution over continued hunt-and-peck diagnostics on an individual animal coupled with suppositions about the home situation.

# Write a Report

I provide written reports on all herd health visits and disease investigations. In addition to providing a legal record of the visit and recommendations, I find that owners often

SEPTEMBER 2018 123

have trouble taking it all in and comprehending all the issues during a visit. These reports can take a variety of formats. If I'm sending animals through the chute, I like to document individual findings in a spreadsheet and import that into a word processing program to couple with narrative recommendations. It can be helpful with some clients to enumerate the recommendation list at the beginning of the document for those who don't want to wade through historical and examination findings. Those who want more information can continue through to the end of the document.

In general, I like to keep my recommendations to 1 or 2 themes of changes I'd like to make on a place. Clients can become paralyzed by an exhaustive list of areas for improvement or may become insulted by being picked apart. Stick with 1 or 2 themes that clients can accomplish and then add in others later.

# **Follow Up**

The theme of this conference is setting ourselves apart and becoming indispensable. The ability to obtain an actual diagnosis and not just "give a shot" sets the veterinarian apart from the many people who tout animal health services. Unfortunately, clients often don't recognize this. What they do recognize is someone who cares enough to call back and check up on how recommendations are going and is willing to help refine those recommendations to improve implementation. Calling back is a risk. There's a chance I'll hear that what I did didn't help at all. It can be easier to assume that no news is good news. This doesn't help the client, the animals, or us. Follow-up with herds benefits our education, which benefits subsequent herds. We should be willing to revisit challenging situations so that we can extract all that there is to learn from them.

#### Resources

- 1. Jackson P, Cockroft P. *Clinical examination of farm animals.* Ames, Iowa: Blackwell Science, 2002.
- 2. Sanders L. Every patient tells a story. New York: Random House, 2009.
- 3. Terra RL, Reynolds JP. Ruminant history, physical examination, welfare assessment, and records. In: Smith BP, ed. *Large animal internal medicine*. St. Louis, MO: Elsevier, 2014.
- 4. Wilson JH. The art of physical diagnosis. *Vet Clin North Am Food Anim Prac* 1992; 8:169-176.

