## Case Study: VCPR and Beef Production in Ontario



FAAAST FARMED ANIMAL ANTIMICROBIAL STEWARDSHIP

**VCPR Case Study** 

The following case study reviews the establishment and maintenance of a valid Veterinarian-Client-Patient-Relationship (**VCPR**) between a veterinarian and an Ontario beef producer. Bullet points are provided throughout the case study to highlight key actions and discussion points essential to this process.

## **Case Outline**

Hugo Drechsel is a retired high school teacher who always wanted to own his own cattle. When he was growing up, he worked extensively with his uncle who had a small cow-calf operation, so he already had a reasonable amount of knowledge and experience with managing cattle. As an avid outdoorsman, he was attracted by the Beef North cow herd expansion program in Northern Ontario. Using his life savings as leverage to obtain business expansion grants provided by the Northern Ontario Heritage Fund Corporation, Hugo was able to buy a farm and 100 pregnant cows outside of Cochrane, Ontario.

Though the winters are long, Hugo enjoys the quiet solitude offered by the north. He has now been in Northern Ontario for 3 years and his operation and cows are thriving. Although he's had his share of losses and a few sick animals every season, thanks to advice from his uncle and some help from his neighbor, he has never needed to call a vet out. The worst health challenge he has faced is pasture footrot, for which he was able to purchase long acting oxytetracycline at the Cochrane Co-op to treat the affected animals.



On his latest trip to pick up a bottle of penicillin to treat a lame cow, Hugo is surprised to see a poster telling him that, as of December 1st 2018, he is no longer able to purchase antibiotics at the co-op. The poster further informs Hugo that he will need to start working with a veterinarian to obtain a prescription prior to purchasing any antibiotics for his cattle and he will need to purchase those antibiotics from his veterinarian, or through a registered feed mill if they are mixed into feed.

Hugo talks to some friends and discovers that there is an excellent veterinary practice about 2 hours from his farm. Hugo calls the clinic to speak with a veterinarian, Dr. Eugenia Lebreck. Dr. Lebreck outlines the scope of services that the veterinary clinic can offer within the standards of the profession, including telephone consultation, developing a vaccination program and standard operating procedures for treating sick animals, nutrition advice, pregnancy diagnostics, breeding soundness evaluations, and emergency services when animals are sick, injured, or having calving problems. Hugo is pleased with these offerings and agrees to retain the services of Dr. Lebreck and her clinic.

- Dr. Lebreck has:
  - Reached an agreement with Hugo as to the scope of the services to be provided by the veterinarian;
  - Advised the client that services will only be provided in accordance with the standards of practice of the profession.
  - Been retained by Hugo (the client);

Dr. Lebreck also informs Hugo that, due to his location relative to the clinic, emergency response time might be several hours. She assures him that if he calls the clinic number for an emergency of any sort (e.g. adverse drug reaction, calving, etc.), including after hours, that they will get to his farm as soon as possible.

• Dr. Lebreck ensures that she is readily available in case of an adverse reaction to a drug or a failure of a treatment regimen, and informed Hugo as to how he can access services outside of the clinic's regular practice hours, in accordance with the College of Veterinarians of Ontario's After-Hours Care policy statement.





Hugo mentions to Dr. Lebreck that he has a lame cow with a swollen leg that has not responded to penicillin. He asks if Dr. Lebreck could prescribe a different antibiotic for the cow and have it delivered to the farm tomorrow. Dr. Lebreck informs Hugo that she will need to visit the farm before dispensing any drugs for treatment. Although she has established a valid VCPR with Hugo, she needs to first visit the farm to have sufficient knowledge of the farm, animals, and management before prescribing any medications. Hugo understands this and schedules a visit for the following day.

- When making a diagnosis or prescribing, administering, or dispensing a drug, **recent and sufficient knowledge** is required, which is a matter of:
  - History and inquiry **and**:
    - a physical examination of the animal or group of animals, or
    - medically appropriate and timely visits to the premises where the animal or group of animals are kept to reach at least a general or preliminary diagnosis.
- As Dr. Lebreck has not been to the farm and is not familiar with Hugo's management and diagnostic abilities, it is necessary for her to visit the farm and examine the animal in question prior to diagnosing the ailment or prescribing and dispensing an antibiotic.



During the farm visit, Dr. Lebreck examines the lame cow and discovers a large hematoma in the upper leg. She treats the cow with an anti-inflammatory, dispenses an additional dose for Hugo to give the cow tomorrow, and advises that she be kept in a pen by herself for a few days. Dr. Lebreck then walks through the herd with Hugo, discussing various health management strategies. She teaches Hugo some important skills for disease recognition and treatment (i.e. conducting physical exams, handling medications). Over the following weeks, she and Hugo work together to create some standard operating procedures for common ailments, so that Dr. Lebreck doesn't need to drive out to the farm every time an animal is sick, but can still be confident that Hugo can identify the illness and treat his animals in these cases.

Dr. Lebreck is establishing recent and sufficient knowledge of Hugo's herd for the provision
of veterinary services. What constitutes "recent and sufficient knowledge" is a matter of the
professional judgment of the veterinarian in the individual case. By discussing critical points about
disease recognition and management, Dr. Lebreck can be more confident in Hugo's ability to
identify and manage sickness in his herd, further strengthening their VCPR.

Hugo is pleased with their conversation, and agrees to have Dr. Lebreck out to the farm again for a herd health visit in the fall.