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Dairy 10-Point Quality Control Program-- Mastitis Treatment Records

This NebGuide presents a mastitis treatment record keeping system that will help to reduce the chances of having adulterated milk enter the milk tank.

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Starting July 1, 1993, the national Milk and Dairy Beef Quality Assurance Program will become effective. This program is a direct result of media attention concerning milk quality. It also reflects a growing consumer concern with drug residues in the nation's food supply chain. The American Veterinary Medical Association and National Milk Producers Federation responded to these concerns by developing a ten-point Milk and Dairy Beef Residue Prevention Protocol. If the protocol is properly followed, milk from treated cows will not enter the bulk tank. The ten points are:

1. Practice healthy herd management. To help prevent all diseases, follow good management practices related to housing, nutrition reproduction, preventive vaccines, parasite control and total mastitis control. Generally, the major cause for milk containing drugs is mastitis treatment.
2. Establish a valid veterinarian-client-patient relationship. If you are not on a routine herd health maintenance program, contact your local veterinarian and sign-up for this program. Proper and timely diagnosis and treatment is essential to maintaining herd health.
3. Use only Food and Drug Administration (FDA) approved over-the-counter or prescription drugs with a veterinarian's guidance.
4. Make sure all drugs used for the dairy herd have labels which comply with state and/or federal labeling requirements.
5. Store all drugs properly.
6. Administer all drugs properly and identify all treated animals.
7. Maintain and use proper treatment records on all treated animals. This topic will be discussed later in this NebGuide.

8. Use drug residue screening tests.
9. Implement employee/family awareness of proper drug use to avoid marketing adulterated products. This point is critical since it is important to properly train everyone who administers drugs to your herd. Limit the number of people approved to administer drugs so medical care can be adequately supervised and recorded.
10. Meet with your veterinarian annually to review your herd health program and procedures to be certain objectives are being met.

The most important area to consider when administering drugs is proper record-keeping. *Tables I and II* show two examples of a record keeping system that will enable you to accurately record, analyze and monitor treatment programs. If it is recorded in this format, the mastitis evaluation will be readily available to the veterinarian, dairy plant fieldman and milk inspector.

Table I lists pertinent information for mastitis treatment records, such as cow identification, date of recognition of initial clinical mastitis, quarters treated, drug used, dose, route and time administered, days treated and drug withdrawal dates. The producer can quickly glance at *Table I* and get a month-by-month record of clinical mastitis problems. At the bottom of *Table I* is a worksheet which will help the producer calculate the cost of this month's treatment. This chart lists treatment costs, milk loss, cull loss, and death loss due to mastitis. These figures may be upsetting, but are essential for estimating the costs of clinical mastitis control.

Table II enables a producer to start a herd history of mastitis problems and to monitor somatic cell count trends. The table contains information on lactation number, calving date, date of clinical mastitis, somatic cell count, as well as the stage of lactation when the case occurred. This table will enable a producer to quickly tabulate the information on the bottom of the table to pinpoint exactly where and when these cases occur. Do they mainly occur at calving, mid-way through lactation or at the end? These tables can then be used to pinpoint various management practices that may be causing the clinical mastitis cases. This information along with the following booklet will enable you to work with your veterinarian, dairy plant fieldman, milking personnel, or Extension specialists to minimize these problems. For more information, see *Mastitis Control Guidelines*, Nebraska Extension publication EC87-726, available from your local Extension Office.

Mastitis record keeping is an integral part of the Milk and Dairy Beef Quality Assurance Program. The use of Dairy Herd Improvement Testing for Somatic Cell Count (SCC) is another component in the mastitis treatment and detection program. This program coupled with accurate monitoring of herd SCC levels and record keeping will be a valuable aid to help decrease the incidence of clinical mastitis. This will reduce drug treatment and provide for more quality milk and increased profits. The tables in this NebGuide can be reproduced and used to initiate a mastitis treatment record keeping system.

Table I

Herd Mastitis Evaluation

Month _____ Year _____

Cow ID	Date Infection Recognized	Quarter(s)	Somatic Cell Count (DHI)	Drugs Used	Dose Route Am/Pm	-----Days-----		Results Cull-Died Residue Test	Comments
						Treated	Withheld		

MONTHLY COST \$

Treatment Cost	
Drugs \$	
Vet Charges	
Milk Loss \$	
Death Loss \$	
Other	
Total	

\$ MONTHLY MILK LOSS

Days Treated x Avg. Treatment Cost =
 _____ x _____ = \$ _____

Days Milk Withheld x Avg. Milk/Cow = Lbs. Lost Milk
 _____ x _____ = _____

Lbs. Lost Milk x Avg. Price = \$ Milk Loss
 _____ x _____ = \$ _____

Herd Mastitis Evaluation

[illegible]

% Cows with Mastitis

-----% Cows with Mastitis by Days in Milk*-----

[illegible]

C-17, Herd Management

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