



**Maximising lamb survival
Selenium status on farm**

**Avoiding inhibitory substance (IS) grades this spring
Sub-clinical ketosis could be eating away at your profits**

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Enough iodine in your newborn? Do not ignore the question, face and answer it

Background comments

Iodine is a trace element that is frequently marginal in its availability for our farmed ruminants with what we feed them. Iodine is also competitively bound up by substances naturally occurring in feed called goitrogens.

Many farmers are aware of these issues and provide some form of iodine supplementation for their stock so that over the last decade we have seen relatively few cases of *clinical iodine deficiency* (best demonstrated by goitres in newborn lambs).

However, many farms do not give adequate nor effective forms of iodine supplement and some farms do not give any at all, and this continues to concern us. In these situations, *sub-clinical iodine deficiency* could still be occurring.

The question that this column asks relates to *sub-clinical iodine deficiency*. This is where there are no obvious signs but there is still a deficiency present causing more subtle problems.

One of the subtle problems associated with *sub-clinical iodine deficiency* could be weak or slow to get going newborn animals. We are often concerned about iodine deficiency when there are more deaths at or around birth than normal.

There are different ways of understanding whether there is adequate iodine available and whether in fact the newborns are or are not affected *sub-clinically*. One of the easiest ways is to examine the thyroid glands of deceased newborn animals.



Calves and lambs

If you are concerned about poor survival, slow drinkers or generally lethargic newborn animals, then any deaths should be examined by us and the thyroid glands dissected. These glands then need to be submitted for microscopic examination. Strangely enough, while the deficient gland might look normal size and weight, when iodine deficiency is present the cells that make up the thyroid gland are enlarged. These enlarged cells are obvious under the microscope as they are working overtime to compensate for an iodine deficiency. These enlarged cells indicate deficiency. If the gland is visibly enlarged, this is another clue that iodine deficiency may be an issue and can be determined by comparing the weight of the gland to the weight of the newborn animal.

These changes are true for lambs, beef and dairy calves.

Last spring Vetlife carried out a practice-wide survey in lambs and the glands that were the smallest and therefore the healthiest were found where effective iodine supplementation was used.

Conclusions

In the past supplementation with iodine was difficult because there were few really effective iodine supplements. Nowadays, while there is NO simple blood test for adult stock to test for sufficiency, we do have good products to use and we do have the ability to check newborn animals as described above.

All in all each farm should know exactly their iodine status, with the dead newborn being used regularly to check (as horrible as that may sound).

Best regards from Adrian Campbell and all the Vetlife colleagues - have a predictably good spring!



Practice Principal
Adrian Campbell (Vet)

Maximising lamb survival



Although this year's potential lamb numbers are already locked in, there still remains the ability to maximise the number of these lambs reaching weaning. On many farms the flock fertility has reached a level where any further increase is detrimental due to the number of triplets, so reducing lamb deaths is important in maintaining progress. Some of the influences on lamb survival have already been exerted via ewe nutrition at all stages of pregnancy. In early gestation, adequate nutrition is important for placental growth and hence lamb birthweight while later in pregnancy it is necessary for foetal energy reserves, ewe mammary gland development and prevention of sleepy sickness. Multiple bearing ewes and low condition ewes should be separated at scanning and preferentially fed.

Where ewes or hoggets have been fed brassicas, iodine supplementation needs to have been addressed either through long-acting Flexidine injection or oral treatment(s) of at least 250 mg potassium iodide/ewe four to eight weeks prior to lambing. Iodine deficient lambs have a

higher mortality rate especially if the weather is inclement.

Healthy, well-fed ewes will have higher birthweight lambs which will be more active at birth and find teats more quickly combined with the ewe's superior colostrum supply. Pre-lamb treatments should include parasite control, attention to lameness and clostridial vaccination at two to three weeks before lambing but with minimum stress so the immune response is not compromised. So not when under feed stress and/or weather bombs! Pre-lamb crutching of ewes not winter shorn eases access to teats and reduces bacterial ingestion by lambs.

The greatest increase in udder weight occurs in the last 30 days of pregnancy so underfeeding will reduce size and production. Thus the lamb(s) are more prone to starvation/exposure and infection due to insufficient colostrum. Ewes should be set stocked on pasture covers of at least 1200 kg DM/ha and this should be maintained or increased during early lactation. Lambing paddocks for multiple

bearing ewes should be selected to optimise lamb survival:

- Flatter paddocks with less than 25° slope to minimise lambs rolling away from the ewe and becoming mismothered.
- Good shelter against prevailing winds for example trees, pampas, tussock or hay bales.
- No water hazards, under-runners etc.
- Minimal external disturbance such as a busy road.

Ideally record all lamb deaths for each paddock to calculate survival rates – it is often surprising what turns up.

Shepherding needs to be done by an experienced person for least disturbance of ewes at the birth site; this may be selected up to three days previously and ewes must be there for six hours prior to lambing. Thus ewes in the early stages of labour will be upset if moved daily to a new paddock away from the birth site.

The majority of lamb deaths occur in the first three days and most commonly are due to starvation/exposure, dystocia or infection with often more than one factor involved. Infections such as navel ill, Campylobacteriosis, Toxoplasmosis and Hairy Shaker lead to weak lambs (if they do not abort) which commonly die of exposure/starvation. Other causes include congenital diseases and predation by pigs which can cause high losses on some farms.

Newborn lambs are susceptible to hypothermia and hypoglycaemia – weak, recumbent lambs less than five hours old should be given 10 ml/kg LW of warm 20% Dextrose injected into the abdomen. After a response, colostrum can be given at 150 ml/kg in the first 12 hours split over three feeds to avoid stomach distension.

Nationally, lamb mortality varies from 10–30% (average 18%) of actual lambs so if you scan 150% and lose 20% of lambs your percentage drops to 120%. Valuable information can be gained from lamb post-mortems so I would encourage you to drop dead, peri-natal lambs into your local Vetlife clinic to ascertain causes of death. Lambs can be left for up to three days in cool, dark conditions (rather than freezing) away from dogs and birds so internal organs remain intact before dropping off.

Chris McFarlane
Vetlife Dunsandel

Selenium status on farm

With increases in knowledge and testing, severe mineral deficiencies are now much less common. The use of preventative measures such as selenium prills on pasture and selenised animal health products (e.g. drenches) are helping. We do however need to keep in mind that just because severe deficiencies are less common it does not mean we are safe to ease off on our supplementation programmes. South Island soils are still deficient in selenium and if we are not trying to correct this deficit, negative effects on reproduction and ill-thrifty young stock will occur.

Selenium deficiency in young stock commonly causes ill-thrift and poor growth rates which may be accompanied by diarrhoea or winter coat retention. White muscle disease in calves and lambs as a consequence of severe selenium deficiency is now thankfully very uncommon, it is a condition where weakness occurs due to degeneration of muscle fibres especially in the limbs and

around the heart. Animals may be stiff-gaited and weak to the point where they are recumbent. In June of this year I saw a mob of R1s which had five to six animals go down, bright and happy calves, a little on the skinny/unkempt side but just not able to get up. A blood sample was taken and sent off to the lab; this revealed very, very low selenium levels both for serum selenium which is the selenium available to the animal at that moment in time and GPx which is the longer term indicator of selenium status. In young calves this can be fatal if it affects the heart muscle and diaphragm; older calves can be more easily saved if selenium injectables are given.

The best way to get an accurate picture of what is happening on your farm is to blood test a selection of animals. Plant and soil testing is available but unless you have already been applying selenium prills, results will invariably be deficient. Plants themselves do not require selenium; it is absorbed only by default.

Selenium is also important for reproduction in older animals. Consequences of low selenium levels include reduced fertility and increased incidence of retained foetal membranes. Although calving is almost upon us, this is something to keep in mind for next year especially if you notice retained membranes this year or are concerned about your reproduction.

At the other end of the scale, selenium is the most toxic of the essential trace elements so it is important that overdosing does not occur. Selenised drenches, vaccines and B₁₂ injections are convenient methods of giving cattle a boost but care should be taken to make sure multiple selenium sources are not given concurrently without prior testing.

Jess McDowell
Vetlife Temuka



Avoiding inhibitory substance (IS) grades this spring

Data from Fonterra shows that more than 30 percent of all IS grades and up to 50 percent of clinical mastitis cases occur in the first months of a new season. Typically farms that have an IS grade will also have one or more risk factors in their farm management that contribute to the IS grade.

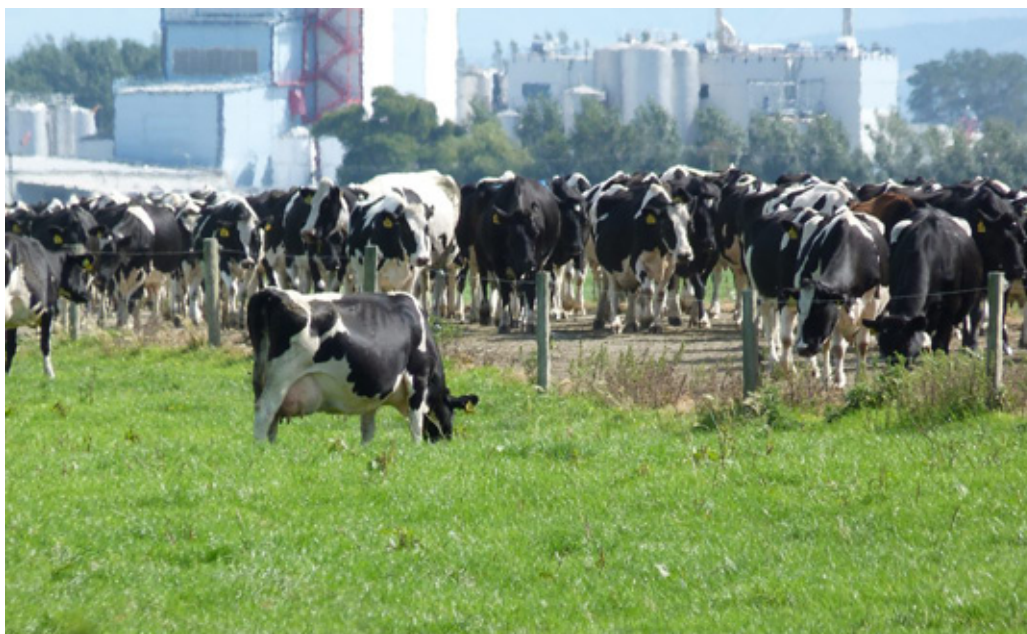
Dry cow and milking cow therapy

Typically problems are due to:

- Inadequate treatment records.
- Failure to observe the full withholding times. This applies to all intramammary and injectable products.
- Failure to clearly identify treated cows.
- Running treated cows with the main herd.
- Failure to follow the dosage and treatment intervals in the instructions.
- Drying off cows giving less than 5 litres.
- Small volumes of milk at first pick up: send more than 1000 litres.
- Inserting dry cow therapy into the blind quarter of a three quartered cow.
- Use of dry cow therapy to treat mastitis during the dry period.
- Treatment of dry quarters for mastitis during the winter.

Following a few simple steps will significantly reduce the risk of your farm IS grading:

- Keep good records of all treatments: **Mark, Record** and physically **Separate** her from those in supply before **Treating** with antibiotics (i.e. follow 'MRS T').
- Ensure all withholding periods are fully complied with. For cows treated with dry cow treatments this means the entire withholding period, including the minimum dry period length and the post calving withholding period. Once the minimum dry period has passed dry cow treatments (DCT) still require eight full milkings after calving before milk is suitable for supply. These milkings must be complete evacuations of the udder so you cannot count easing the udder prior to calving.
- Keep treated mastitis cows separate from colostrum cows in a secure paddock away from the main milking herd.
- Ensure the main milking line is disconnected from the vat before milking treated cows.
- Carry out a hot detergent wash after milking the treated/colostrum herd, as antibiotic residues left in the plant cannot be completely removed by cold water washing. When washing, check that all clusters are receiving wash water. Residues left in the machinery from inadequate cold water washing can cause



- a residue issue in the next milking.
- If the majority of the herd has received DCT, it is recommended that you test the first supply for inhibitory substances.
- If you are returning a large number of treated cows to the milking herd at one time, it is recommended that you test the milk for inhibitory substances prior to supply.
- Always follow all advice given by your veterinarian, and follow the label instructions on any treatments.
- Keep a permanent record of all treated cows. Have documented procedures for treatment, identification and milk withholding.
- Ensure all staff are aware of the current systems in use. Review all the systems relating to inhibitory substances before supplying.
- Ensure DCT is stored away from the dairy.
- Lactational treatments must be securely stored, and treatment storage facilities should be set up to ensure that the correct treatment is used each time.
- If contamination is ever suspected, phone the Fonterra Services Team (0800 65 65 68) and have the suspect milk tested prior to the next collection.

Teatseal® treatments and colostrum

Colostrum must be withheld from the vat for eight milkings following calving. Milk from heifers and any cows not letting their milk down should be withheld from the bulk milk tank for a minimum of 10 milkings (source: SmartSAMM) or extend the milk withhold by the number of incomplete milkings if this is the greater interval.

To minimise the possibility of teatseal and colostrum entering the milk supply:

- Colostrum cows and treated cows should be run in a separate herd and marked to ensure milk does not enter the vat.
- At the first milking after calving, each quarter must be stripped 10 to 12 times to remove any remaining teatseal. Stripping should commence at the very top of the teat to ensure all product in the teat canal is removed.

In line with SmartSAMM recommendations, all cows must be stripped prior to each milking while in the colostrum mob.

- Colostrum and milk from DCT/teatseal treated cows must be withheld from supply for eight milkings after calving.
- Filter socks must be in place throughout milking and cleaning phases and disposable socks must be replaced after each colostrum mob milking.
- Correct milking machine processes should be strictly adhered to after each milking as per the manufacturer's specification. Hot washes are recommended after each colostrum mob milking. This ensures the removal of any colostrum or teatseal particles that may adhere to the milk contact surfaces.

If contamination by antibiotics, teatseal or colostrum is ever suspected, contact your producer before milk collection.

Andrew Bates
Vetlife Temuka

Sub-clinical ketosis could be

Many of you will have had the chance to attend the DairyNZ South Island Roadshow with the three Apostles of pasture, Jim Gibb, John Roche and Terry Hughes, either as it travelled up and down the South Island or at this year's SIDE conference. It was an entertaining event and a number of important myths and stories were busted. All to the good. However, some important new work within New Zealand throws up an alternative perspective to some of the Gospel being preached around sub-clinical ketosis and its importance to the New Zealand dairy industry.

That cows experience a negative energy deficit around and after calving is not disputed but the importance of this to future reproduction and production is. On the one side, the Apostles hold that the

forces of darkness (vets and nutritionists) are over diagnosing ketosis and are mistaking the normal but elevated levels of a rumen metabolite (BHOB) as a sign of sub-clinical ketosis. The argument goes that the levels of BHOB are raised but this is a consequence of a grass dominant rumen and not linked to any measurable reproductive or production problem. Being careful not to fall over my forked tail, there is some new work that suggests an alternative view. New Zealand researchers, working within pastoral, New Zealand dairy systems have linked elevated levels of BHOB (sub-clinical ketosis) to:

- 2.6 times the risk of being Metircheck positive (diagnosed with endometritis).
- A 6% lower 6 week in calf rate at 6 weeks.

Further, work over the last few years within New Zealand has identified that at any one time, around 18% of a typical New Zealand dairy herd is suffering from sub-clinical ketosis within 14 days of calving. This means that around 40% of a typical New Zealand dairy herd will experience an episode of sub-clinical ketosis in the spring. These cows are then 2.6 times more likely to be Metrichick positive and will on average have a 6% lower 6 week in calf rate.

Overseas work indicates that there will be a production cost associated with this level of sub-clinical ketosis but this has not been investigated under New Zealand pastoral conditions. So, ignoring any production costs associated with reduced milk yield, the New Zealand workers estimated that



eating away at your profits

the cost of sub-clinical ketosis from reduced reproductive performance alone for an average New Zealand dairy farmer was around \$13.50 per cow in the herd: \$10,800 for an 800 cow herd.

The estimated losses from reduced milk production are around \$11.00 per cow in the herd; Vetlife is hoping to undertake some trial work this spring to see if these losses in milk production are seen under local Canterbury and Otago conditions.

Whether elevated BHOB levels are a normal finding for pastoral New Zealand dairy cows or not is less interesting than the finding that cows with elevated levels were more likely to be dirty and less likely to get in calf. Of course all these cows could have had something else going on

with them and it was just a coincidence. And your lotto numbers might come up this week too.

It is hard to balance on the fence when you have cloven hooves, but I think we are starting to get some really useful New Zealand data that shows:

- Many cows under New Zealand pastoral dairy systems have raised levels of BHOB and that these levels are much higher than the range of normal we usually see on pasture diets.
- Cows with these elevated BHOB levels are more likely to be dirty after calving and less likely to get in calf at or before 6 weeks.
- The financial impact of these two factors will cost around \$11,000 for an 800 cow

dairy herd before allowing for any impact on milk production.

Some new tools to diagnose sub-clinical ketosis are available and many of you will see your Vetlife vet checking your herd this spring for this important disease. Take the time to talk through some of the options around feeding and body condition score management to make sure your herd is not suffering from this ghost within the machine.

Andrew Bates
Vetlife Temuka



Hip to be square?

Feeding cows a certain number of squares without reference to how much feed is in those squares is quite common practice on many farms through mid-Canterbury; this is particularly so for heifers and springers where they are offered 10-20 squares in the lead up to calving. If these cows are going into covers of 3000 and moving on at 1200 kg DM/ha, offering them 10, 20, 30, or 40 square metres per cow will provide 1.8, 3.6, 5.4, or 7.2 kg DM. Using these simple figures, it is plain to see that offering 10-20 squares is not enough to satisfy the cow's feed requirements, and more often than not, the remainder of her requirements is sufficed with straw or silage. The feed requirements of the modern cow is such that for the 60-70 days post calving, she is in a negative energy balance i.e. she is unable to satisfy her energy requirements from the feed consumed alone, hence she mobilises body tissue. This is why a BCS of 5 for MA cows and 5.5 R2/R3 cows pre-calving is stressed so much!

A 500 kg cow pre-calving requires a minimum of 120 MJME per day. Covers on most farms are looking to be good this season with many properties recording average covers exceeding 2500 kg DM/ha,

this can be good but chances are, the quality of much of this feed may well be lower than we typically expect – let's say it is 11 MJME/kg DM. If we were to offer the above cow 30 squares using the figures mentioned earlier, we would expect her to be consuming 60 odd MJME from pasture which satisfies half of her requirements, also offering 5 kg DM silage at 10.5 MJME provides another 50 MJME, thus she is consuming 11.5 kg DM. Many operators also provide rough hay or straw as filler, realistically this is all it is as it provides little else other than bulk to the rumen with typical non-existent attributes of feed quality!

As we all witness on farm, post calving cows go through an incredible metabolic change in a very short period of time, their demand for feed energy and protein increases dramatically. A 450 kg cow producing 2 kg MS/d requires at least 200 MJME/d and a diet crude protein of at least 16% to satisfy her requirements. Typically, in the first couple of weeks post calving, a cow's feed intake is short of her overall demand hence a further requirement to have cows in good condition so that they utilise a proportion of this body tissue for production. As a

consequence of the severe weather spell in late June, many herds are not in a state of BCS in which they would like to be, this is especially important for those cows calving down in August. As much as possible, these cows will need to be preferentially fed to ensure they are in a negative energy balance for as short a time as possible, so that they reach their plateau point earlier and start to gain weight in preparation for mating later in October.

The flybypnighter megahit "hip to be square" was written in 1986, since then a lot of things have changed, especially the potential performance of our cows through multiple generations of genetic selection. In some circumstances, the feeding systems we employ to feed cows have not kept up to speed with these advances. Before the spring rush, take the time to speak to a trusted advisor of how to put feeding systems in place now to ensure cows are fed as well as possible. With this strategy, cows will maintain better condition, produce more milk and get in calf earlier than their feed limited peers from the 80s!

Craig Trotter
Centre for Dairy Excellence, Geraldine



The Vetlife 2013 Mamyzin milk quality awards: will you be a winner?

Once again this spring, Vetlife is running a milk quality competition in conjunction with Boehringer Ingelheim Ltd.

The competition is open to all Vetlife clients with a PRIZE voucher to spend at your local Vetlife clinic. This year the prize will be awarded to the farm with the lowest BTSCC for the period 1st August to 30th

November 2013 and to enrol, no more than 30% of the herd can be first calved heifers as of spring 2013. There will be one first prize and two runners up.

To enter the competition, contact your local Vetlife vet. Your vet will need third party access to your milk quality data from the Fonterra, Synlait or NZDL webpages to

be able to judge the competition and for you to be eligible to win. Contact your local Vetlife vet to see how to do this if you have not already arranged it.

Andrew Bates
Vetlife Temuka



Children's sunflower competition winner

As you will be aware, Vetlife and Stockguard have recently run a children's sunflower growing competition. It began in October 2012 with over 1500 packets of seeds being sent out to Vetlife clients and primary schools within the Vetlife region. The competition closed on the 24th May 2013 and we received an amazing array of entries ranging from 17cm to the winner at 49cm.

Vetlife and Stockguard wish to congratulate Casey & Peyton Mackintosh from Rangiora for growing the widest sunflower. Casey receives the prize of flights to Wellington for two adults and one child to visit Te Papa.

Well done to everyone who entered the competition and we hope you all had fun growing your flowers!



Staff sunflower competition winner

The Vetlife staff member to submit the largest sunflower head was Jemma Opie from Ashburton.

Jemma's sunflower measured 43cm; 4cm larger than its closest rival. Jemma's winning entry won a night's accommodation at the Hermitage Mt Cook.

Congratulations Jemma.



Vicky O'Connor: three months on and still smiling...

Vicky O'Connor has now been working as the Temuka Rep for three months and has a long background in the farming industry having worked as an agricultural rep and with Federated Farmers.

Vicky is enjoying the new challenges of her role and has already become an important

part of the team that supports our farming clients including reminding them to switch on their farm fridges for the vaccine she drops off!

She has a particular interest in setting up Animal Health Plans.



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Those shareholders personally manage Vetlife and work as veterinarians.

All business proceeds are invested back into the business locally and we provide careers and employment for 165+ local people and families.

Comments and feedback

We value your feedback. Please feel free to comment or lodge a complaint in confidence on our services, advice and products.

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