

Practice Tip Session

Dr. Robert Harris, Chairman

A Bandage for Teats

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I have been using a product called "Tubegauz" to cover injured and cut teats and feet, and as the name implies it is gauze in tubular form. It is packaged in five sizes from 5/8 in. to 3-5/8 in. and comes in 50-yard rolls. "Tubegauz" is sold by Scholl Hospital Products Division, Scholl, Inc.: 1) Chicago, Ill. 60610; 2) East Rutherford, N.J. 07073; 3) Los Angeles, Calif. 90058; and 4) Atlanta, Ga. 30341.

It was developed for human use to cover extremities. The material is a loose weave and works on the principle of the Chinese finger trap.

The tube gauze is put over a tubular carriage slightly larger than the injured extremity. For example, a cut teat. The carriage is slid over the teat to the base of the udder. A small end of tube gauze is slid over the end of the carriage and held firmly with one hand at the base of the teat. The other hand slowly pulls the carriage down off the teat twisting it at the same time.

The more twist applied, the greater the tension or pressure put on the extremity being covered.

In my practice this has been most useful on injured teats. My clients have started cutting the ends off of 35 to 60 cc monject syringe cases and using them as carriages. They are easily able to select a size they need and the cases are readily available and inexpensive. During milking the farmers carry them in their pockets and are quickly able to redress teats at each milking.

The larger size tube gauze also makes good foot bandages. These may be applied by cutting the ends off of juice cans, plastic gallon jugs or any other make-shift carriages. (*Slide illustrations followed.*)

Practice Tip

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A simple practice tip in the form of a time-saver and frustration-avoider that may help someone:

For the restraint of cows for vaccinating with Nasalgen® in stanchion barns, tie-stalls, and even when running cows through chutes. Instead of a nose-lead, we have the person helping us use a discarded fan belt (V-belt) to restrain the cow's head. This produces adequate restraint in a "quick-release" form.

Miscellaneous Tips

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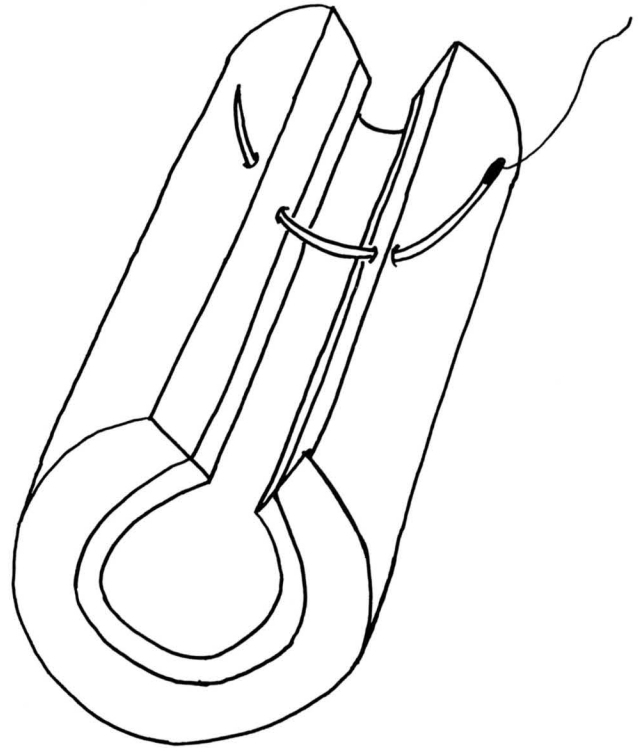
Easy Method for Bagging Feet: This procedure was shown to me by Dr. Roger Batchelder of Cortland, N.Y. Using a burlap bag (or bath towel) fold it around the lower leg and foot in such a way that there are more thicknesses of bag on the back of the leg and bottom of the foot than anyplace else. Then tie the bag tightly with bale string two places above the dewclaws and one place between the dewclaws and the hoof. This is especially useful for foundered feet when water is poured on these bags twice a day.

Simple Method for Claw Amputation: First I should mention that I never amputate a claw without first checking the opposite foot to make sure it is sound. I will only describe this procedure for coffin joint infection in a rear foot because rear feet are most often affected. However, the operation is very similar for a front foot.

The leg is elevated by picking it up by the hock. A tourniquet is applied above the hock and 20 cc of 2% lidocaine hydrochloride (plain) is injected into the dorsal metatarsal vein which courses along the anterior lateral aspect of the leg between the hock and fetlock. This idea for intravenous local anesthesia was taken from "Intravenous Local Anesthesia of the Lower Limb in Cattle," by A. D. Weaver, J.A.V.M.A., Vol. 160, No. 1, Jan. 1, 1972. I have found this method to be about 80% effective and if it is effective, anesthesia will be complete in about five minutes. If it is not effective or if I can't hit the vein, I clip and surgically prep the leg midway between the dewclaws and hock and use local nerve blocks. This is accomplished by injecting 10 cc of 2% lidocaine near the deep peroneal nerve and medial and lateral plantar metatarsal nerves. The deep peroneal nerve should be blocked by injecting the anesthetic in front of the metatarsal bone and between the extensor tendons. The medial and lateral plantar metatarsal nerves are blocked by injecting the anesthetic just beyond the subcutaneous tissue along the medial and lateral sides respectively of the flexor tendons. Following the injection of the local anesthetic, the leg is let down and picked up differently so that the fetlock area will be straight for tight bandaging after amputation. This is done by fastening beam hooks four to five feet behind the cow, and then with a lariat fastened around the metatarsal area, the rope goes to the beam hooks and then around the leg above the hock in a half-hitch fashion, then the free end of the rope is secured to a post near the front of the cow after

the leg is raised to the desired height. The foot is now thoroughly scrubbed and disinfected and then an anchor rope is fastened above the dewclaws and to a post behind the cow to make sawing easier. Fetotome wire is used to amputate the claw. This is accomplished by first sawing between the toes for one inch parallel with the leg and then angling over so that the wire comes out just beneath the dewclaw on the affected side. This should cut through the first phalanx approximately between the middle and distal thirds of the bone. The anchor rope is released and the foot is bandaged using Koppertox and Vemorsul ointment on cotton. The bandage must extend above the dewclaws to stay on. I first bandage over the cotton tightly with gauze crisscrossing between the dewclaws rather than bandaging over them as too much pressure on them is not good. Then I put a whole roll of one-inch tape tightly all the way to the bottom and then back up to the top of the bandage giving it two layers of tape. I do cover the dewclaws with the tape. A small amount of bleeding will always occur, but with two layers of tape it is rarely a problem. However, the dairyman should be advised to watch for bleeding the first few hours. Sometimes it is good to tranquilize the cow so that she will lie down and allow the blood to clot faster. The aftercare is as follows: (1) Keep on sulfa or antibiotics for five days. (2) Redress two times at five to six day intervals and if a large ball of granulation tissue is present, cut it off. (3) Five days after the last redressing remove the bandage and if the bone is pretty well covered with granulation tissue, don't redress. (4) Keep in a clean dry stanchion area for three weeks following amputation (if possible), but the cow should have a small amount of daily exercise inside the barn. (5) Her feet should be trimmed twice a year to help prevent further foot problems.

Placing a Plaster Cast on a Foot: This procedure was shown to me by Dr. Kenneth Benson, Bainbridge, N.Y. This is another method for building up a sound claw to take the pressure off a claw that has a lot of pain. I especially like this procedure on cows that have a deep sole or heel infection that isn't really into the coffin joint and for badly ulcerated heels. Three-inch fast- or extra fast-setting plaster of Paris bandages are used. They can be three- or five-yard length bandages but about 20 total yards of bandage will be needed. The leg is elevated and the foot cleaned and trimmed and the infected or ulcerated area properly exposed and drained. A light bandage with an ointment of choice may be placed on the foot before the plaster cast. When applying the plaster of Paris bandage, first go around the fetlock area a couple of times and then start building up the sound claw by going back and forth lengthwise on it, pressing each layer down as it is applied. About every three yards or so it is good to lock the bandage in place by going around the sound claw and then around the fetlock. Once in awhile it is good to also go around the sore claw. After the good claw is built up about two inches higher than the other claw, I like to just use the



last three yards of bandage for locking the cleat in place. About ten minutes should be allowed for the plaster to set before the foot is put back down. These cows should be kept in a stanchion (if possible) for two to three weeks to allow the plaster to wear off.

Extra Large Detorsion Rod: Made by a blacksmith from 5/8 inch rod so that it will not bend and it measures 40 inches long with 1-1/2 inch eyelets on the ends.

Improved Fetal Extractor: A section of 1-1/4 inch galvanized pipe was taken to a blacksmith to have a small length of rod inserted into one end of it and welded there. During calf delivery the rod is inserted into a regular breechen plate and a cable winch is used for traction. The hook at the end of the cable is inserted into the open end of the pipe and the other hook is attached to the obstetrical chain.

Large Animal Surgery Case-Table Combination: When closed with legs folded up it serves as a large animal surgery case, but when open with legs extended it becomes a table to set surgery tray, etc. on.

Medicine Case Made of Aluminum: Aluminum medicine cases have a big advantage of long life because they can be easily repaired or straightened if damaged.

Veterinary Calendar: I had these printed up by a local printing shop. At the top of this calendar are columns for the animal's name or number, milk withholding time and meat withholding time. The calendar itself has very small numbers at the upper

left corner of each square so that much space is allowed for making notations. I hang these calendars where they can be easily seen by the dairyman and myself. On these calendars I jot down animals that are to be rechecked, etc., and what was found or done with the animal previously. Sometimes the dairymen make notations on these about cows they see with abnormal uterine discharges, etc. These calendars aren't meant to take the place of individual health sheets but are just to serve as a helpful reminder to the dairyman and to the veterinarian of things to be done.

Practice Tip

George Washington, D.V.M.
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I live in Purcellville, Virginia, which is just up the Potomac from Mt. Vernon. Ever since the Arab boycott a few years ago, we've had a lot of talk about shortages and how wasteful the American people are, so my first practice tip deals with something we can recycle from a cocktail party! There is a half-gallon ginger ale or cola bottle from Safeway that makes a real good fluid bottle. With an aluminum rod and some metal chains and clips, you can make a nice rack for them. You can hang them up in the barn any place you want to. If you can, you can hook them up in series with a willowby outfit. They work real nice.

Now, my next tip, someone got the jump on me, because the *Bovine Practitioner* came out about a week ago and I read part of it in there, but I'll still go ahead and cover it because there are some things I do a little bit different. These are four items I like for acute or coliform mastitis. One thing I like to do when I treat an acute mastitis is to do a lot of culture work because I like to see what the organism is. This one happened to be a coliform organism; I got a triplate that has selected media on it. I use a lot of tetracyclines on acute mastitis; I use pretty high levels, 6-8 mg/lb. of body weight. I use gentamicin in the quarter, depending on what kind of cow it is. I've gone as high as 200 mg initially, but my usual dose is about 75 mg every 12 hours. I used qs dose with 50 cc of furacin. I have one case of a real good show heifer and the owner was really worried about it. He called and said the back of the quarter was turning blue; it was. The quarter was really in bad shape. It looked bad, the mastitis was bad, but I thought it was gangrene, which it was, but we saved the quarter. We ended up putting about 25 cc of gentamicin in it, but the cow is milking right now and the quarter is not light. This is a real good treatment for acute or coliform mastitis. Being a little ways west of Washington, we are getting a lot of big farms in our area! They are 5-10 acres and we have a lot of calls on these. There is the big fancy house and big barn. They have a four-acre field in the back and have a big herd of about three heifers. We have a lot of calving

cases here. They will call for help; you ask them if it's up and they say, no, she's in the field but she's lying down in the corner, nice and gentle. They usually jump up and take off when you get there. I figured there was some easier way of chasing them or trying to lasso them because I'm not much of a cowboy. About a year and a half ago I came across something that works real nice. I'm not talking about the drug, but I have had a lot of experience with Rompun. I did some field trials for Chemagro for about two years. It is a very good drug in cattle. The recommended I.M. dose is 0.1 mg/lb., I.V. dose is .05 mg/lb. I don't think you have to go much higher than this I.V. to get them on the ground, but we have used real high doses on some animals and it didn't affect them much. It puts them down a little deeper, but this drug works very well. For these animals you need to deal with, and they don't have any chutes or anything, it is an eight-foot long pole syringe. There is a three cc on the end of it, you use a 16-gauge, 1½" needle. You have about an inch of it out. You usually get close enough to these wild animals to hit them in the rump with it, and you can sedate them enough to be able to do something with them. I couldn't get my pole through airport security so I didn't bring it with me. My associate, who does mostly equine practice, borrowed it from me to use on a two-year-old stud horse, who had never had a halter on, that needed to be castrated. He used Rompun to sedate it; he wouldn't give it back so I had to get another one for myself!

Practice Tip

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My topic concerns the oral use of Acepromazine Maleate on show and sale cattle. I myself am a purebred beef breeder and I have a son and daughter who show steers and heifers at the county, state and national levels. I started using Acepromazine orally approximately three years ago and have been very satisfied with the results from this drug via oral administration. Some of the advantages of using Acepromazine orally are:

First, in steers that are going to be shown and possibly slaughtered in a few days, when given this drug intramuscularly, there is always the possibility of an abscess or a muscle stain due to the color of Acepromazine. You have completely eliminated these possibilities by administering the drug via the oral route.

Second is the ease of administration. I am sure everyone at sometime in their practice has been called upon to tranquilize an animal that has been tied to a post or a fence on about six foot of rope and with both hind feet in high gear. I find by oral use of this drug there is much less chance of injury to myself or the owner or whoever might be helping. The majority of the cattle that I am tranquilizing are cattle that are