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Birthing Detours Plus

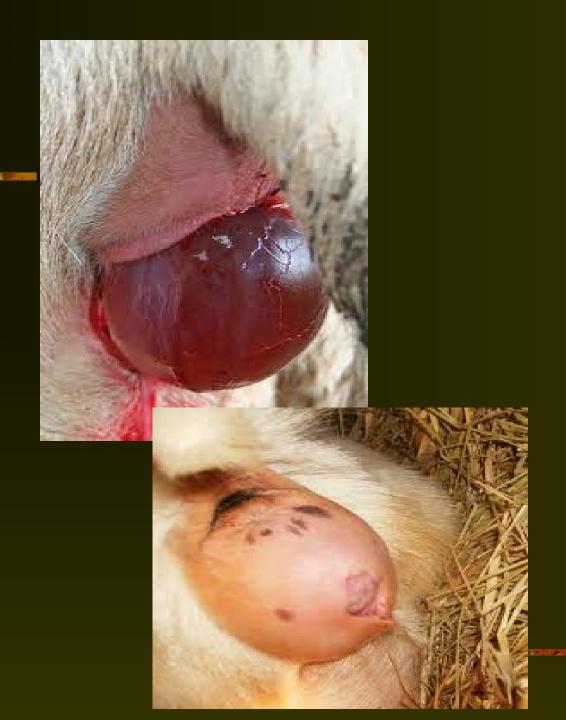
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Learning Objectives

- Participants will learn how to do a field C-section
- Participants will also learn how to manage the following conditions in the field:
 - Entropion
 - Disbudding/dehorning
 - Castration
 - Urolithiasis
 - Fractures

C - Section

- Indications
 - Dystocia
 - Ring Womb
- Site
 - Ventral Midline
 - Left Flank ****
 - Right Flank





C – Section Sheep & Goats

- Anesthesia Line Block
 - Inverted "L"
 - Lidocaine toxicity 10 mg/kg
 - 2%lidocaine is 20 mg/ml
 - So 100 lb dam 22.7 may be toxic
 - Safe dose is 5 mg/kg

C – Section Sheep & Goats

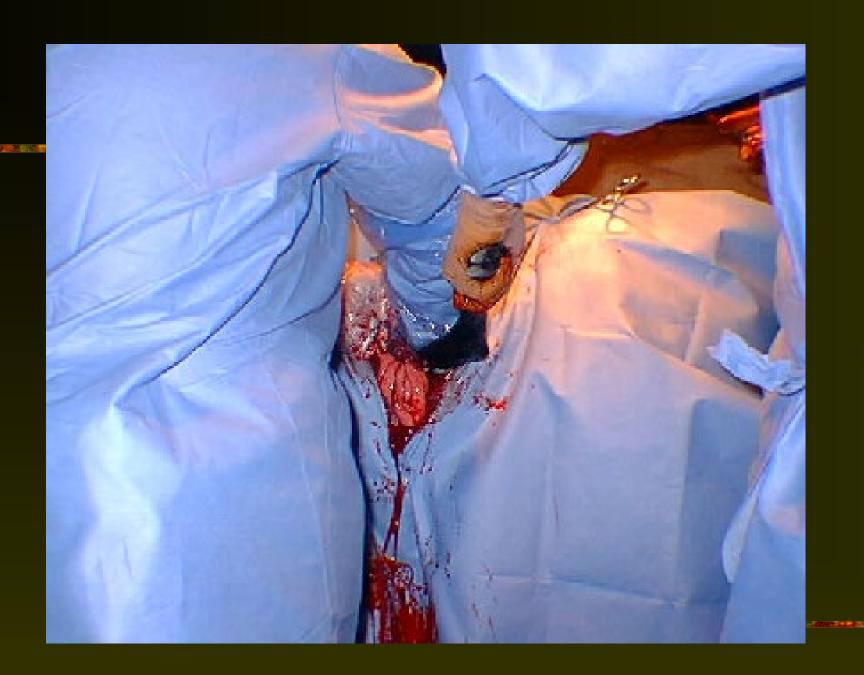
- Pre-med
 - C D & T
 - Ceftiofur or Pen G
 - Banamine or Meloxicam



Uterine Incision

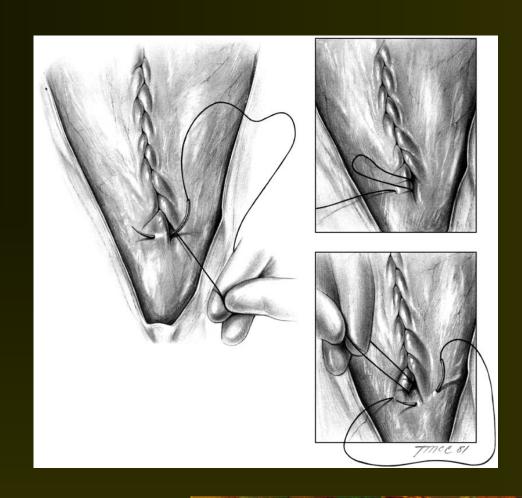
- Grasp back leg and bring to incision.
- Incise along Greater Curvature.
- Start at Hock and Cut to the toe.

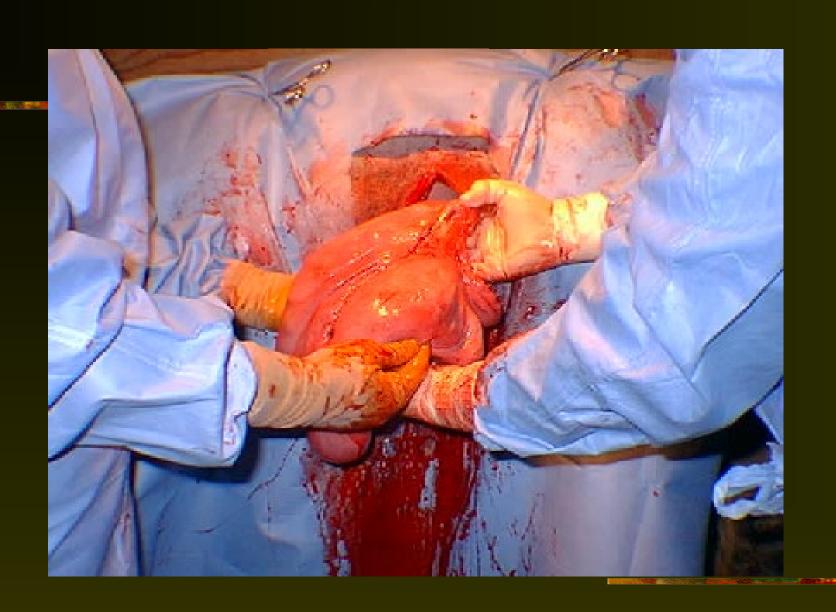




Closure

Modified Cushing or Guard's Rumen Suture





Abdominal Closure

- Transversus & Internal
 - Simple continuous
 - 0 gut
- External
 - Simple continuous
 - 0 gut
- Skin
 - Ford Interlocking
 - 1 or 0 Braunamid





- Indication:
 - Stage II labor > 20 30 minutes
 - Fetal maternal mismatch
 - Uterine torsion
 - Mal-position
- Left Flank approach
 - 90% pregnant in left horn

- Anaesthesia
 - Lateral recumbancy
 - Inverted "L" block

- Pre-med with:
 - Ceftiofur
 - CD & T

Uterus is much more fragile than in sheep and goats

Minimize Time & Stress

- Post Op
 - Banamine 1 cc / 100 lbs
 - Oxytocin
 1/2 cc q 30 60 min
 - Systemic antibiotics

Entropion

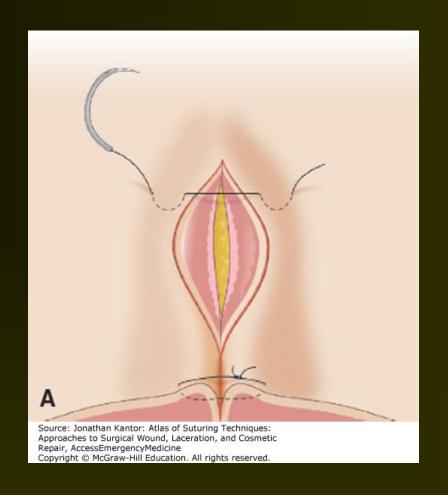
- Common Congenital Defect
- Lambs & Kids have Watery Eyes
- May Lead to Corneal Ulcers





Entropion

- Lembert SutureVertical to Eye Lid
- < 2 0 AbsorbableSuture
- 1 3 Stitches
- Can do on Upper or Lower Lids



Entropion

■ Usually 1 – 2 sutures is all that is needed



Tranquilization & Anesthesia

- Tranquilize
 - Xylazine 0.05 0.1 mg/kg IV

- Anesthesia
 - Xylazine 0.2 mg/kg IM followed by
 - Ketamine 11. mg/kg IM ~ 45 min
 - Redose ketamine at ½ original rate IM to prolong

Tranquilization & Anesthesia

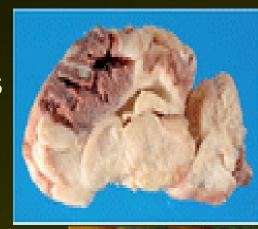
In kids:

Xylazine 1 mg / 20 lbs IV

Reverse when finished w/ procedure

Disbudding

- Often done by owners
- Biggest mistake is waiting too long
- 3 7 days of age
- If too old risk thermal necrosis









Descenting



- Scent glands are just caudal medial to horns
- Burn an additional crescent of skin
- Buck will not be as "popular" as a smelly buck

Dehorning

■ Block - lidocaine

■ In babies .25 cc/site

 Cornual branches of the lacrimal and infratrochlear



Dehorning

- ALWAYS leave a strip of skin down the middle
- Use scalpel to cut skin
- Use OB wire to remove horn
- Bandage with stocking net



Dehorning



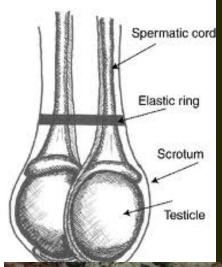
Do NOT use a BarnesDehorner

Castration

- Banding
 - Elastrator
 - Callicrate

- Cutting
 - Remove bottom ½
 - Pull or emasculate







Urolithosis

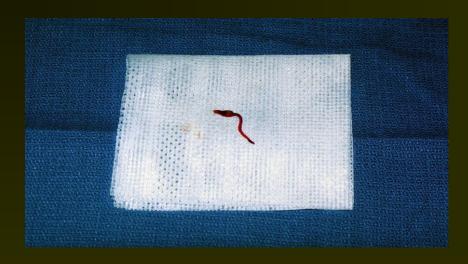
- Most commonly seen in fall
- Usually present as "constipated"
- Urethra can be felt pulsing rectally if they have not already ruptured
- Azo sticks are useful for prognosis
- Very common in old "pet" weather goats



Urolithiasis

Snip Urethral Process

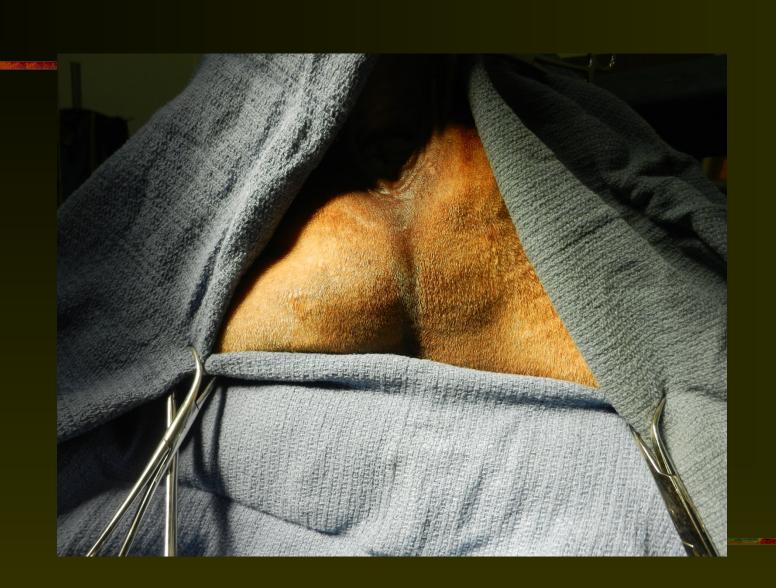
Retrograde flush w/ 1 cc lidocaine to 3 cc saline



Urolithiasis

- Perineal Urethrostomy
 - Incision just below tuber ischii
 - Cut penis off as long as possible
 - Urethra will be on dorsal side
 - Place catheter and suture with one mattress suture

Often stricture



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Perineal Urethostomy

- Follow up care:
- Flush bladder
- Keep stump moist
- Avoid licking which can lead to stricture
- Place on urine acidifiers
- Encourage an all forage diet

Urolithiasis

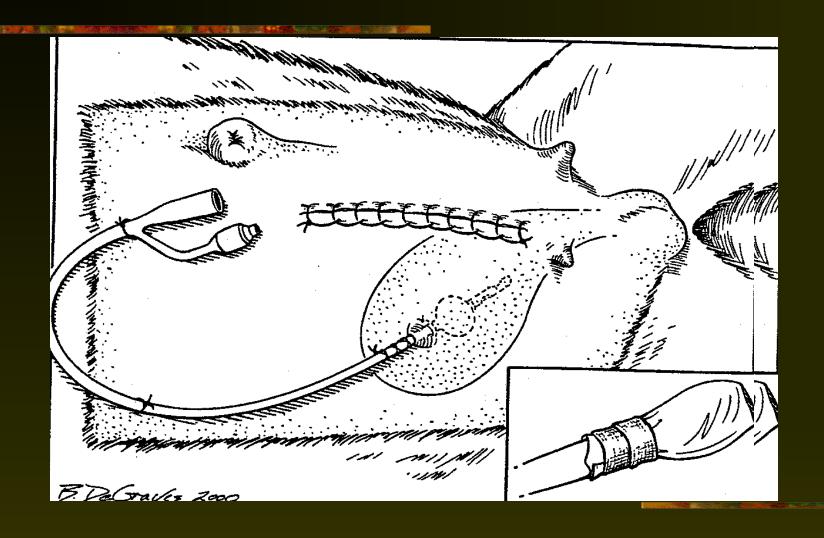
Tube Cystotomy

Best Option

- Right paramedian incision
- Place stay sutures on dorsal surface
- Open bladder
- Lavage and normograde flush
- If needed place a 16 24 f Foley on dorsal side through a purse string
- Exit catheter through lower side of abdomen
- Test urethra in 10 14 days

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Fractures in Lambs & Kids

- Meta or Spoon Splints
- Thomas Splints
- Crutch
- Change every 2 weeks
- Often stable in 2 weeks



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Questions:

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