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Animal Health
Fact Sheet

ASSISTING WITH CALVING

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Calving season is a busy time of year for cattlemen and it is a critical step toward a productive year. The first rule is frequent observation of those cows due to calve, especially the first calf heifers. This is usually a very busy time of year and some extra help during this season will more than pay for the cost through extra calves saved. Even wives and older children can help a solo producer get some needed sleep. If, they have been taught how to observe, they can tell when a calving cow needs help and if there's a need for assistance. With a few days of practice, they'll be almost as good at observing as you are (and maybe better). Checking every 3 hours is usually adequate.

Adequate facilities make a great difference in providing assistance at calving. Decide what your major frustration is at calving and then do something to correct it.

WHEN SHOULD I HELP?

One must develop a "feel" for this through experience, but there are some guidelines to help.

The cervical dilation period will take 2–6 hours, during which the cow will be somewhat uneasy (first stage of labor). When the head or feet of the calf enter the vagina, it stimulates abdominal straining to expel the calf (second stage of labor). Actual delivery should only require ½–2 hours of this straining. If no fetal parts enter the vagina because of problems in positioning, the cow may not show active straining, but she will show uneasiness and signs of discomfort. The calf will usually live for 8 to 10 hours after the abdominal straining begins.

Examine the cow if:

1. She has been in first stage labor for 3–6 hours and doesn't start actively straining.
2. She has been in second stage labor for 1–2 hours with little progress.
3. The water sac or membranes have been evident for 1–2 hours with little progress.

EXAMINATION PROCEDURE

Confine and restrain the cow so she'll not get away and waste time. Be clean. Wash off the rectal-vaginal area as well as your hand and arm. Us an obstetrical lubricant, a mild soap or shortening as a lubricant. Keep the fingers close together so as not to puncture the reproductive tract. Enter the vagina and identify the cervix, or at least the extent of its dilation; then determine the presentation and posture of the calf, as well as its relative size.

IDENTIFY PRESENTATION

The "presentation" refers to whether the calf is coming forwards or backwards. Both of these are normal presentations and a calf should not be turned around just because it is coming backward. If cervical dilation is relatively complete, the water bag may be broken if necessary in order to examine the calf. If the cervix is not well dilated, you are probably rushing the process and should allow some more time. If you need a quick anatomy lesson to determine whether you have a front or back leg, compare joint for joint up the calf's leg while looking at the cow's legs.

IDENTIFY AND CORRECT POSTURE

The "posture" refers to placement of the feet and head. In the frontward presentation, the normal posture is for both front feet and the head to be coming together in a "diving" position (figure 1). In the backward presentation, the normal posture is for both hind feet to be coming together (figure 2).

Any deviations from this must be corrected before attempting to pull the calf. If a leg (figure 3) or the head (figure 4) is back, repel the calf back into the uterus between contractions and manipulate the calf body parts into proper position. Slow, steady pressure is the key to repelling a calf. Be careful in pushing the calf back in so you don't rupture or tear the uterus. Cover the feet and mouth with your hand during manipulation so as not to puncture the uterus. A snare or o.b. chain attached to the deviated body part will allow a much greater pulling force to be applied than what you can exert with only one hand in the uterus.

Getting the cow to stand up may allow more room for repositioning and result in less vigorous straining.

A true "breech" position is when the calf is coming backward and both hindlegs are retained in the uterus, rather than extending back into the vagina (figure 5). It is one of the most difficult to correct.

ESTIMATING SIZE AND DETERMINING LIFE

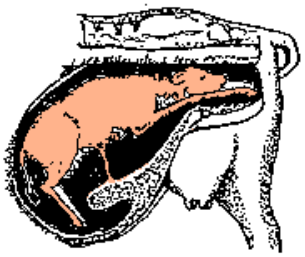
The cause of most dystocia (difficult birth) is a calf that is too large in relation to the dam's pelvic opening. Excessive stress in pulling and delayed delivery may result in a dead calf that has to be cut up for removal or taken by C. Section. That is especially frustrating when you realize that with the same or even less work you would have had a live calf. The decision to begin pulling or get veterinary help is critical and good judgement is essential. A telephone call and discussing it with your veterinarian is well worth the time and effort. That is also true if you have worked for half an hour without much progress.

Not all calves will show great evidence of life, especially after they become fatigued. You can feel for movement, heartbeat, and reflexes such as leg jerk, eyelid blink, sucking or rectal pinch.

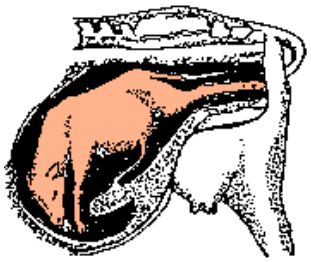
TRACTION

Obstetrical chains are the most sanitary and most easily applied device for traction. Nylon bands or ropes may also be used. One should be placed on each of the two legs and one (or a snare) on the head. These allow for traction on individual body parts. The head chain should be placed in the mouth and behind the ears to provide better control and avoid crushing of the wind pipe. It is usually best to have the head chained-up in case it is needed for guiding or traction rather than trying it without and getting into problems because it isn't ready. If the leg chains are placed above the fetlock with a half-hitch at the pastern it will result in more evenly distributed pressure.

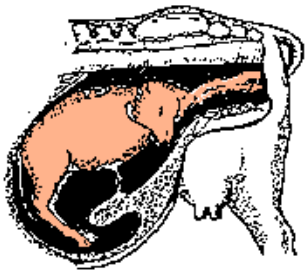
ASSISTING WITH CALVING



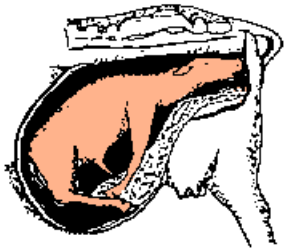
A normal anterior presentation



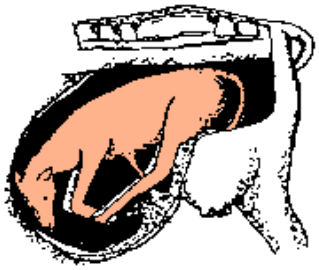
A normal posterior presentation



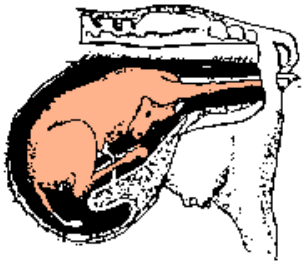
Two front legs presented with calf's head turned back



Calf presented with its head in the birth canal, but one or both forelegs retained



Calf presented in a breech position



Two front legs presented with calf's head down between legs

A calf puller works well because it pushes forward on the cow's pelvis at the same time it pulls back on the calf. This keeps the pelvis from "turning-in" on the calf, which tends to lock him in even tighter. You can exert an effective pull on the calf (when the cow is lying down) by sitting down on the ground behind her, bracing your feet under and to the side of the vulva, and pulling.

This will apply more effective traction than if you were to hook on with a tractor and drag the cow around the pasture. Whenever any significant amount of force must be applied to pull the calf, there should always be some force applied to push the pelvis forward.

In using the calf puller, jack or crank until there is slight pressure on the chains and then apply additional pressure by pulling down on the rod. This leverage is very effective once the calf is out far enough for it to work.

Take time to stretch the lips of the vulva over the head of the calf. This will reduce the tearing of these tissues, as well as reduce the amount of traction needed. Tear up the cow by rushing at this stage and you'll pay for it with increased recovery time for the cow later.

In the frontward presentation, there is danger of hiplock. Clean off the nose and mouth when the head first comes out so the calf will have a chance to breath should hiplock occur. Pull in an arc (by bringing the rod of the calf puller toward the feet of the cow as the calf comes out). If hiplock still occurs, release the traction, use the front legs to obtain leverage and turn the hips about 60 degrees inside the pelvis and then pull again. The calf should usually be able to begin breathing even though hiplocked.

In a backward presentation be ready with the calf puller, the correct length of chains, etc. so that once the hips come through the vulva you can proceed reasonably fast to complete the delivery. This is about the only time during a delivery that you really need to hurry. Lift the back end of the calf so mucus and fluids can drain out, clear the nose and mouth, rub the side of the chest, and lift the front leg to assist in stimulating breathing. Some producers keep a small tank

of oxygen available to aid a calf having difficulty starting to breathe. You can also give mouth to nose artificial respiration, in an emergency.

AFTER CARE

Have towels available to dry off the calf; iodine the navel; be sure it gets colostrum within 30–60 minutes; and warm it up if needed. Assist the cow in standing and keep her off of slick areas if she is wobbly. Clean up equipment and put it back in its storage place.

Learn from your experience. Be willing to recognize the problems and don't be too hesitant to ask for your veterinarians's advise as well as assistance. It will result in better profits and less frustration for you. It your herd is experiencing an especially high incidence of problems, you should reconsider your breeding and nutrition programs.

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