SOP No: ATT 01

SUBJECT: Abdominocentesis in Cattle

DATE APPROVED: April 2009
REVISED: 15.05.2013, 20/04/2016

POLICY: This procedure may only be performed by, or under the supervision of an operator skilled in the technique.

PRECAUTIONS: Aseptic conditions are required to avoid introduction of infectious pathogens into the abdominal cavity. Restraint of the animal is necessary for the procedure, ideally a crush with a headlock. In mature cattle, the choice of sites for abdominocentesis is a problem because the rumen occupies a large portion of the ventral abdominal wall, and avoiding its penetration may prove difficult.

EQUIPMENT: Lignocaine 2%
Animal Clippers
Sterile teat cannula or 18 gauge X 5 cm needle (needle length depends on body wall thickness)
Alcohol (or other surgical preparation solution) swabs
Iodine (or other surgical preparation solution) swabs
Scalpel blade #11 (or similar)
Sterile gloves
Collection tubes appropriate for the analysis intended

PROCEDURE: 1. Abdominocentesis sites:
   a) Left of the midline, approximately 3 to 4 cm medial and 5 to 7 cm cranial to the foramen where the mammary vein enters the ventral body wall.
   b) 10 cm cranial and 10 cm to the right of the umbilicus.
   c) 5 to 10 cm caudal to the xiphisternum and 8 to 10 cm lateral (either to the left or right) of the midline.

   2. Procedure: The selected site is clipped, prepared using aseptic technique, and infiltrated with lignocaine 2% to anesthetize the skin and underlying muscles. The animal is restrained by applying a tail jack. Wearing sterile gloves, a small stab incision is made through the skin and a metal teat cannula is pushed carefully and slowly through the abdominal wall, which will twitch when the peritoneum is punctured. Alternatively and without a stab incision, an 18 gauge needle may be gently pushed into the peritoneal cavity. If only a needle is used to collect fluid, local anaesthetic is not required. It may be necessary to re-position the needle or cannula before fluid is obtained. Fluid may be collected directly into the collection tubes.

RECOMMENDATIONS: Results of the abdominocentesis will guide further diagnostic or therapeutic plans.

REFERENCES

[Signature]
CHAIR OF AEC