Basic Cow Physical Exam: Performing the bovine RUMBA

Modified from Dairy Cattle Husbandry 302 http://dairynutrient.wisc.edu/302/page.php?id=28 SMP 9/7/2010

Below are the major steps for performing a basic adult cow physical exam and provides examples of questions to ask with the reason for asking them. Use this sheet to practice the basic physical exam and diagnostic process.

Item	Y/N	- Ok +	Information Use
1 - History			
How long has she been sick?			Is this a sudden and severe (acute) or is this a "slow and progressive" (chronic) disease?
Is she the only one sick?			An individual cow problem vs. herd problem?
Date of calving / DIM?			<30 DIM disorders → RP, hypocalcemia, ketosis, mastitis, metritis, indigestion, DA,etc. > 30 DIM infection diseases → pneumonia, BVD, IBR, etc.
Vaccination history? Herd disease history			Helps rule-out diseases that were vaccinated against
Parity / Age ?			Parity > 1 = higher risk of milk fever & other metabolic diseases
Treatment received, if any?			Allergic reaction to a drug or its carrier?
How has she been eating lately? DMI = "dry matter intake			How much effort did she make to eat compared to penmates? Partial drop in DMI → Ketosis or milk fever, DA? Not eating at all → severe DA volvulus, TRP, peritonitis? Erratic or aberrant intake pattern → sign of pain

2 – GENERAL VISUAL APPEARANCE			
Haircoat and abdominal fill	Clean vs. soiled, off color, patchy; normal vs. distended or gaunt		
BCS (Body Condition Score) Abdominal conformation from behind	Excessively fat → Ketosis, "fatty" liver Excessively thin → chronic condition "Papple", gaunt, bloated, fluid filled abdomen, "pregnancy"		
Alertness, ear and head position	Ears down and dull → Not feeling good		
Abnormal nose, eye, or vaginal discharges	Infectious condition or irritation		
Skin lumps, bumps or sores	SQ abscess, lymphoma, or parasite?		

3 - MUSCULAR-SKELETAL	
Uneven weight distribution on feet	→ Hoof, foot or leg problems
Arched back when standing or walking	→ foot problems, such as laminitis due to previous acidosis

4 - TPR (Temperature Pulse Respiration)		
Temp (100 - 102)	Low grade temp (102-103.5) → chronic inflammation due to mastitis, peritonitis, metritis, etc. High fever (temp > 104) → acute peritonitis, pneumonia or mastitis, metritis	
Respiration rate (12-36 breath/min)	Pneumonia - choppy, forced breathing with high temp.	
Heart rate (60-70 beat/min)	Listen for heart murmur, look for jugular pulse	

5 - LEFT SIDE EXAM	
Breathing (see above)	Breathing should appear effortless when standing calmly
Ping test in broad quadrants/slosh	Positive test → Left DA (not as critical as right DA)
Rumen contraction 3/2 min (1-2/min)	No contraction → pain, acidosis, hypocalcemia
Rumen feel (doughy, gas)	Distinct liquid, solid and gas layers → healthy rumen function.

6 - UDDER		
Red, swollen, painful and hot quarter		→ Acute mastitis

Cold and hard quarter	→ Gangrene
Milk appearance	Watery, garget (clots) → clinical mastitis
CMT (California Mastitis Test)	Positive test → Subclinical or clinical mastitis
7- RIGHT SIDE EXAM	
Ping test in narrow center quadrant	Positive test → Right DA (surgical emergency)
(Rib cage area) and fluid slosh	
Ping test in para-lumbar fossa	Positive test → Cecal or colonic gas (indigestion)
Wither pinch	Positive test → Hardware disease , pleuritis, renal pain
Left and right Xyphoid test	TRP or Abomasal ulcer

8 - HEAD AND NECK	
Sunken eyes	→ Dehydration and / or pain
Vision, normal/abnormal globe	Visual pathway
Mucus membranes	Color –pink, icterus, pale, muddy, injected
Teeth grinding	→ Acute pain
Licking, compulsive chewing	→ Nervous ketosis
Nostril discharge	→ Respiratory diseases (IBR, Pneum.)
Lymph nodes	→ Chronic infection
Lump on jaw (Bottle Jaw) midline verse	→ Congestive heart failure, kidney disorder or infection,
asymmetrical	hypoalbuminemia
Droopy ears (and arched back)	→ Acute pain
Cold ears	→ Confirm milk fever, indicates hypocalcemia

9- MUCUS MEMBRANES	
Color	Pink, icterus, muddy
Moisture	Normal moist, tacky - dehydration
Vaginal or prepuce	Color, odor, prolapse

10 – MANURE / RECTAL / UTERINE EXAM			
Amount of feces	No feces → Intestinal, cecal obstruction / twist		
Firm feces to constipation	→ Low intake / High fiber, ketosis, lead poisoning		
Slimy & NH3 smell / abundant urine	→ High protein diet		
Watery (diarrhea)	→ Rumen acidosis / Poisoning / Infections		
Watery and smelly with elevated Temp	Salmonella, dysentery, BVD infections		
Fecal blood – "tarry" (brown/black)	→ Coagulated blood from upper gi tract infection/ulcer		
Fecal blood – "Red"	→ Frank hemorrhage - rectal or colonic bleeding		
Rectal palpation - Pelvic canal and repro	→ Ovarian cyst, pregnancy (test), confirm a right DA, metritis		
tract, rumen, intestines and left kidney			

11 - URINE	
Keto stick	If purple → Ketosis
Ph measurement	Anionic balance
Urine character – clear, yellow?	Abnormal color, debris, blood, consider reproductive tract

12 – SAMPLING for further CULTURE and DIAGNOSTIC TESTS			
Milk	→ Strep., Staph., coliform or Mycoplasma species		
Milk Urea Nitrogen	→ Excess crude protein in ration		
Inversion of milk fat to protein ratio	Combined with other signs → Rumen acidosis		
Feces	→ Johnes' disease		
Urine	→ Bladder infection		
Blood	→ Serum protein, mineral profile, NEFA		
Nasal swab	→ IBR		

Common disorders that you are well on your way to diagnosing after completing the above steps:

- Ketosis
- Pneumonia (respiratory infection)
- Hardware disease
- Milk fever (hypocalcemia)
- Metritis
- Acute or chronic mastitis
- Right Displaced Abomasum (emergency)
- Acute or subacute rumen acidosis
- Laminitis
- Any combination of the above disorders