CARCASS PREPARATION

GRALLOCHING(I)

Equipment: Knife with fixed or lockable blade of approx 5 ins; protective gloves or hand cleanser; method of cleaning knife (such as steri-wipe); disposable towels; cable ties (if required).

The aim of this guide is to provide practical guidance on the initial stages of preparing a carcass immediately after the deer has been shot and death confirmed.* The BP Guide Carcass Inspection should be

viewed as an essential accompaniment to this guide.



The purpose of gralloching is to:

- ♦ Reduce contamination of the meat by gut contents:
 - If the guts are damaged by the shot, prompt gralloching can significantly reduce the degree of contamination.
 - If the guts are intact, it is accepted wisdom that bacteria will migrate through the gut wall in time – the slower the cooling of the carcass and warmer the day, the faster this process.
- ♦ Help cool the carcass;
- ♦ Reduce tainting of the meat from blood by:
 - Cutting the aorta at the heart to bleed out the main blood vessels;
- Releasing blood in the chest resulting from the shot.

Great care must be taken during the initial carcass processing as this is when the majority of food contamination can take place.

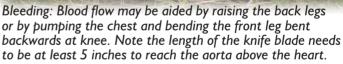
Procedure

Ensure hands are clean. Ensure any open wounds or sores on hands are covered e.g. by using disposable gloves.

Use a knife that can be easily cleaned (e.g. a one-piece knife carried in a scabbard or a folding knife).

Minimise the extent of knife work to the carcass to reduce the risk of contamination, especially if

Avoid removing head and feet in the field to minimise contamination of exposed meat.



Cleanse the knife before and between gralloching animals (e.g. with a sterile wipe). Do not stick the knife into the ground at any point.

If gut contents have spilled into the stomach cavity, attempt to remove as quickly and a thoroughly as possible (where practical, this is best achieved by wiping out the worst of the solid content with disposable paper towels or as a last resort by using clean sphagnum moss).

2. Bleed.

Turn deer on its side with the head downhill if possible. Position front leg of deer to give tension to the skin surrounding the breastbone.



heart









Insert blade immediately above breast bone and point toward the heart, so that it penetrates the chest cavity. Work the blade around until the blood flows freely (see illustrations overleaf).

To ensure blood has drained, bend lower foreleg back and press hard on rib cage to force remaining blood in the chest out the hole.



If the carcass is to be extracted by dragging, it is advisable to ensure that any cuts to the carcass are kept to a minimum. In such a case, the chest cavity may be bled through the diaphragm when opening the stomach cavity.

If intending to attach a drag rope to the jaw at a later time, wedge the jaw slightly open before rigor mortis sets in.

3. Tie the foodpipe.

To prevent carcass contamination from stomach contents you should tie off the foodpipe.

2 From the bleeding incision make a cut up the centre of the neck exposing the windpipe (trachea) behind which is the foodpipe (oesophagus). If the carcass is to be dragged keep this incision as small as possible. Separate the foodpipe from the windpipe and cut it as high up the neck as to allow a length to tie. There are a number of ways of doing this:

- Pinch the foodpipe and seal using a clean cable-
- Scrape off flesh downwards from a short length and knot;
- Make a small slit in the foodpipe (approx 1cm or small enough just to insert a finger) and loop the cut end through the slit. Repeat the loop three times to secure.

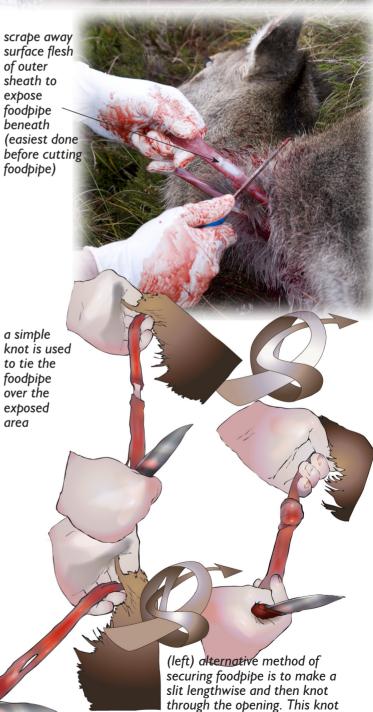
This process prevents leakage of stomach contents into the chest cavity when removing food pipe and stomach.

Push thumb and fore-finger down along the outside of the foodpipe, through the chest hole made when bleeding and pull with enough pressure to free connective tissue without breaking the foodpipe. This makes it easier to remove later. In cases where cuts to the carcass need to be minimised (e.g. where the carcass is to be dragged), an alternative to opening the neck is to access the foodpipe through the diaphragm after opening the stomach cavity. Ensure that stomach contents are pulled back towards the stomach and that the tube is secured to prevent spillage when drawing it into the stomach cavity.

continued in Gralloching(2)



DESTDRACTICE



is repeated 3 times

* See BPG Humane Dispatch