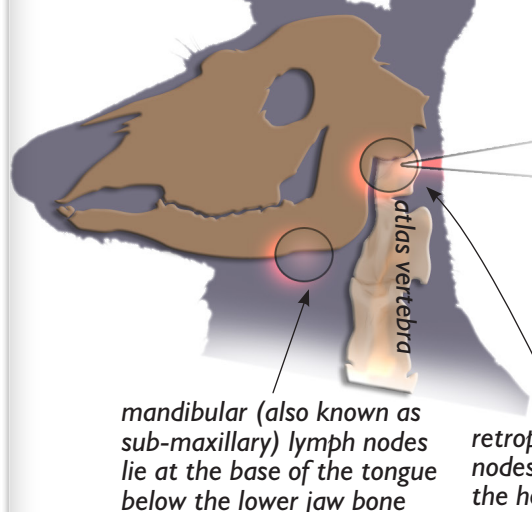


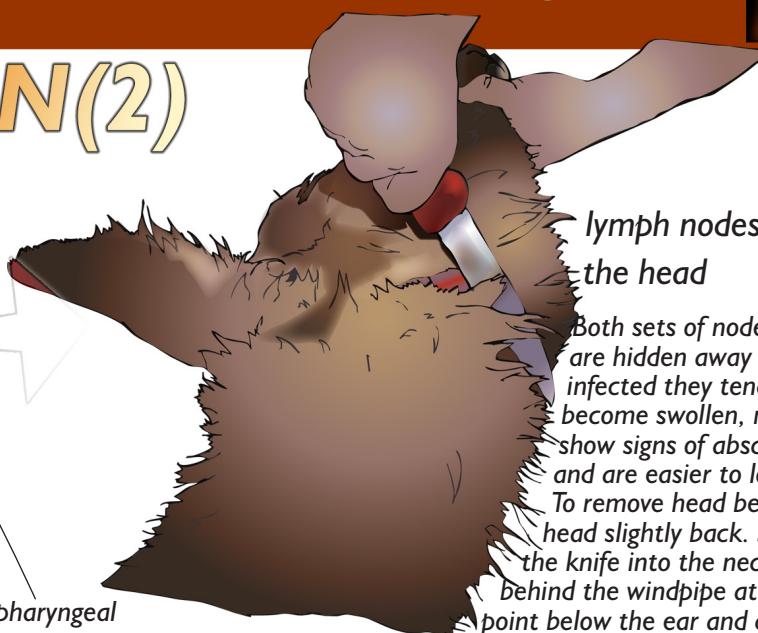


## CARCASS INSPECTION (2)



mandibular (also known as sub-maxillary) lymph nodes lie at the base of the tongue below the lower jaw bone

retropharyngeal nodes are seen once the head is cut off



lymph nodes in the head

Both sets of nodes are hidden away but if infected they tend to become swollen, may show signs of abscesses and are easier to locate. To remove head bend head slightly back. Stick the knife into the neck behind the windpipe at a point below the ear and cut outwards to cut open the throat and to expose the joint between

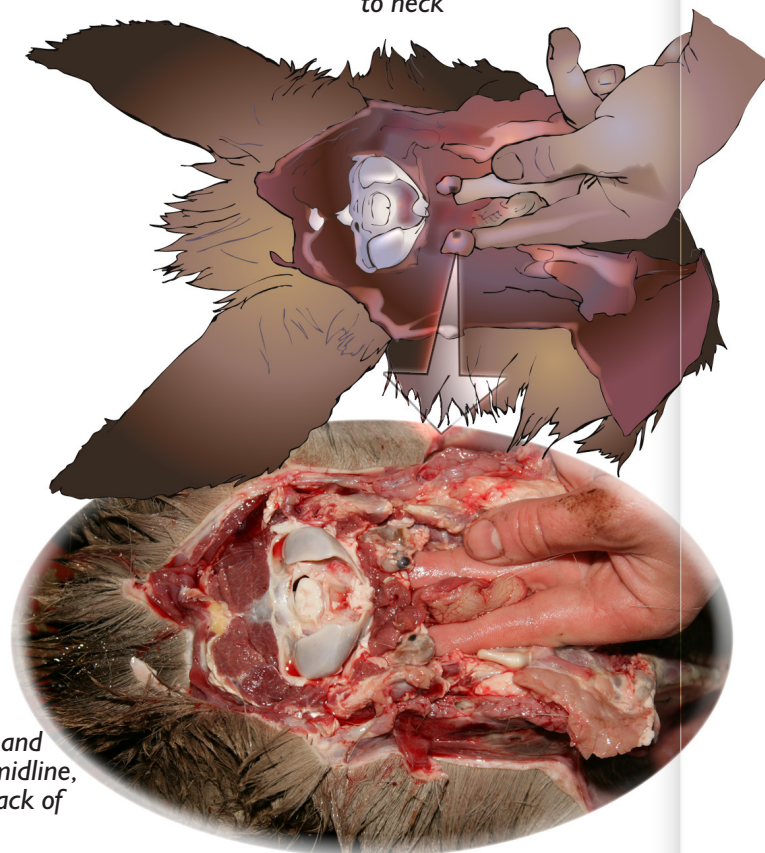
the skull and the atlas bone. Cut the tissue either side of this joint and pull or twist the chin back to dislocate the joint. Cut through the remaining tissue to completely remove the head.

continued from Carcass Inspection (1)

### Procedure in the larder (contd)

- 2 Look for and note any swelling of the retro-pharyngeal and mandibular (also known as sub-maxillary) lymph nodes (see illustrations).
- 3 Assess the fat content within the carcass, especially around the kidneys. A consistent and objective means of assessing this is the weight of the surrounding fat in relation to the weight of the kidney. Kidney fat index is probably the most reliable means of assessing body condition. The effects of season, age of the animal, lactation etc. should be taken into account when using it to judge the general health of the deer herd.
- 2 Look at the kidneys. If removing the kidneys, peel them to check the colour, size and texture. This is a good place to spot infectious conditions, which may cause abscesses or adhesions of the kidney to its envelope, or may be visible as micro-abscesses.
- 2 Draw the attention of the AGHE vet to any spots, cysts or blisters and even white scars on the kidney which may be of no significance.

rear view of head and articulation to neck



The retropharyngeal lymph nodes are tan and grey in colour and are found close to the midline, near where the mouth cavity meets the back of the throat (pharyngeal area).  
note: if the retropharyngeal nodes are not seen at initial removal of head then further cuts will be required.

## Completing the inspection

- 2 Ensure that proper records are kept to ensure traceability (ideally in a larder record.)\* Record the following:
  1. Place, date and time of culling
  2. Name of the 'trained person' who inspected the carcass
  3. Details of any abnormal behaviour, injury or disease observed
  4. Carcass tag number (if applicable).
- 2 Carcasses supplied to an approved game handling establishment (AGHE) must have attached a declaration tag bearing these details and signed by the 'trained person'.

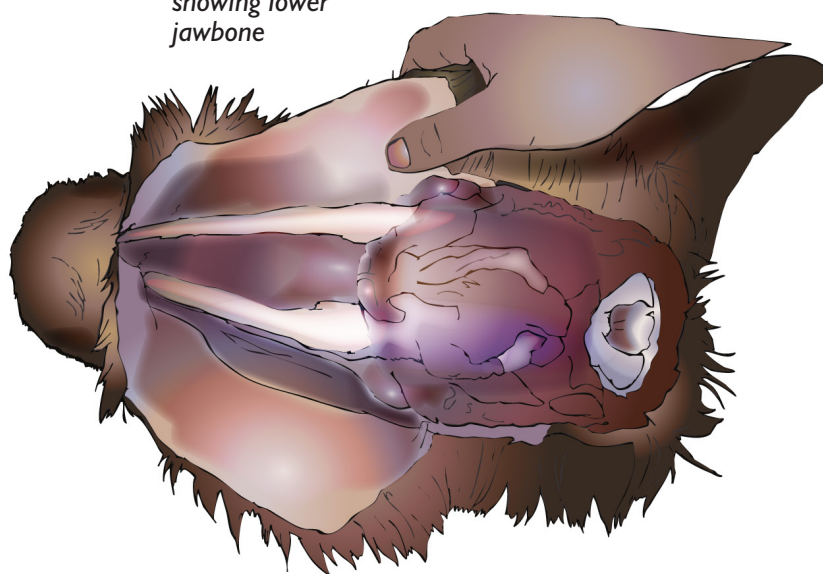
### What to do if you find abnormalities

- 1 Where a Notifiable Disease is suspected, inform the Divisional Veterinary Manager immediately.<sup>1</sup>
- 2 Where TB is suspected retain the gralloch/pluck in a sealed plastic container and retain with the carcass outside the larder, then notify the DVM.<sup>1</sup>
- 2 Do not allow the carcasses with abnormalities associated with disease and infection to enter the food chain and ensure they are kept separate from others.
- 2 Where there are other abnormalities and the carcass is being supplied to an AGHE, record these on the declaration tag accompanying the carcass.

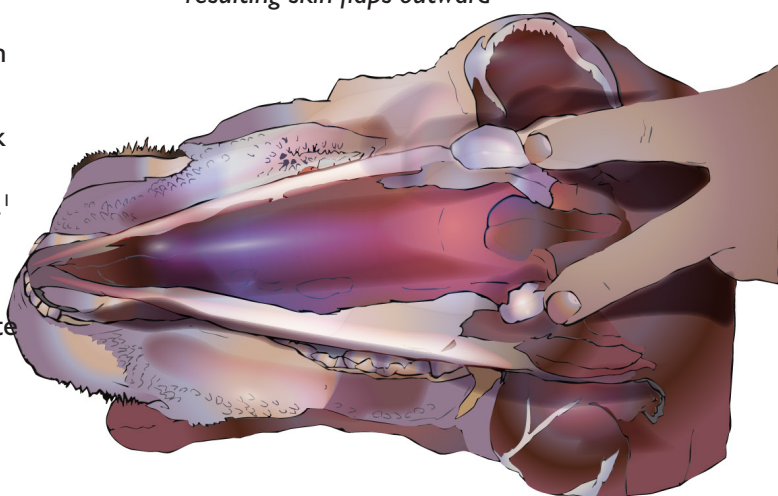
### Do not submit the following for entry to the food chain

- 2 Carcasses which are emaciated.
- 1 Carcasses with a suspected Notifiable Disease.\*\*
- 2 Carcasses with any acute septic condition or signs of fever.
- 2 Carcasses with extensive and severe bruising. Less severe bruising or contamination may be acceptable if the affected areas are thoroughly cut back.
- 2 Carcasses which are 'fired' or 'sweated' as a result of heat retention during the carcass cooling process.

underside of head showing lower jawbone



to see the sub-mandibular glands, cut along both outer edges of lower jaw and fold resulting skin flaps outward



detail of above



\* See BPG Larder Records  
\*\* See BPG Notifiable Diseases

<sup>1</sup> For contact details of the nearest Divisionary Veterinary Manager see BP Contacts