



DRY COW CHECK

Research and experience in recent years have shown the great value to production, health and fertility of good, positive nutrition in the dry period. If there are failings it is usually not apparent at the time. It is usually not apparent either that problems in the following lactation have been caused by failings in dry cow nutrition. “Asking the cows” what they think of their dry cow management through blood testing is the only way to check.

We need to know that cows are not starting to lose condition in the run up to calving, that rumen degradable protein intake is adequate, that the major minerals are balanced and that trace element intakes are sufficient. These things can only be checked by blood tests.

Good dry cow nutrition and management leads to more milk and milk protein production and better fertility. There is less ketosis, milk fever, mastitis, lameness, retained placenta, stillbirth, weak calves and displaced abomasum.

For full advantage to be taken of a **Dry Cow Check** some “rules” need to be followed. These are:

1. Tests should be timed just before larger groups of cows start calving. Then, if changes are necessary, they can benefit the cows not yet in the high risk period.
2. Two groups of five cows each at least should be sampled.
3. One group should consist of cows with less than 10 days to go to calving. This is the most important group because this is when any nutritional imbalances are most likely to occur and be detected. Cows should be typical of their group.
4. One group of cows with about one month to go to calving should be sampled as well - mainly for comparison.
5. From each cow two samples should be collected into lithium heparin anticoagulant (green top) and one in to oxalate fluoride (grey top - within expiry date).
6. Background information should be provided about the farm and the cows - expected calving date, weight by heart girth measurement, body condition score and feeding.

For any further information telephone 0131 651 7474, fax 0131 651 7473 or e-mail DHHPS@ed.ac.uk.