

VET CARE

STRIVING TO STRENGTHEN THE LIVESTOCK HEALTH



Operating Emergency Veterinary Services in Public - Private
Partnership mode with 1581 Mobile Veterinary Clinics

1962 Partnering States



Government of
Tamilnadu



Government of
Telangana



Government of
Gujarat



Government of
Jharkhand



उत्तराखण्ड राज्य
Government of
Uttarakhand



Government of
Uttar Pradesh



অসম চৰকাৰ
Government of
Assam



UT Administration of
Dadra and Nagar Haveli
and Daman and Diu

“Towards saving the animals lives and bringing hope to the livestock owners”



210.48 Lakhs Calls Answered since inception
8.48 Lakhs Calls Answered in this quarter (Apr - Jun 2026)



Treated 272.87 Lakhs Animal Patients since inception with a Fleet of 1581 Mobile Veterinary Units.
22.07 Lakhs Emergencies responded in this quarter (Apr - Jun 2026)
17 animals were treated per minute during this quarter



Assisted 42.78 Lakhs Surgeries, 26.11 Lakhs Gynecological & Obstetrical Cases and Treated 193.79 Lakhs Medical Emergencies by the teams of Mobile Veterinary Units since inception

THE MVUs – HEALERS OF HOPE...



Advancing Compassionate Veterinary Care – A Collective Journey

It gives me immense pleasure to present another edition of the **Vet Care Magazine**, showcasing the dedication, compassion, and unwavering commitment of the EMRI-GHS family in advancing animal health and welfare across the country. Through the **1962 Mobile Veterinary Units (MVUs)**, we continue to deliver timely, accessible, and quality veterinary healthcare at the doorsteps of farmers, livestock owners, and pet caregivers, strengthening rural livelihoods while fulfilling our mission of serving the voiceless.

This quarter has been marked by several noteworthy achievements across our operational states, reflecting the growing reach and impact of the 1962 initiative. During the **National Review Meeting held on 23rd April 2026**, the Honourable Chairman felicitated the recipients of the National Saviour Awards in recognition of their outstanding performance and exemplary service during the quarter. As part of the World Veterinary Day 2026 celebrations, the Gujarat team organized "**Vet Sangam**" on **28th April 2026** to honour

retired Government Veterinary Doctors for their invaluable contributions to the veterinary profession.

In **May 2026**, the Uttar Pradesh team partnered with the Department of Animal Husbandry to conduct a **Brucellosis Awareness Campaign**, strengthening collaboration with the Government while enhancing the reach and impact of the 1962 veterinary services.

Uttarakhand achieved the remarkable milestone of treating over **5 lakh animals on 5th June'26**, reaffirming the trust placed in our services by livestock owners. In Jharkhand, the 1962 team established a dedicated stall at the "**KRISHI VYAPAR MELA**" initiated by **State Animal Husbandry Dept. (16th -18th June'26)**, creating an excellent platform to promote 1962 veterinary services, engage with farmers, and increase awareness of accessible veterinary healthcare. Gujarat celebrated successful completion of **6 years of Mobile Veterinary Dispensary (MVD) services on 22nd June 2026**. The Gujarat team also actively participated in the "**Mastitis Awareness Month-June 2026**" campaign organized by the State Animal Husbandry Department, creating awareness among dairy farmers on mastitis prevention, promoting early detection, and encouraging timely treatment to improve udder health and milk productivity.

At the **National Veterinary Medicine Learning Centre (National VMLC)**, we continue to strengthen the 1962 project through regular review meetings with all operational states, promoting operational and clinical excellence by sharing best practices and addressing key challenges. During this quarter, Foundation and Refresher Training Programs for Veterinary Officers, Para-veterinary Professionals, Pilots, ERC Veterinarians, and Emergency Response Officers (EROs) were conducted, along with **Internal Case Round Presentations** which enhanced clinical knowledge, operational competencies, emergency response preparedness, and peer learning across the organization. On the occasion of **World Veterinary Day on 25h April 2026**, a **special note** recognizing the invaluable contributions of veterinary professionals towards animal health, welfare, and rural livelihoods was published by the National VMLC and circulated among all **EMRites**, celebrating their dedication and service.

The stories featured in this edition reflect the resilience, professionalism, and compassion of our teams serving under diverse and challenging field conditions. They exemplify how collaboration, continuous learning, and a commitment to excellence are strengthening veterinary emergency services and improving animal health across the country.

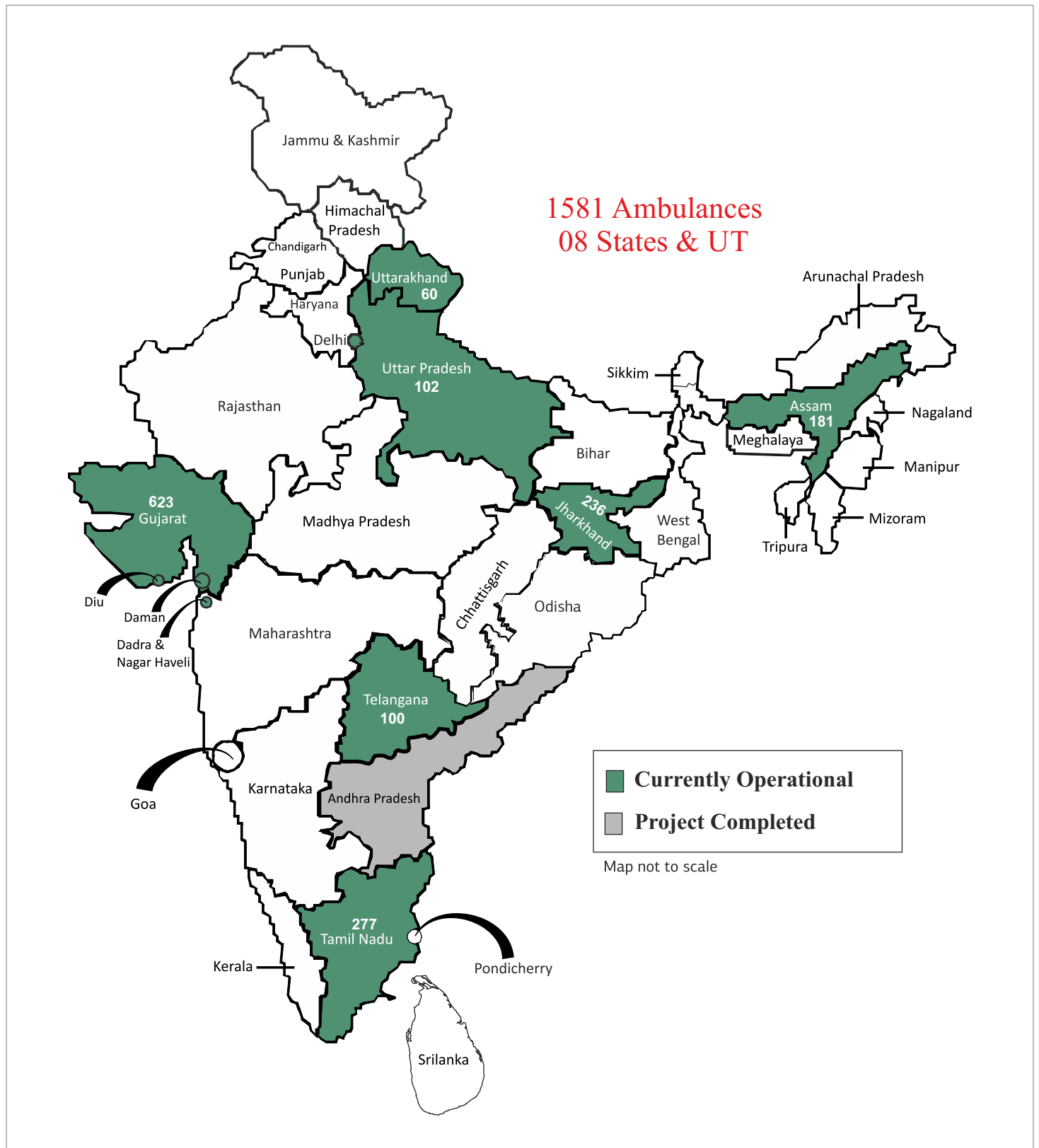
I extend my heartfelt appreciation to every member of our veterinary fraternity and the entire **1962 family** whose dedication and selfless service make this mission possible. Together, we will continue to strengthen veterinary emergency services, build a skilled workforce, and advance quality animal healthcare across India.

I hope this edition of the **Vet Care Magazine** reflects our collective achievements and inspires continued learning, innovation, and collaboration in our shared mission of improving animal health and welfare.

With Regards,

K. Krishnam Raju
Director - EMRI GHS

FOOTPRINTS OF 1962 IN DIFFERENT STATES OF INDIA





- 108 Emergency Response Center handles over 250,000 calls daily.
- An impressive 97% of calls are answered within just 2 rings.
- Initiated to lower neonatal mortality rates.
- Fully equipped (incubator- ventilator etc.) to facilitate the transfer of newborns between Special Newborn Care Units (SNCU) and Neonatal Intensive Care Units (NICU).
- Initiated to reduce infant and maternal mortality rates.
- These ambulances are designed to transport pregnant women, mothers and newborn babies from home to hospital and hospital to home in sterile and safe environment.
- Mobile Medical Units (MMU) provide primary health care on wheels.
- Serve medical needs of individuals in remote areas.



- Introduced for rapid response to medical emergencies in riverine regions.
- Provide critical healthcare support during floods.



- Primarily used to transit care patients from lower level to higher level hospitals in emergency situations.



- This innovative approach is designed to carry emergency patients navigate hilly terrains or no road connectivity



- Health helpline services in non-emergency
- This telemedicine service offers information, advice, and counseling



- Implements "Dial 100 Police" service to combat crime and maintain societal peace and safety.
- It uses advanced technology to analyze calls, enhance information for rapid response, facilitate follow-up and expedite information sharing to different levels of law enforcement & prompt response.



- "Call 181" - Women Helpline is a dedicated service aimed at assisting women in distress.



- Mobile Veterinary Units accessed through 1962 toll free no. provides doorstep point-of-contact- care (POCC) for livestock and stray animals.
- MVUs with Hydraulic lift to carry animals to veterinary facilities in few states.
- Average number of calls received per day is 9318

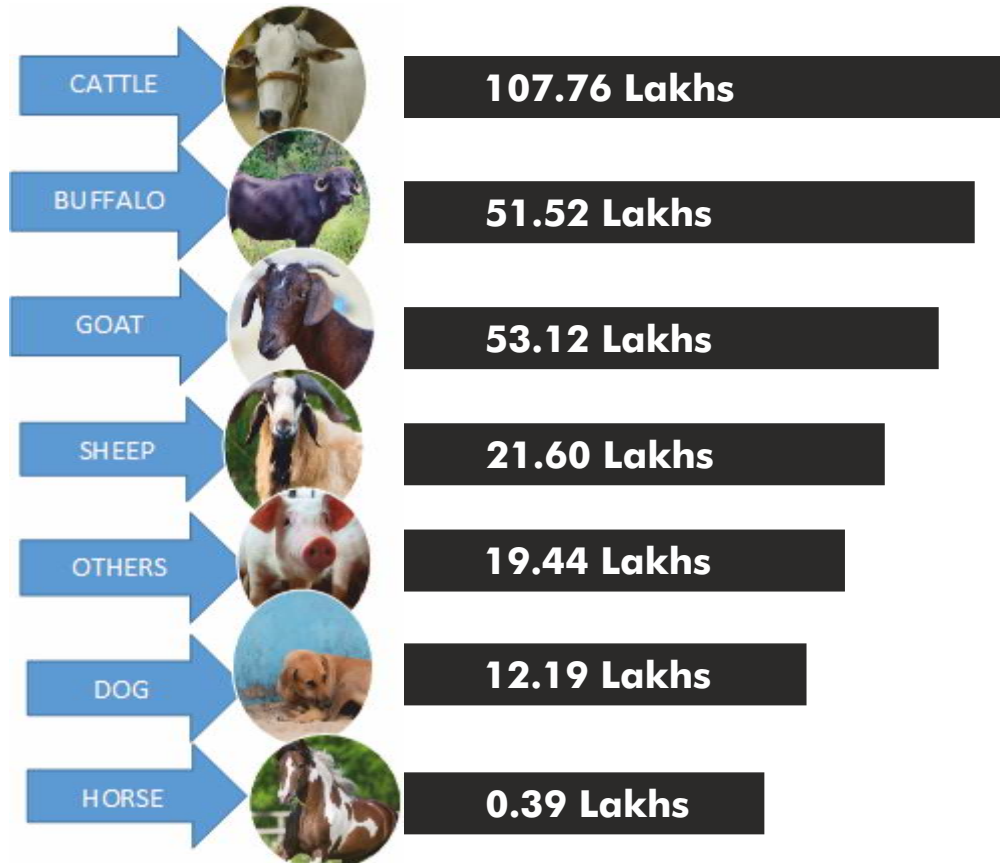
STATE WISE PROGRESS SINCE INCEPTION TO JUNE 2026

S.No.	Name of State	Operational Vehicles	No. of Animals Treated in this Quarter (April - June 2026)	No. of Animals Treated Since Inception
1	Tamil Nadu	277	11.08 Lakhs	59.02 Lakhs
2	Telangana	100	1.35 Lakhs	51.91 Lakhs
3	Gujarat	623	4.94 Lakhs	111.87 Lakhs
4	Uttarakhand	60	0.64 Lakhs	5.14 Lakhs
5	Uttar Pradesh	102	0.74 Lakhs	9.20 Lakhs
6	Assam	181	1.11 Lakhs	11.70 Lakhs
7	Jharkhand	236	2.18 Lakhs	6.87 Lakhs
8	UT(DDNH)	2	0.025 Lakhs	0.13 Lakhs
9	Andhra Pradesh	340*	0 Lakhs	17 Lakhs
Total		1581	22.07 Lakhs	272.87

Note: -*Service Terminated in May 2025

Average animals treated per day in this quarter (April-June 2026) - 24,259

Species wise animals treated by 1962 since inception





Star Performers from April - June 2026

1962 NATIONAL SAVIOUR AWARDEES –Q1 (FY 2026-2027)

S.NO	MONTH	STATE	CASE CONDITION	PG NO
1	APRIL	GUJARAT	SURGICAL MANAGEMENT OF PERSISTENT URACHUS IN A CALF	8
2	MAY	UTTAR PRADESH	SURGICAL TREATMENT OF BENIGN TUMOR IN DOG	14
3	JUNE	UTTARAKHAND	CLINICAL MANAGEMENT OF NERVOUS FORM OF KETOSIS IN CATTLE	20

VET CARE CRITICAL CASES FOR THE QUARTER Q1 (APRIL to JUNE 2026)

S.NO	MONTH	STATE	CASE CONDITION	PG NO
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2	APRIL	ASSAM	CAESAREAN SECTION IN COW – DYSTOCIA & UTERINE TORSION MANAGEMENT	9
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12	MAY	JHARKHAND	CLINICAL MANAGEMENT OF UREA POISONING IN GOAT	19
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EMRI - GHS : Not for profit organization operating under public private partnership mode.

APRIL-2026

1962 TEAM - GUJARAT - PORBANDAR



1. PERSISTENT URACHUS IN A CALF

Persistent Urachus in a calf is a condition in which the urachus, a fetal congenital structure that normally closes shortly after birth, fails to seal completely, resulting in the abnormal passage of urine through the umbilicus. Affected calves typically present with continuous or intermittent urine leakage from the navel, accompanied by moisture, swelling, or inflammation around the umbilical region. If left untreated, the condition can predispose the calf to ascending bacterial infections, omphalitis, cystitis, or even septicemia, adversely affecting its health and growth. Early diagnosis and appropriate medical or surgical intervention are essential to prevent complications and ensure complete recovery and normal development of the calf.

SURGICAL MANAGEMENT OF PERSISTENT URACHUS IN A CALF

CASE DETAILS:

District : PORBANDAR
MVU : MVD-DEVDA
Date : 18/04/2026
Case ID : 20260000288755
Call Time : 12:20 PM
Doctor : Dr. JATIN KHODBHAYA
DCH : Mr. BHARATBHAI VINZUDA

1. History: A 4-month-old female non-descript calf from Baloch village, Devda, Porbandar district was presented with a history of continuous urine dribbling since birth and a gradually enlarging swelling in the umbilical region. Based on the history and clinical examination, the condition was suspected to be persistent urachus requiring surgical correction.

2. Clinical Presentation: On clinical examination, the calf was bright and alert. Mucous membranes were pink and moist, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within normal physiological limits. The animal exhibited a prominent swelling in the umbilical region, continuous urine dribbling, reduced urination, and mild discomfort on palpation.

3. Signs and Symptoms: The calf exhibited continuous urine dribbling since birth, gradual enlargement of the umbilical swelling, reduced urination, and mild discomfort on palpation. The swelling progressively increased in size without signs of systemic illness, suggesting a chronic congenital defect involving the persistence of the urachus.

4. Diagnosis: Based on the history, physical examination, and characteristic clinical findings of urine leakage associated with an enlarged umbilicus, the calf was diagnosed with Persistent Urachus (Patent Urachus), a congenital anomaly resulting from the failure of complete closure of the fetal urachus after birth.

5. Procedure: The calf was restrained in dorsal recumbency, and the surgical site was prepared aseptically after clipping and scrubbing with povidone-iodine solution. Following sedation and local infiltration with 2% lignocaine, a circumferential incision was made around the umbilicus. The persistent urachus was carefully isolated, double ligated near the apex of the urinary bladder, excised, and the abdominal wall was routinely closed. The surgical site was cleaned and dressed aseptically. Post-operatively, antibiotic- Inj. Ceftriaxone, anti-inflammatory -Inj. Meloxicam, antihistamine- Inj. Chlorpheniramine Maleate, and B-Vitamin-Inj. Neurobion were administered along with regular antiseptic wound dressing to facilitate uneventful healing.

6. Recovery and Reflection of Farmer: The owner was advised on proper post-operative wound care, medication, and regular follow-up. The calf recovered uneventfully with complete cessation of urine leakage and satisfactory wound healing. The owner expressed satisfaction and appreciation for the successful treatment provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely intervention and successful surgical management of the persistent urachus case, which restored normal urinary function, prevented potential urinary tract complications, and ensured complete recovery of the calf



Before Treatment



During Treatment



Recovered animal

APRIL-2026

1962 TEAM – ASSAM - GOALPARA



2. CESAREAN SECTION IN COW

Caesarean section (C-section) in cattle is a surgical obstetrical procedure performed to deliver a calf through an incision in the abdominal wall and uterus when normal vaginal delivery is not possible. It is commonly indicated in cases of dystocia caused by fetal malpresentation, uterine torsion, oversized fetus, or failure of manual obstetrical correction. Timely surgical intervention helps prevent maternal and fetal complications, improves the chances of survival of both the cow and the calf, and minimizes post-parturient morbidity when followed by appropriate post-operative care.

CESAREAN SECTION IN COW – DYSTOCIA & UTERINE TORSION MANAGEMENT

CASE DETAILS:

District : GOALPARA
MVU : SVD-JALESWAR
Date : 25/04/2026
Case ID : 75072
Call Time : 12:32 PM
Doctor : Dr. RAKIB UDDIN AHMED
DCH : Md. SADDAM HUSSAIN

1. History / Anamnesis: A 6-year-old full-term pregnant cow was presented with a history of prolonged straining and failure to deliver the calf. The owner reported that the animal had accidentally fallen near a pond three days earlier, following which it developed continuous straining, slight mucoid vaginal discharge, reduced feed intake, weakness, and repeated lying down and standing. Previous field-level obstetrical interventions had failed to relieve the dystocia.

2. Clinical Presentation: On clinical examination, the cow was in distress but standing. Mucous membranes were congested, while respiration rate was increased. Pulse rate, capillary refill time, ruminal movements, and rectal temperature were within acceptable physiological limits. The animal exhibited prolonged straining, blood-tinged vaginal discharge, reduced feed and water intake, repeated lying down and standing, and complete absence of fetal parts in the birth canal during initial examination.

3. Signs and Symptoms: The animal exhibited prolonged abdominal straining without progression of parturition, blood-tinged vaginal discharge, reduced feed and water intake, depression, repeated attempts to lie down and stand, and absence of fetal parts in the birth canal. These findings indicated a complicated dystocia associated with fetal maldisposition and suspected uterine torsion.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as dystocia due to dorsal transverse fetal presentation associated with right-sided uterine torsion, requiring immediate surgical intervention by caesarean section.

5. Procedure/Treatment: After unsuccessful manual correction, the cow was restrained in a standing position and prepared aseptically for surgery. Epidural and local lignocaine anaesthesia were administered, and a left flank caesarean section was performed. The uterine torsion was corrected, the calf was safely delivered, and the uterus and abdominal wall were closed routinely. Post-operatively, antibiotic - Inj. Bilcef, anti-inflammatory - Inj. Unizif (Flunixin), antihistamine-Inj. Cadistin (Chlorpheniramine Maleate), B-vitamin-Inj. Tribivet, and intravenous fluid therapy-Ringer's Lactate were administered along with regular antiseptic wound dressing and post-operative care.

6. Recovery and Reflection of Farmer: The owner was advised on post-operative wound care, hygiene, and regular medication. Both the cow and calf recovered successfully without complications, and the owner expressed satisfaction and gratitude for the timely intervention by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely surgical intervention and successful management of the caesarean section, which ensured the survival of both the cow and calf and resulted in an uneventful post-operative recovery.



Before Treatment



During Treatment



Recovered animal

APRIL-2026

1962 TEAM – ASSAM - GOLAGHAT



3. DYSTOCIA IN GOAT

Dystocia in goats is a difficult or prolonged kidding in which the doe is unable to deliver the fetus naturally due to fetal malpresentation, oversized fetus, fetal death, or maternal causes such as inadequate cervical dilation or a narrow birth canal. Affected animals commonly exhibit prolonged straining, restlessness, vaginal discharge, reduced appetite, and signs of distress. If not managed promptly, dystocia can lead to fetal death, uterine injury, septicemia, and even death of the doe. Early obstetrical intervention through manual correction or surgical management is essential to ensure the survival and recovery of the animal.

DYSTOCIA IN GOAT

CASE DETAILS:

District : GOLAGHAT
MVU : BLOCK VET, DISPENSARY, BOKAKHAT
Date : 25/04/2026
Case ID : 71267
Call Time : 02.19 PM
Doctor : Dr. MONOJ KUMAR NATH
Paravet : Mr. DIGANTA DOLLEY

1. History: A 2-year-old non-descript doe was presented with a history of prolonged straining since the previous night. Although the fetal membranes had ruptured, no kids were delivered. The animal became weak, recumbent, and previous attempts at assisted delivery by field personnel were unsuccessful.

2. Clinical Presentation: On clinical examination, the doe was recumbent and in distress. Mucous membranes were congested, while respiration rate, pulse rate, capillary refill time, ruminal movements, and rectal temperature were within acceptable physiological limits. The animal exhibited continuous abdominal straining, foul-smelling reddish vaginal discharge, depression, reduced appetite, dehydration, and weakness.

3. Signs and Symptoms: The animal exhibited prolonged abdominal straining, depression, restlessness, reduced appetite, mild dehydration, foul-smelling reddish vaginal discharge, painful vocalization, lateral recumbency, and obstruction of normal delivery due to malpositioned dead twin fetuses.

4. Diagnosis: Based on the history, clinical findings, and obstetrical examination, the case was diagnosed as dystocia due to fetal death associated with early-stage fetal maceration of twin fetuses.

5. Procedure: The doe was properly restrained and the perineal region was prepared aseptically. After adequate lubrication of the birth canal, gentle repulsion and correction of fetal posture were performed, followed by controlled manual traction to extract both dead fetuses. The reproductive tract was flushed with antiseptic solution. Post-treatment included antibiotic – Inj. Conmox, anti-inflammatory – Inj. Meloxicam, antihistamine – Inj. Chlorpheniramine Maleate, intravenous fluid therapy – Intalyle, and B-vitamin – Inj. Trivet to support recovery and prevent uterine infection.

6. Recovery and Reflection of Farmer: The owner was advised regarding post-treatment care, hygiene, and timely veterinary intervention during difficult kidding. The doe recovered steadily with improved appetite and no post-partum complications. The owner expressed satisfaction and gratitude for saving the animal.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff considered the case a valuable learning experience, emphasizing timely surgical intervention and effective teamwork for successful management and recovery of the doe.



Before Treatment



During Treatment



After treatment

APRIL-2026

1962 TEAM – JHARKHAND - SAHIBGANJ



4. MEDIAL PATELLAR DESMOTOMY IN CATTLE

Medial Patellar Desmotomy (MPD) in cattle is a surgical procedure performed to treat upward fixation of the patella, a condition in which the patella becomes locked over the medial trochlear ridge, causing persistent extension of the hind limb and lameness. The procedure involves transection of the medial patellar ligament to restore normal movement of the stifle joint. Timely surgical intervention provides immediate relief from patellar locking, improves locomotion, and enables the animal to regain normal function with minimal post-operative complications.

MANAGEMENT OF UPWARD FIXATION OF PATELLA BY MPD IN A CATTLE

CASE DETAILS:

District : SAHIBGANJ
MVU : UDHWA
Date : 16/04/2026
Case ID : 271512
Call Time : 11:17 AM
Doctor : Dr. JAY GOVIND YADAV
Paravet : Mr. AKASH SAHA

1. History: A 5-year-old female non-descript cow was presented with a history of progressive lameness for the past 1.5 years. The owner reported persistent locking of the hind limb during movement, resulting in marked difficulty in locomotion. No previous definitive surgical treatment had been undertaken for the condition.

2. Clinical Presentation: On clinical examination, the cow was bright and standing. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, ruminal movements, and rectal temperature were within normal physiological limits. The animal exhibited persistent hind-limb extension, difficulty in flexion of the stifle joint, and dragging of the toe while walking.

3. Signs and Symptoms: The animal exhibited chronic lameness, persistent locking of the hind limb, impaired stifle flexion, difficulty in locomotion, and dragging of the toe while walking. The condition had progressively worsened over 1.5 years, causing significant functional impairment.

4. Diagnosis: Based on the chronic history and characteristic clinical findings of persistent hind-limb extension with impaired stifle flexion, the case was diagnosed as Upward Fixation of the Patella (UFP). Owing to the chronic nature of the condition, Medial Patellar Desmotomy (MPD) was selected as the definitive surgical treatment.

5. Procedure/Treatment: The animal was restrained in lateral recumbency, and the surgical site was prepared aseptically. After local infiltration with 2% lignocaine, the medial patellar ligament was identified through palpation and transected using a BP blade, confirming complete desmotomy with immediate restoration of limb movement. Post-operatively, antibiotic therapy, NSAIDs (anti-inflammatory drugs), antiseptic wound dressing, and gradual exercise were advised until complete recovery.

6. Recovery and Reflection of Farmer: The owner was advised regarding wound care, controlled exercise, and regular follow-up. The cow showed immediate improvement in gait, with complete wound healing and no post-operative complications. The owner expressed satisfaction with the successful treatment outcome.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied and considered the case a valuable learning experience, highlighting the importance of accurate diagnosis, timely medial Patellar Desmotomy, and proper surgical management for successful correction of upward fixation of the patella and restoration of normal locomotion.



Before Treatment



During Treatment



Recovered animal

APRIL-2026

1962 TEAM – TAMIL NADU - KRISHNAGIRI



5. INTESTINAL EVISCERATION IN CALF

Intestinal evisceration in a calf is a life-threatening congenital condition in which the small intestine protrudes through a defect in the umbilical region due to incomplete closure of the abdominal wall during fetal development. The exposed intestines are highly susceptible to contamination, dehydration, trauma, and infection, leading to rapid deterioration if left untreated. Prompt surgical correction, along with appropriate fluid therapy, antibiotics, and post-operative care, is essential to preserve intestinal viability, prevent septicemia, and ensure the survival and recovery of the calf.

SURGICAL CORRECTION OF INTESTINAL EVISCERATION IN CALF

CASE DETAILS:

District : KRISHNAGIRI
MVU : MVU, VH, KAVERIPATTINAM
Date : 11/04/2026
Case ID : 159227
Call Time : 01:20 PM
Doctor : Dr. JAYA PRAKASH
Paravet : Mr. KANNADASAN

1. History / Anamnesis: A day-old female Jersey cross calf was presented with a history of intestinal loops protruding through the umbilical opening since birth. The exposed intestines were mildly contaminated with manure and bedding material due to rupture of the amniotic membrane surrounding the viscera

2. Clinical Presentation: On clinical examination, the calf was weak but responsive. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The animal exhibited protrusion of intestinal loops through the umbilical defect, mild edema of the exposed viscera, serosal congestion, slight dehydration, and reduced activity.

3. Signs and Symptoms: The calf exhibited protrusion of small intestinal loops through the umbilical opening, mild edema and congestion of the exposed intestines, slight dehydration, and reduced activity. The exposed viscera were mildly contaminated, indicating a congenital surgical emergency requiring immediate intervention.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as congenital intestinal evisceration due to failure of closure of the peritoneum and abdominal muscles at the umbilical opening during fetal development.

5. Procedure / Treatment: The calf was stabilized with intravenous normal saline, 5% dextrose, Antibiotic-Inj. Ceftriaxone, anti-inflammatory-Inj. Meloxicam, and Antihistamine-Inj. CPM (Chlorpheniramine Maleate) before surgery. The exposed intestines were cleaned with warm sterile saline, examined for viability, gently repositioned into the abdominal cavity, and the abdominal wall was closed routinely (interlocking suture for muscle and simple interrupted for skin with catgut and silk respectively) under local anaesthesia using 2% lignocaine. Post-operatively, Tetanus toxoid shot was administered. Antibiotic therapy, intravenous fluids, daily antiseptic wound dressing, and assisted colostrum feeding were continued until complete recovery.

6. Recovery and Reflection of Farmer: The owner was advised regarding wound care, hygiene, restricted movement, and regular monitoring during recovery. The calf showed improved activity within 24 hours, normal suckling by the second day, complete wound healing by day 12, and the owner expressed gratitude for saving the calf.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied by treating this case highlighting the importance of early diagnosis, prompt surgical correction, and effective post-operative care in successfully managing congenital intestinal evisceration and saving the life of the calf.



Before Treatment



During Treatment



Recovered animal

APRIL-2026

1962 TEAM – UTTARAKHAND – PAURI GARHWAL



6. ENUCLEATION OF EYE BALL IN CATTLE

Enucleation of the eyeball is a surgical procedure involving the complete removal of a severely damaged, diseased, or non-functional eye when vision cannot be restored or the eye poses a risk of persistent pain or infection. Common indications include severe trauma, ocular neoplasia, uncontrolled infection, glaucoma, or irreparable rupture of the eye ball. Prompt surgical intervention, followed by appropriate antimicrobial therapy and post-operative care, relieves pain, prevents further complications, and promotes uneventful recovery of the animal.

ENUCLEATION OF EYEBALL IN CATTLE

CASE DETAILS:

District : PAURI GARHWAL
MVU : PAURI
Date : 18/04/2026
Case ID : 67351
Call Time : 08:23 AM
Doctor : Dr. SUNIDHI CHAUHAN
DCH : Ms. HIMANI

1. History: A 6-year-old female non-descript cow was presented with a history of a hard tissue growth over the right lower eyelid and a small opening with pus and blood discharge from the upper eyelid for the past three months. Despite initial treatment with topical medication and antibiotics, the animal further injured the affected eye by rubbing against a tethering stake, resulting in severe destruction of the eyeball.

2. Clinical Presentation: On clinical examination, the cow was alert and standing. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within normal physiological limits. The animal exhibited severe damage to the right eye with complete destruction of the ocular structures, visible lens, purulent and blood-stained discharge, and marked pain.

3. Signs and Symptoms: The animal exhibited a firm tissue growth over the right lower eyelid, purulent and blood-stained discharge, complete destruction of the eyeball with exposed lens, pain, and severe injury to the affected eye due to self-trauma.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as severe traumatic destruction of the right eyeball, requiring enucleation of the eyeball (complete removal of eyeball) to relieve pain and prevent further complications.

5. Procedure: The animal was properly restrained and sedated with Inj. Xylazine and Inj. Diazepam. After aseptic preparation of the surgical site, a retro bulbar nerve block was administered using 2% lignocaine. The damaged eyeball and necrotic tissue were removed, hemostasis was achieved by ligating the blood vessels, and permanent tarsorrhaphy was performed using a cross mattress suture pattern. Post-operatively, antibiotic-Inj. Dicrysticin, anti-inflammatory/analgesic-Inj. Meloxicam, and antihistamine -Inj. Chlorpheniramine Maleate were administered along with regular antiseptic wound dressing.

6. Recovery and Reflection of Farmer: The owner was advised regarding antiseptic wound dressing, maintenance of hygiene in the animal shed, tetanus toxoid injection and timely suture removal. The animal recovered uneventfully, and the owner expressed satisfaction with the successful treatment provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were pleased with the timely surgical intervention, proper pain management, and meticulous surgical technique which led to the successful recovery following enucleation of the eyeball.



Before Treatment



During Treatment



Recovered animal

MAY-2026

1962 TEAM - UTTAR PRADESH - DEORIA



7. BENIGN TUMOR IN DOG

Tumor in dogs is an abnormal growth of tissue that may be benign or malignant and can develop in the skin, soft tissues, or internal organs. Affected dogs commonly present with a gradually enlarging swelling, which may become painful, ulcerated, infected, or rupture if left untreated. Advanced cases can lead to bleeding, secondary infections, lameness, reduced appetite, and general weakness, significantly affecting the animal's quality of life. Early diagnosis and timely surgical intervention, supported by appropriate medical management, are essential to prevent complications, promote complete recovery, and improve the prognosis.

SURGICAL TREATMENT OF BENIGN TUMOR IN DOG

CASE DETAILS:

District : DEORIA
MVU : UP32EG4092
Date : 31/05/2026
Case ID : 20260000215510
Call Time : 02:10 PM
Doctor : Dr. PARAS NATH PRAJAPATI
DCH : Mr. UPENDRA CHAUHAN

1. History: A 5-year-old male non-descript dog was presented with a history of swelling below the right knee for the past one year. The owner reported that the swelling had gradually increased in size, recently ruptured, and the dog had stopped eating and drinking for the past six days. The animal had previously received treatment from a local para-veterinarian without improvement.

2. Clinical Presentation: On clinical examination, the dog was depressed and showed difficulty in walking. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within normal physiological limits. A large ruptured tumorous mass infested with maggots was observed below the knee, accompanied by hemorrhage, pain, tenderness on palpation, and severe lameness.

3. Signs and Symptoms: - The animal exhibited a progressively enlarging swelling below the knee, rupture of the tumor with maggot infestation, hemorrhage from the wound, pain and tenderness on palpation, severe lameness, difficulty in walking, and complete loss of appetite for six days.

4. Diagnosis: - Based on the history and clinical examination, the case was tentatively diagnosed as a Benign tumor infected with maggots, requiring immediate surgical intervention to prevent further tissue damage and systemic complications.

5. Procedure / Treatment: - After obtaining the owner's consent, the animal was properly restrained and the surgical site was prepared aseptically using povidone-iodine solution. Inj Atropine was given as pre-anesthetic. Following local anaesthesia with 2% lignocaine and general anaesthesia using Inj. Xylazine, the tumor was surgically excised under aseptic conditions, and the wound was closed with simple interrupted sutures. Post-operatively, antibiotic – Inj. Amoxicillin, anti-inflammatory – Inj. Meloxicam, hemostatic – Inj. Ethamsylate, intravenous fluid therapy – Inj. DNS, and topical povidone-iodine dressing were administered along with regular wound care and follow-up until complete healing.

6. Recovery and Reflection of Farmer: - The owner was advised to maintain wound hygiene, continue medications, and attend follow-up visits. The wound healed satisfactorily without complications, and the dog recovered completely. The owner expressed satisfaction and gratitude for the prompt surgical treatment provided by the veterinary team.

7. Reflection of Veterinary Team: - The Veterinary Officer and MVU staff were satisfied with the timely surgical intervention and successful management of the tumor case, which prevented further complications, promoted complete wound healing, and restored the animal to normal health.



Before Treatment



During Treatment



Recovered animal

MAY-2026

1962 TEAM – ASSAM-CHIRANG



8. LANTANA CAMARA POISONING IN CATTLE

Lantana camara poisoning in cattle is a toxic plant poisoning caused by ingestion of the **Lantana camara** shrub, leading primarily to liver damage and secondary photosensitization. Affected animals commonly exhibit anorexia, ruminal stasis, jaundice, weakness, dehydration, and necrotic skin lesions over exposed areas following sunlight exposure. Since no specific antidote is available, early diagnosis and prompt supportive therapy, along with removal from contaminated grazing areas, are essential to prevent severe complications and ensure recovery.

CLINICAL MANAGEMENT OF LANTANA CAMARA POISONING IN CATTLE

CASE DETAILS:

District : CHIRANG
MVU : STATE VETERINARY DISPENSARY, KASHIKOTA
Date : 14/05/2026
Case ID : 89321
Call Time : 09:23 AM
Doctor : Dr. ARUP JYOTI BHARALI
DCH : Mr. AMIT ROY

1. History: A 10-year-old crossbred cow was presented with a history of reduced feed intake, decreased rumination, progressive weakness, jaundice, and cracked necrotic skin lesions over the body. The owner reported that the animal had grazed in an area heavily infested with Lantana camara for several days before the onset of clinical signs.

2. Clinical Presentation: On clinical examination, the cow was dull and depressed. Mucous membranes were congested and icteric, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The animal exhibited anorexia, ruminal stasis, dehydration, jaundice, dark yellow urine, sloughing of the skin, and dermatitis over exposed body areas.

3. Signs and Symptoms: The animal exhibited loss of appetite, reduced rumination, progressive weakness, dehydration, jaundice, dark yellow urine, ruminal stasis, and necrotic, sloughing skin lesions over exposed areas due to photosensitization.

4. Diagnosis: Based on the history of grazing in Lantana camara-infested areas and the characteristic clinical signs of hepatotoxicity and photosensitization, the case was diagnosed as Lantana camara poisoning.

5. Procedure: The animal was stabilized with intravenous fluid therapy – Dextrose Normal Saline (DNS) and oral activated charcoal to reduce toxin absorption. Supportive treatment included antibiotic – Inj. Intacef, anti-inflammatory – Inj. Meloxicam, antihistamine – Inj. Cadistin (Chlorphenaramine Maleate), hepatoprotective – Inj. Belamyl, B-vitamin – Inj. Tribivet, and ruminal stimulant – Rumentas Bolus. The necrotic skin lesions were cleaned with povidone-iodine, followed by topical antibacterial gel and fly repellent. The animal was kept under shade, provided soft green fodder and adequate water, and grazing in Lantana-infested areas was strictly prohibited during recovery.

6. Recovery and Reflection of Farmer: The owner was advised to avoid grazing the animal in Lantana camara-infested areas and provide adequate shade, clean water, and nutritious fodder during recovery. The cow showed gradual improvement in appetite, rumination, and skin lesions, and the owner expressed gratitude for the timely treatment provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff considered the case a valuable learning experience, highlighting the importance of early diagnosis, prompt supportive therapy, and farmer awareness in the successful management of Lantana camara poisoning.



Before Treatment



During Treatment



After treatment

MAY-2026

1962 TEAM – GUJARAT – GIR SOMNATH



9. SOFT TISSUE AVULSION IN COW

Crocodile attack injury in cattle is a severe traumatic condition characterized by extensive soft tissue damage, deep lacerations, avulsion wounds, and heavy contamination caused by crocodile bites. Affected animals commonly exhibit profuse bleeding, severe pain, excessive salivation, difficulty in eating and drinking, and a high risk of wound infection. Prompt surgical intervention, thorough wound debridement, antimicrobial therapy, and diligent post-operative care are essential to control infection, restore function, and ensure successful recovery of the animal.

SURGICAL MANAGEMENT OF SOFT TISSUE AVULSION FOLLOWING CROCODILE ATTACK IN A COW

CASE DETAILS:

District : GIR SOMNATH
MVU : MVD KHAMBHA GIR
Date : 26/05/2026
Case ID : 5260119
Call Time : 03:00 PM
Doctor : Dr. CHIRAG GONDALIYA
Paravet : Mr. DHAVALBHAI DABSARA

1. History: A 6-year-old female non-descript cow was presented with a history of a severe injury to the lower jaw following a crocodile attack. The owner reported profuse bleeding, extensive soft tissue loss from the rostral mandibular region, excessive salivation, and difficulty in eating and drinking immediately after the incident.

2. Clinical Presentation: On clinical examination, the cow was conscious but in severe pain. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The animal exhibited extensive soft tissue avulsion of the lower jaw, a large contaminated open wound, excessive salivation, difficulty in prehension of feed and water, and a high risk of wound infection.

3. Signs and Symptoms: The animal exhibited profuse bleeding, extensive loss of soft tissue from the lower jaw, excessive salivation, severe pain, difficulty in eating and drinking, and a heavily contaminated open wound following the crocodile attack.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as severe rostral mandibular soft tissue avulsion following a crocodile attack.

5. Procedure: The animal was properly restrained, and the wound was thoroughly cleaned with sterile normal saline and diluted povidone-iodine solution. Devitalized tissue was carefully debrided, followed by surgical reconstruction of the avulsed soft tissues using layered suturing techniques. Post-operatively, antibiotic – Inj. Ceftriaxone, anti-inflammatory – Inj. Meloxicam, antihistamine – Inj. Chlorpheniramine Maleate, B-vitamin – Inj. Neurobion, and Tetanus Toxoid were administered along with daily antiseptic wound dressing, soft fodder feeding, and regular follow-up.

6. Recovery and Reflection of Farmer: The owner was advised to maintain wound hygiene, administer prescribed medications, tetanus toxoid injection and feed soft fodder during recovery. The wound healed progressively with restoration of normal feeding, and the owner expressed gratitude for the prompt treatment and dedicated care provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff considered the case a valuable learning experience, highlighting the importance of prompt surgical intervention, meticulous wound reconstruction, and effective post-operative care in managing severe traumatic injuries caused by wild animal attacks.



Before Treatment



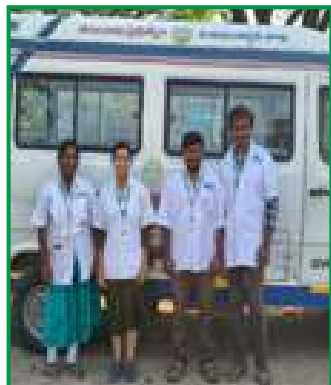
During Treatment



Post-surgery animal

MAY-2026

1962 TEAM – TELANGANA - MAHABUBABAD



10. UTERINE PROLAPSE AT PERIPARTUM WITH DEAD FETUS

Uterine prolapse is a serious obstetrical emergency in which the uterus protrudes through the vulva following parturition or during the periparturient period. It is commonly associated with prolonged labour, dystocia, retained fetus, hypocalcaemia, or excessive straining. Affected animals exhibit a large protruding uterine mass, continuous straining, weakness, and blood-stained discharge. Prompt veterinary intervention through careful cleaning, repositioning of the uterus, and appropriate medical management is essential to prevent shock, infection, tissue damage, and recurrence, ensuring successful recovery of the animal.

UTERINE PROLAPSE AT PERIPARTUM WITH DEAD FETUS IN BUFFALO

CASE DETAILS:

District : MAHABUBABAD
MVU : KOTHAGUDA
Date : 26/05/2026
Case ID : 256689
Call Time : 11:30 AM
Doctor : Dr. NEELIMA
Paravet : Ms. PRAVALLIKA

1. History: A 4-year-old female non-descript buffalo was presented with a history of prolonged labour and uterine prolapse since the previous evening. The owner reported that the animal had conceived through artificial insemination approximately 9½ months earlier, and a large prolapsed uterine mass with a dead fetus was hanging through the vulva. The animal was weak, restless, and continuously straining.

2. Clinical Presentation: On clinical examination, the buffalo was weak and restless. Mucous membranes were pale pink, while respiration rate, pulse rate, capillary refill time, ruminal movements, and rectal temperature were within acceptable physiological limits. The animal exhibited a large oedematous prolapsed uterus with a dead fetus protruding through the vulval region, continuous straining, and blood-stained vaginal discharge.

3. Signs and Symptoms: The animal exhibited prolonged labour, continuous straining, prolapse of the uterus with a dead fetus hanging through the vulva, oedematous uterine tissue, blood-stained vaginal discharge, weakness, and restlessness.

4. Diagnosis: Based on the history, visual examination, and clinical findings, the case was diagnosed as uterine prolapse at peripartum associated with a dead fetus.

5. Procedure: After successful evacuation of the dead fetus, the prolapsed uterus was thoroughly cleaned with lukewarm water and potassium permanganate (KMnO₄) solution. Sugar solution and sugar powder were applied to reduce edema, following which the uterus was gently repositioned into the pelvic cavity. A rope truss was applied to prevent recurrence. Post-operatively, antibiotic – Inj. XCeft, anti-inflammatory – Inj. Melonex, B-vitamin – Inj. B-Complex, sedative – Inj. Sequil, followed by Inj. Intacef and oral calcium supplementation were administered to support recovery and prevent uterine infection.

6. Recovery and Reflection of Farmer: The owner was advised to keep the animal in a clean, dry environment, provide balanced nutrition, and follow the prescribed treatment schedule. The uterus remained successfully retained, straining subsided, and the buffalo recovered gradually. The owner expressed satisfaction with the timely treatment provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely intervention and successful management of the uterine prolapse case, which ensured complete recovery of the buffalo and prevented recurrence.



Before Treatment



During Treatment – Dead fetus



After Treatment

MAY-2026

1962 TEAM – UTTARAKHAND - CHAMOLI



11. DYSTOCIA IN CATTLE

Dystocia is a condition of difficult or prolonged parturition in which the animal is unable to deliver the fetus naturally due to fetal malpresentation, abnormal posture or position, fetal oversize, or maternal causes. Affected animals exhibit prolonged straining, restlessness, reduced feed intake, and failure to deliver the calf. Prompt veterinary intervention through obstetrical correction or assisted delivery is essential to prevent complications and ensure the survival of both the dam and the calf.

DYSTOCIA IN CATTLE

CASE DETAILS:

District : CHAMOLI
MVU : DEWAL
Date : 06/05/2026
Case ID : 80853
Call Time : 10:21 AM
Doctor : Dr. ABHISHEK
Paravet : Mr. KAILASH CHANDRA

1. History: A 7-year-old female non-descript cow was presented with a history of prolonged straining since the previous evening after completing the gestation period. The owner also reported reduced feed intake, and the animal was unable to deliver the calf naturally.

2. Clinical Presentation: On clinical examination, the cow was in distress but standing. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, ruminal movements, and rectal temperature were within acceptable physiological limits. The animal exhibited prolonged straining, reduced feed intake, and failure to deliver the fetus.

3. Signs and Symptoms: The animal exhibited prolonged straining, reduced feed intake, and inability to deliver the fetus. Per-vaginal examination revealed transverse fetal presentation with dorsal right cephalo-iliac position and shoulder flexion, resulting in obstructed parturition.

4. Diagnosis: Based on the per-vaginal and per-rectal examination, the case was diagnosed as dystocia due to transverse fetal presentation with dorsal right cephalo-iliac position and shoulder flexion.

5. Procedure / Treatment: The animal was properly restrained, and the fetal presentation, position, and posture were corrected by repulsion and manual manipulation. The birth canal was lubricated with liquid paraffin, and the live calf was delivered by controlled manual traction and the umbilical cord was disinfected with Tincture Iodine solution. Post-operatively, antibiotic – Inj. Ampicillin, anti-inflammatory – Inj. Meloxicam, antihistamine – Inj. Chlorpheniramine Maleate, multivitamin – Inj. Tribivet, and uterine lavage with diluted povidone-iodine in metronidazole were administered.

6. Recovery and Reflection of Farmer: The owner was advised to provide jaggery and rice to the cow and ensure colostrum feeding to the newborn calf within 1–2 hours of birth. The cow recovered uneventfully, and the owner expressed gratitude for the timely intervention by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely intervention and successful management of the dystocia case, which ensured the safe delivery of the live calf and complete recovery of the cow.



Before Treatment



During Treatment



Recovered animal

MAY-2026

1962 TEAM – JHARKHAND - PAKUR



12. UREA POISONING IN GOAT

Urea poisoning is an acute metabolic disorder that occurs when ruminants consume excessive amounts of urea or other non-protein nitrogen (NPN) compounds, leading to rapid ammonia production in the rumen. Excess ammonia is absorbed into the bloodstream, causing nervous, respiratory, digestive, and cardiovascular disturbances. Affected animals commonly exhibit restlessness, abdominal pain, frothing, salivation, bloat, dyspnoea, and muscle tremors. Prompt treatment with oral vinegar, fluid therapy, and supportive care is essential to neutralize ruminal ammonia and ensure successful recovery.

CLINICAL MANAGEMENT OF UREA POISONING IN GOAT

CASE DETAILS:

District : PAKUR
MVU : PAKUR SVH
Date : 21/05/2026
Case ID : 20260000369212
Call Time : 10:01 AM
Doctor : Dr. APRAJITA KUMARI
Paravet : Md. AASH MOHAMMAD

1. History: A 5-month-old male Beetal goat was presented with a history of accidental consumption of urea fertilizer approximately three hours before the onset of clinical signs. Soon after ingestion, the animal developed signs of acute toxicity such as frothing, excessive salivation, bloat and was brought for emergency treatment.

2. Clinical Presentation: On clinical examination, the goat was dull and depressed with dark red mucous membranes. Respiration rate, pulse rate, capillary refill time, and rectal temperature indicated systemic distress. The animal exhibited restlessness, abdominal pain, frequent urination, teeth grinding, frothing and salivation, dyspnea, and bloat, consistent with acute urea poisoning.

3. Signs and Symptoms: The animal exhibited restlessness, abdominal pain, dullness, depression, frequent urination, teeth grinding, frothing, excessive salivation, dyspnoea, bloat, elevated body temperature, tachycardia, and increased respiratory rate.

4. Diagnosis: Based on the recent history of urea fertilizer ingestion and the characteristic clinical signs, the case was diagnosed as acute urea poisoning.

5. Procedure: The goat was immediately treated with oral vinegar (400 ml) and cold water (1 litre) to reduce ruminal ammonia absorption, followed by intravenous normal saline for fluid therapy. Supportive treatment included anti-inflammatory – Inj. Meloxicam and B-vitamin – Inj. B-Complex. The owner was advised to continue supportive medication and prevent future access to urea-containing fertilizers through proper storage and management.

6. Recovery and Reflection of Farmer: The owner was advised to continue the prescribed medications and provide adequate feed and water while preventing further access to urea-containing substances. The goat recovered completely following timely treatment, and the owner expressed gratitude for the prompt veterinary intervention and regular follow-up.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely diagnosis and successful management of the urea poisoning case, which prevented life-threatening complications and ensured complete recovery of the goat.



Before Treatment



During Treatment



After treatment

JUNE-2026

1962 TEAM – UTTARAKHAND – PITHORAGARH



13. NERVOUS FORM OF KETOSIS IN CATTLE

Nervous ketosis in cattle is a metabolic disorder that occurs primarily in high-producing dairy cows during early lactation due to a severe negative energy balance, resulting in excessive ketone body accumulation. Affected animals exhibit characteristic neurological signs such as abnormal licking, excessive salivation, aimless wandering, head pressing, hyperesthesia, incoordination, aggression, or apparent blindness, along with reduced appetite and decreased milk production. Prompt diagnosis and treatment with glucose therapy and correction of the underlying energy deficiency are essential for rapid recovery and prevention of economic losses

CLINICAL MANAGEMENT OF NERVOUS FORM OF KETOSIS IN CATTLE

CASE DETAILS:

District : PITHORAGARH
MVU : GANGOLIHAT
Date : 20/06/2026
Case ID : 112101
Call Time : 14:18 PM
Doctor : Dr. DEEPAK
Paravet : Mr. SAGAR

1. History: A 7-year-old female non-descript cow was presented with a history of recent parturition (15 days earlier), followed by recumbency with all four limbs extended, head tremors, and reduced appetite. The owner reported that the animal had been milked 2–3 hours before the onset of clinical signs, following which the condition rapidly deteriorated.

2. Clinical Presentation: On clinical examination, the cow was recumbent with all four limbs extended and exhibited head tremors. Mucous membranes were pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The animal showed reduced appetite, neurological abnormalities, and signs suggestive of a metabolic disorder following recent calving.

3. Signs and Symptoms: The animal exhibited recumbency with extended limbs, head tremors, reduced appetite, apparent blindness, and an acetone-like odour in the breath and urine following recent parturition. These characteristic neurological signs indicated the nervous form of ketosis.

4. Diagnosis: Based on the recent history of parturition, characteristic neurological signs, reduced appetite, and the presence of an acetone-like odour in the breath and urine, the case was diagnosed as Nervous Ketosis.

5. Procedure: The animal was immediately stabilized with intravenous fluid therapy and correction of the energy deficit. Treatment included anti-inflammatory – Inj. Meloxicam + Paracetamol, intravenous fluids – Normal Saline, Dextrose 25%, Dextrose Normal Saline, and Mifex infusion, along with metabolic support – Inj. Sodium Acid Phosphate, B-vitamin – Inj. Tribivet, and calcium supplementation – Inj. Nycal (Calcium Gluconate). Supportive therapy was continued for five days with close monitoring of the animal's neurological status.

6. Recovery and Reflection of caller: The owner was advised to provide jaggery water mixed with carom seeds (ajwain) as supportive nutritional therapy. The animal showed disappearance of apparent blindness by the fourth day and made a complete recovery by the fifth day. The owner expressed gratitude to the 1962 veterinary team for saving the animal.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely diagnosis and successful management of the nervous ketosis case, which resulted in rapid recovery of the animal and prevented further metabolic and neurological complications.



Before treatment



During Treatment



Recovered animal

JUNE-2026

1962 TEAM – GUJARAT – AHMEDABAD



14. TRAUMATIC WOUND IN CATTLE

Traumatic wound is an injury caused by external physical forces such as accidents, sharp objects, animal attacks, or blunt trauma, resulting in damage to the skin and underlying tissues. Severe wounds may involve profuse bleeding, muscle rupture, exposure of bone, pain, lameness, and a high risk of infection. Prompt veterinary intervention through wound cleaning, debridement, hemorrhage control, suturing, antimicrobial therapy, and proper post-operative care is essential to promote healing, prevent complications, and restore normal function.

SURGICAL MANAGEMENT OF TRAUMATIC WOUND IN CATTLE

CASE DETAILS:

District : AHMEDABAD
MVU : MVD VAUTHA
Date : 11/04/2026
Case ID : 2026000272584
Call Time : 03:50 PM
Doctor : Dr. AMIT SOLANKI
Paravet : Mr. JAGADISHBHAI DABHI

1. History: A 6-year-old female non-descript cow was presented with a severe traumatic injury over the hip region. The owner reported sudden onset of lameness accompanied by profuse bleeding and extensive tissue damage. The animal was unable to bear weight normally and showed signs of pain and distress.

2. Clinical Presentation: On clinical examination, the cow was in pain and distress. Mucous membranes were pale pink, while respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The animal exhibited a severe open wound over the hip region with active bleeding, extensive swelling, rupture of surrounding muscles, exposure of the hip bone, and difficulty in standing and walking.

3. Signs and Symptoms: The animal exhibited severe lameness, profuse bleeding, an extensive open wound over the hip region, swelling, rupture of surrounding muscle tissue, exposure of the hip bone through the skin, pain, and difficulty in standing and walking.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as a severe traumatic open wound of the hip region.

5. Procedure: The animal was properly restrained and sedated using Inj. Xylazine. The affected area was clipped, prepared aseptically, and the wound was thoroughly cleaned with normal saline and antiseptic solution. Devitalized tissue was debrided, bleeding was controlled, and the ruptured muscles were repositioned. The wound edges were sutured under aseptic conditions and dressed with antiseptic medication. Post-operatively, antibiotic – Inj. Enrofloxacin, anti-inflammatory – Inj. Tolfenamic Acid, haemostatic – Inj. Ethamsylate, B-vitamin – Inj. Neurobion, along with daily antiseptic wound dressing and fly repellent application, were administered.

6. Recovery and Reflection of Farmer: The owner was advised to perform regular wound dressing, administer the prescribed medications, tetanus toxoid injection, restrict the animal's movement, and maintain fly control until complete healing. The wound healed progressively without major complications, and the owner expressed gratitude for the timely emergency treatment and guidance provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the timely intervention and successful management of the severe traumatic wound, which controlled hemorrhage, prevented infection, and promoted satisfactory healing and recovery of the animal.



Before Treatment



During Treatment



Wound closure

JUNE-2026

1962 TEAM – TAMIL NADU - TIRUPUR



15. UTERINE PROLAPSE IN PARTURIENT GOAT

Uterine prolapse in goats is a serious obstetrical emergency in which the uterus protrudes through the vulva immediately after kidding due to poor uterine tone, prolonged straining, hypocalcaemia, or difficult parturition. Affected animals commonly exhibit a large oedematous uterine mass, pain, straining, and contamination of the exposed tissue. Prompt veterinary intervention through cleaning, repositioning of the uterus, retention sutures, and appropriate medical therapy is essential to prevent infection, shock, recurrence, and ensure successful recovery.

MANAGEMENT OF UTERINE PROLAPSE IN PARTURIENT GOAT

CASE DETAILS:

District : TIRUPUR
MVU : TIRUPUR
Date : 18/06/2026
Case ID : 261804
Call Time : 02:30 PM
Doctor : Dr. SHANNITHIYA
Paravet : Mr. VIGNESH K

1. History / Anamnesis: A 10-year-old female non-descript goat was presented with a history of kidding earlier in the day, after which a large reddish mass was observed protruding through the vulva. The owner reported that the prolapse occurred approximately three hours after parturition.

2. Clinical Presentation: On clinical examination, the goat was alert with pink mucous membranes. Respiration rate, pulse rate, capillary refill time, and rectal temperature were within acceptable physiological limits. The prolapsed uterus was swollen, oedematous, contaminated with dung, and exhibited prominent caruncles. The vaginal wall was tense, thickened, and oedematous.

3. Signs and Symptoms: The animal exhibited complete uterine prolapse through the vulva, swelling and oedema of the prolapsed uterus, contamination with dung, prominent uterine caruncles, thickened vaginal wall, and absence of ruminal movements.

4. Diagnosis: Based on the history and clinical examination, the case was diagnosed as fourth-degree uterine prolapse in a parturient goat.

5. Procedure / Treatment: The goat was administered epidural anaesthesia using 2% lignocaine. The prolapsed uterus was gently cleaned with lukewarm saline followed by potassium permanganate solution, lubricated, and carefully repositioned into its normal anatomical position. A Buhner suture was applied to retain the uterus and prevent recurrence. Post-operatively, antihistamine – Inj. CPM, anti-inflammatory – Inj. Meloxicam, antibiotic – Inj. Oxytetracycline LA, B-vitamin – Inj. Tribivet, and intravenous DNS were administered as per the standard treatment protocol. The retention suture was removed on the seventh day.

6. Recovery and Reflection of Farmer: The owner was advised to apply antiseptic ointment to the vulvar suture line, administer oral calcium supplementation, provide a laxative diet, restrict excessive movement, and keep the animal in a clean, dry, and well-ventilated environment. The uterus remained successfully retained, the goat recovered uneventfully, and the owner expressed satisfaction with the prompt treatment and regular follow-up provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff considered the case a valuable learning experience, highlighting the importance of prompt uterine replacement, strict aseptic technique, and appropriate post-operative care in achieving successful recovery and preventing recurrence of uterine prolapse.



Before Treatment



During Treatment



Recovered animal

JUNE-2026

1962 TEAM – TELANGANA - MAHABUBABAD



16. INCISED WOUND IN CATTLE

Incised wound in cattle is a traumatic soft tissue injury caused by a sharp object, resulting in a deep incised wound with profuse bleeding, tissue damage, and severe pain. Affected animals commonly exhibit an open wound, active hemorrhage, restlessness, and discomfort. Prompt veterinary intervention through hemorrhage control, thorough wound cleansing, aseptic surgical suturing, and appropriate medical therapy is essential to prevent infection, promote rapid wound healing, and ensure complete recovery.

SURGICAL MANAGEMENT OF AXE INDUCED WOUND IN CATTLE

CASE DETAILS:

District : MAHABUBABAD
MVU : KOTHAGUDA
Date : 01/06/2026
Case ID : 266618
Call Time : 02:00 PM
Doctor : Dr. NEELIMA
Paravet : Ms. PRAVALLIKA

1. History: A 7-year-old female non-descript cow was presented with a history of an axe injury inflicted by an unknown person. The owner reported a fresh open wound measuring approximately 5–6 inches in length with active bleeding. The animal was in pain, restless, and had no previous history of illness.

2. Clinical Presentation: On clinical examination, the cow was restless and in pain. Mucous membranes were pinkish, while respiration rate, pulse rate, capillary refill time, ruminal movements, and rectal temperature were within acceptable physiological limits. A deep open incised wound with active bleeding, local tissue damage, and pain on palpation was observed.

3. Signs and Symptoms: The animal exhibited a fresh incised wound with active bleeding, local tissue damage, pain on palpation, restlessness, and discomfort following the axe injury.

4. Diagnosis: Based on the history of axe injury and clinical examination, the case was diagnosed as a deep incised wound with soft tissue injury.

5. Procedure: The animal was properly restrained, and the wound was thoroughly cleaned with normal saline and povidone-iodine solution. Local infiltration of 2% lignocaine was administered around the wound margins, followed by closure of the deeper muscle layer using polyglactin 910 (Vicryl) in a simple continuous pattern. The skin was sutured with non-absorbable nylon using a horizontal mattress pattern, and antiseptic dressing was applied. Post-operatively, antibiotic – Inj. Procaine Penicillin, anti-inflammatory – Inj. Melonex, antihistamine – Inj. Cadistin, and B-vitamin – Inj. B-Complex were administered.

6. Recovery and Reflection of Farmer: The owner was advised to keep the animal in a clean, dry shed, perform daily wound dressing, restrict excessive movement, prevent contamination of the wound, and administer the prescribed medications along with tetanus toxoid injection. The wound healed successfully, the animal made a complete recovery, and the owner expressed relief and satisfaction with the treatment provided by the veterinary team.

7. Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with the successful outcome of the case, highlighting the importance of prompt wound management, meticulous aseptic suturing, and appropriate post-operative care in preventing infection and ensuring successful healing of severe incised wounds.



Before Treatment



During Treatment



Recovered animal

JUNE-2026

1962 TEAM – TELANGANA - RAJANNA SIRICILLA



17. UTERINE PROLAPSE IN BUFFALO

Uterine prolapse in buffalo is a life-threatening post-partum reproductive emergency in which the uterus protrudes through the vulva due to poor uterine tone, prolonged straining, hypocalcaemia, or difficult calving. Affected animals commonly exhibit a large oedematous uterine mass, weakness, continuous straining, and anorexia. Prompt veterinary intervention through reduction of oedema, repositioning of the uterus, and appropriate medical therapy is essential to prevent infection, shock, recurrence, and ensure complete recovery.

MANAGEMENT OF UTERINE PROLAPSE IN BUFFALO

CASE DETAILS:

District : RAJANNA SIRICILLA
MVU : VEMULAWADA
Date : 09/06/2026
Case ID : 278259
Call Time : 10:00 AM
Doctor : Dr. PREMCHAND
Paravet : Mr. MANISAI

1. History / Anamnesis: A 5-year-old female non-descript buffalo was presented with a history of a reddish mass protruding from the vulva for the past two days following calving. The owner reported that the animal had been off feed, weak, and continuously straining. Clinical examination revealed a complete uterine prolapse with an enlarged, edematous uterus hanging outside the vulva.

2. Clinical Presentation: On clinical examination, the buffalo was dull, weak, and unable to stand due to severe straining. Mucous membranes were pink, while respiration rate (28 breaths/min), pulse rate (50 beats/min), capillary refill time (2 seconds), ruminal movements (2 contractions/min), and rectal temperature (101°F) were within acceptable physiological limits. A complete prolapse of the uterus with marked edema and contamination of the exposed tissue was observed.

3. Signs and Symptoms: The buffalo exhibited a complete prolapse of the uterus through the vulva, severe straining, enlarged edematous uterine mass, weakness, dullness, anorexia, and inability to stand comfortably.

4. Diagnosis: - Based on the history, clinical signs, and visual examination of the protruding treatment uterine mass, the case was diagnosed as complete uterine prolapse (post-partum uterine prolapse).

5.Procedure / Treatment: The animal was properly restrained, and the prolapsed uterus was thoroughly washed with clean water to remove dirt and contaminants. Concentrated sugar solution was applied over the edematous uterine tissue to reduce swelling, following which the uterus was gently repositioned into the pelvic cavity using adequate lubrication and aseptic precautions. Post-replacement, Inj. Dicrysticin, Inj. Melonex, Inj. Avil, and Inj. Tonophan were administered intramuscularly. The owner was advised to provide calcium supplementation, maintain the animal in a clean environment, and monitor closely for recurrence or complications.

6.Recovery and Reflection of Farmer: The buffalo recovered successfully without recurrence following treatment. The owner was satisfied with the timely veterinary intervention and expressed gratitude to the 1962 veterinary team for saving the animal.

7.Reflection of Veterinary Team: The Veterinary Officer and MVU staff were satisfied with Recovered animal the successful management of the case, which reinforced the importance of prompt correction, proper uterine replacement, and appropriate post-treatment care in achieving complete recovery.



Before Treatment

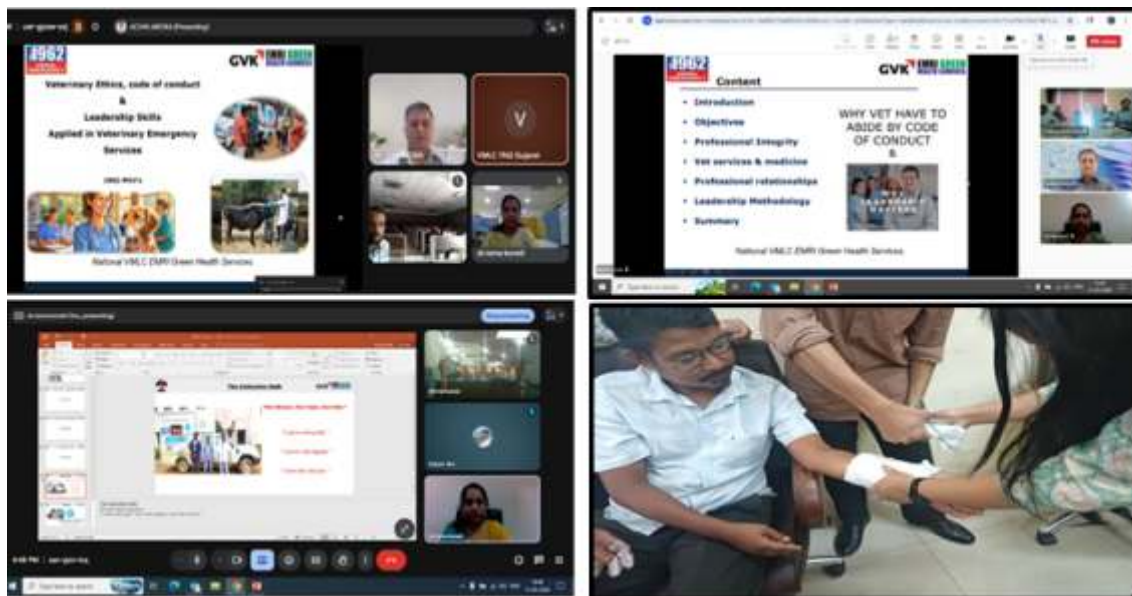


During Treatment

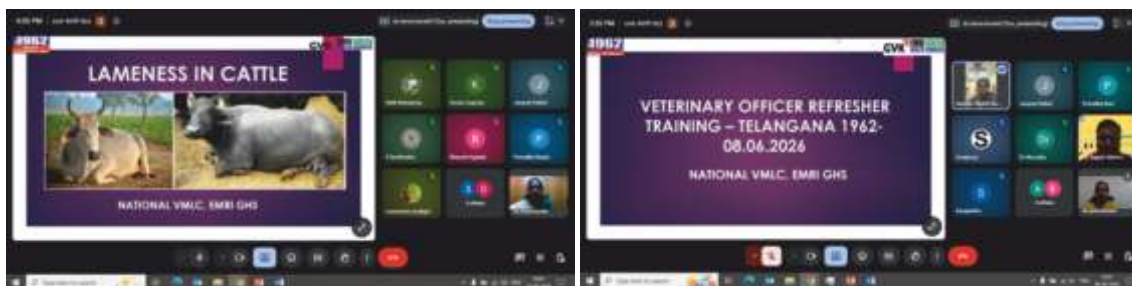


Recovered animal

Foundation Training-53 Veterinary Officers from Tamil Nadu, Uttar Pradesh, Uttarakhand, Gujarat, Telangana & Assam 1962 States

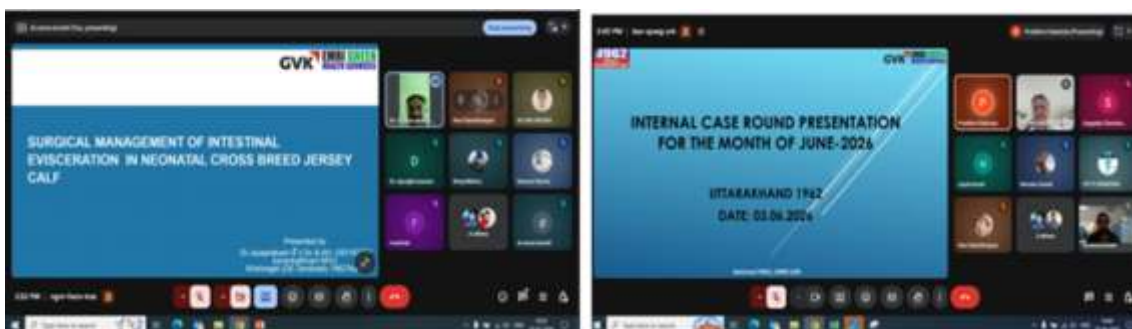


Refresher Training (Virtual Mode) for Veterinary Officers, Para Vets, VROs & Pilots–Quarter – 1 (April - June 2026)



Capacity Building of 40 Veterinary Officers, 76 Para vets 101 Pilots & 22 VROs from Assam, Uttarakhand, Telangana, Jharkhand & Tamil Nadu

Internal case round presentation by EMRI GHS TOTs of all the 1962 operating states during the Quarter – 1 (April - June 2026)



VMLC – MONTHLY ANIMAL HEALTH CAMPS DURING Q1 FY 2026-27



Total Animal Health Camps Conducted till June 2026 - 38 Camps.
Camps Conducted in this Quarter - 03 (96 Animals Treated)

NATIONAL SAVIOUR AWARDS DURING NRM – 23rd APRIL 2026



MEDIA COVERAGE DURING THE QUARTER 1 (APRIL - JUNE 2026)



Glimpses of various activities by 1962 operating states during Q1 FY 2026-27



5 lakh treatments milestone – Uttarakhand 1962

Brucella awareness program for Agricultural students – Uttar Pradesh 1962



Vet Sangam on World Veterinary Day 2026 – Gujarat 1962



Mastitis awareness program – Gujarat 1962

6 years for MVD project, Gujarat 1962



EMRI GHS 1962 stall at "KRISHI VYAPAR MELA" - JHARKHAND 1962

DID YOU KNOW? BEYOND THE BITE: THE SCIENCE OF SNAKE VENOM



Snake venom is not a single poison but a sophisticated cocktail of enzymes, proteins, and toxins that affect different body systems. Some venoms attack the nervous system, while others destroy blood cells, blood vessels, muscles, and surrounding tissues. This diversity explains why snakebite cases in animals can range from mild swelling to life-threatening paralysis or severe bleeding. Although venom is dangerous, scientists have transformed some of its components into life-saving medicines for treating cardiovascular diseases, highlighting how nature's deadliest toxins can also become valuable therapeutic tools.



*With a motto of healing the animal ailments and
strengthening the livestock health*

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