



Guidance Document

Draft for Consultation

Meat Code of Practice

Post-Mortem Examination

Title

Guidance Document: Meat Code of Practice

About this document

Related Requirements

Change history

Previous Version Date	Current Version Date	Section Changed	Change(s) Description

Contact Details

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1 Purpose

This purpose of this document is to detail procedures or tests to be performed by a competent person on all relevant parts of slaughtered or killed large mammals and ostrich/emus with the aim of obtaining a judgement and disposition that considers safety and suitability for the intended purpose.

2 Background

3 Definitions

Approved Laboratory: a LAS laboratory (see the MPI website, www.mpi.govt.nz); and laboratories approved by the Director General.

Batch examination: the examination of tissues that have been placed in a lot before examination and where the identity of the individual animal from which the tissue was obtained can no longer be established.

Examination : a set of procedures to determine whether product or byproduct is fit for intended purpose.

Examination Service Provider: the provider of mandatory AM and PM examination service to the operator where the operator decides to outsource examination activities rather than provide them themselves. In some situations, this service may be provided in part by the operator. The delivery of this service must be in accordance with MPI and where applicable, OMAR requirements.

Incision: making one or more repeated parallel cuts according to the particular tissue, e.g. lymph node or muscle and then viewing each cut surface, consistent with adequate examination.

Palpation: the application of tactile pressure sufficient to detect lesions within the tissue.

PM examiner: a person recognised under the Animal Products Act 1999 for that function, or is an official assessor, or an animal product officer appointed under Part 7 of the Act.

SPVD: specified for veterinary disposition. These animals are usually designated as a suspect.

Suspect: an animal or line of animals that displays symptoms or is suspected of having diseases or defects that may affect the suitability for processing, or the manner of processing of the animal. This may be because the suspected diseases or defects may affect disposition or because of the risk of contamination. This may include, but is not limited to:

- animals with clinical disease;
- Tb reactors;
- animals with declarations of disease by veterinary clinicians or farmers;
- animals from chemical residue or disease surveillance lists.
- animals covered by a supplier statement indicating an uncertain animal suitability status.

Systemic disease: one which affects the body generally, usually through arterial spread.

View: to make such observations as are essential to determine the presence, character and extent of any condition that might have a bearing on the disposition of a carcass or any of its parts.

4 Mandatory requirements

4.1 HC Specs 25 Competency

An operator's risk management programme must make provision, where appropriate, for the following:

- a) persons responsible for the AM and PM examination of mammals must meet the competency specification set out in Schedule 3 for AM and PM examiners and must be an accredited person, an official assessor or an animal product officer.

4.2 HC Specs 26 Skills maintenance and supervision

The operator must ensure that the skills of those persons involved in key tasks that could have a significant impact on the suitability for processing of animal material or the fitness for intended purpose of animal product, or who are required to carry out the activities listed in clause 25, are maintained on an ongoing basis.

The operator must keep records demonstrating that skills identification, achievement and maintenance is being carried out effectively.

Trainee AM and PM examiners may carry out AM or PM examinations as the case may be provided they are under the direct supervision of a person who meets the competency requirements of clause 25(1)(a) and who is accountable for the decisions that are made.

4.3 HC Spec 75 PM examination

Only animal material that has been examined in accordance with any relevant post-mortem regulations and specifications may be released from the final primary processor.

4.4 HC Spec 82 PM examination

Only animal material that has been examined in accordance with any relevant post-mortem regulations and specifications may be released from the final primary processor.

4.5 HC Spec 89 PM examination

Only animal material that has been examined in accordance with any relevant post-mortem regulations and specifications may be released from the final primary processor.

4.6 HC Spec 97 PM examination

Only animal material that has been examined in accordance with any relevant post-mortem regulations and specifications may be released from the final primary processor.

4.7 HC Spec Schedule 3 Competency specifications

AM and PM examiners of mammals

AM and PM examiners must hold one of the qualifications listed below. The qualifications held may be species specific. Also, it is not necessary for PM examiners to hold qualifications for AM examination:

- a) National Certificate in Meat Inspection Services, Registered by the New Zealand Qualifications Authority (NZQA);
- b) Certificate of Meat inspection, issued by the Director, Meat Division, MAF;
- c) Certificate of Competency for meat inspection issued by MAF Quality Management;
- d) Qualification in Meat inspection issued by the Australian Quarantine and Inspection Service (AQIS);
- e) Registration as a veterinarian under the Veterinarians Act 1994;
- f) An alternative qualification accepted by the Director-General.

For the National Certificate in Meat inspection Services described in clause (1)(a), an AM examiner must hold the Optional Advanced Meat Inspection Service Strand of that Certificate for the same species as the PM qualification.

Any person applying to be accredited to perform AM or PM examinations must have knowledge of all relevant specifications.

4.8 Animal Products Notice Export Requirement: Company Ante-Mortem and Post-Mortem Inspection

General Competencies

A company ante-mortem or post-mortem examiner must have knowledge of the relevant market access requirements and specifications and to the extent relevant to a company ante-mortem or post-mortem inspectors activities, the training programme must enable a company ante-mortem or post-mortem inspector to demonstrate an understanding of the Act, including;

- a) the object of the Act; and
- b) the role, responsibilities, and duties of inspection agency; and
- c) the role of MPI in respect of administering the Act at meat plants; and
- d) the relevant regulations, export requirements, notices and specifications made under the Act.

4.9 Animal Products Notice Ante-mortem and Post-mortem Examination of Mammals, Ostriches and Emu Intended for Human Consumption

The post-mortem examination must be conducted so as to minimise cross-contamination between carcasses and in accordance with the procedures described in the Post-mortem Examination Procedures. In addition, the post-mortem examiner must undertake additional incisions, examinations and sampling if necessary to determine the presence, character and extent of any condition that may affect the fitness for intended purpose of the resulting animal product.

4.10 Animal Products Notice Ante-mortem and Post-mortem Examination of Mammals, Ostriches and Emu Intended for Human Consumption

Specific Examination Requirements

If, under section 81 of the Act, the Director-General gives directions to the operator that certain kinds of animal material must be subjected to examination procedures that differ from those specified in the Post-mortem Examination Procedures, the operator must ensure that the post-mortem examiner is notified of the directions and the post-mortem examiner must comply with those directions.

5 General Procedures

PM examination procedures are to be applied as appropriate, to carcasses, heads and viscera so that a judgement can be made as to their fitness for intended purpose. Cross-contamination of the product, must be minimised.

PM examination can include sampling.

5.1 Ante-Mortem (AM) Examination

Animals must have been subjected to AM examination before receiving PM examination and evidence of this must be available. Information relating to the status of the animal must be provided to the PM examiner as appropriate prior to him/her performing PM examination, including whether the animal is:

- a suspect animal (together with the reasons for being suspect);
- a Tb reactor;
- on a chemical residue list;
- Johnes vaccinated;
- on a disease surveillance suspect list;
- subject to any other relevant issues described on the animal status declaration (ASD) form.

Killed wild mammals including game estate and farmed-gone-feral animals, do not require AM examination.

5.2 PM Examination Requirements

Animal products must be examined according to the procedures provided in section 6. The PM examiner is authorised to make such incisions and examinations that are necessary to determine fitness for intended purpose. The PM examiner must indicate all defects that need to be addressed and re-examined. If this is not practical, a system must be put in place indicating what (re-) examination procedures are required, e.g. re-examination of the whole carcass.

5.3 Re-examination

Once the disease or defect has been removed, re-examination by a PM examiner or competent detain personnel must occur. The re-examination only needs to apply to the defect identified.

In some cases, suitable ancillary areas may be used instead of addressing the defects on the main chain or the retain rail.

Product may be retained for an extended period of time before the disposition to allow specific tests to be carried out. If extended retain is necessary prior to disposition, the operator must provide suitable facilities from a security and preservation perspective, as appropriate to the product and potential dispositions.

5.4 Documentation and Approval of Examination Procedures

5.4.1 Examination Service Providers

Examination service providers must have a quality system, acceptable to the D-G, which can reliably deliver:

- performance targets;
- statistical process control;
- ongoing examiner competency; and
- examination in a manner that minimises re-distribution and contamination.

5.4.2 Operator's own examination system

Where the operator carries out PM examination, the system must be documented in the risk management programme and the requirements in section 5.4.1 above would apply.

5.4.3 Details of examination

The examination service provider must document the details of examination as relevant to the premises. These details will include:

- notification of suspect animals;
- the sequence(s) of examination procedures;
- any specific examination procedures relating to overseas market access requirements;
- methods of communication between PM examiners;
- methods of communication between AM and PM examiners;
- confirmation of the AM status of animals to the PM examiners;
- handling of increased workload due to a high prevalence of diseases or defects;
- the frequency of hand-washing, knife-sterilising and other hygiene measures of meat examiners;
- methods of identification of diseases and defects for trimming, retain and re-examination purposes;
- the collection and dispatch of diseases and defects information (refer to 5.5 The Provision of Disease and Defect Information);
- the use of suitable ancillary areas;
- procedures for product that is retained for extended periods (i.e. retained product not covered by main chain, retain rail and ancillary areas procedures);
- batch examination systems;
- a monitoring system to ensure performance targets are met;
- a system that ensures all relieving examiners are familiar with and competent in all local procedures (on and off chain) together with records to substantiate this competency.

5.5 The Provision of Disease and Defect Information

The results of PM examination must be recorded and submitted to MPI. The details must include:

- the type of disease and defect identified at examination;
- the prevalence of each disease and defect type;

- the number of carcasses condemned for each disease and defect type; and
- the volume of kill to which the information relates.
- The information must be supplied in the manner required by the D-G e.g. date, species, premises.

5.6 Monitoring PM Examination Performance

The Operator or Inspection Agency managing persons undertaking post-mortem activities must document procedures to monitor the performance of the post mortem examiners

5.7 Unusual lesions

5.7.1 Suspect Animals

- Follow specific instructions from ante-mortem examiner
- Incise lymph nodes.
- Tb sampling procedures must be followed where suspected Tb lesions are identified.

5.7.2 Injection-Site Lesion Sampling

- Implement the procedure for Injection Site Lesions found at PM examination.

5.7.3 Tissues Missing at Examination

- Implement the procedure for missing tissues where that tissue is required to be examined.

5.7.4 Suspected Hydatids

- Implement the procedure for suspected hydatid cysts.

6 Species-specific PM Examination Procedures

6.1 Sheep and goat PM procedures

Sheep/Goats and Lambs NZ Option 1	Sheep/Goats and Lambs NZ Option 2	Sheep/Goats and Lambs NZ Option 3
Carcass PM examination procedures	Carcass PM examination procedures	
View and palpate external surfaces, joints (other than hocks). View hocks. View the front of the hind legs. Palpate popliteal lymph nodes. View axillae. Palpate superficial cervical lymph nodes (formerly prescapular lymph node). View and palpate the back of the carcass. View ventral surface of the abdomen. View the sternum (brisket). View the forelegs. View the neck. Palpate the neck in adult animals and Johne's vaccinated stock.	View external surfaces including the: • Joints of the hind legs, and popliteal area • Back of the carcass • Forelegs and their joints • Shoulders and superficial cervical area and neck Palpate the neck in adult animals and Johne's vaccinated stock	
	Option 2: Lift the forelegs to check that the forequarters are free of visible contamination.	Option 3: Note: lifting of forelegs is not required by PM examiner. It is a company responsibility to ensure the forequarters are free from visible contamination.
	It is a company responsibility to ensure contamination is identified and trimmed off, either by: company personnel, or the inspection service on behalf of the company, but not as part of the post mortem examination procedures. It is the company's responsibility to arrange this with the inspection service.	
View the rectal cavity. Palpate ischiatic lymph nodes.	View ischiatic area and rectal cavity.	
View pelvic cavity and iliac lymph nodes.	View pelvic cavity and iliac lymph nodes.	
View and palpate the superficial inguinal or supramammary lymph nodes. View and palpate the subiliac lymph nodes (formerly precrural lymph node).	View superficial inguinal / supramammary lymph nodes and subiliac lymph nodes (when present). Palpate the popliteal and superficial cervical lymph nodes (when present) in adult stock.	
View and palpate abdominal and thoracic cavities.	View abdominal cavity and palpate ventro-lateral abdominal wall. View thoracic cavity & remnants of diaphragm.	
View and palpate the diaphragm (if present).	View and palpate the diaphragm on viscera table.	
Sheep/Goats and Lambs NZ – (All options)		
Tissue	Saved for human consumption as food (edible)	Not saved for human consumption as food (Inedible)
HEAD		
Head	View buccal cavity and pharynx. Note: head does not need to be picked up.	Nil.
Tongue	View tongue.	Nil.
VISCERA		
Diaphragm	View and palpate.	View.

Gastro-intestinal tract	View gastro-intestinal tract. Note: In adult animals view a representative proportion of the mesenteric lymph nodes.	View gastro-intestinal tract.
Heart	View and palpate. View pericardium. Note: The company should remove the heart from the pericardium prior to PM examination.	View.
Kidneys	View both sides.	View.
Liver	View and palpate both sides (parietal and visceral surfaces). View hepatic lymph nodes. View and palpate bile ducts. Note: The degree of palpation required is that sufficient to hold and rotate the organ.	View parietal and visceral surfaces. View hepatic lymph nodes. View bile ducts.
Lungs	View and palpate lungs. Palpate mediastinal lymph nodes. View and palpate bronchial lymph nodes.	View lungs.
Pancreas	View pancreas.	Nil.
Pizzle	View pizzle.	Nil.
Spleen	View spleen.	View spleen.
Testes (including the epididymis)	View testes (including the epididymis). Note: In adult animals, view and palpate.	View.
Trachea	View (do not save for human consumption if lung abnormalities could involve trachea).	Nil.
Note: If ingesta is present on the thoracic viscera set, the viscera examiner must inform the carcass examiner to facilitate further examination of the forequarter.		

Mobs or lines of animals with a high incidence of CLA, grass seeds, minor pleurisy, sarcocysts or Johnes vaccination lesions may be diverted to an ancillary facility that is acceptable to the verifier.

6.2 Cattle PM Procedures

6.2.1 Routine cattle PM procedures

Carcass PM examination procedures	View abdominal and thoracic cavities (including the pleura and peritoneum), and all internal and external carcass surfaces. View limb joints. View neural canal and spinal column. Incise superficial inguinal, supramammary and internal iliac lymph nodes. Incise the subiliac (precrural) and superficial cervical (prescapular) lymph nodes in cattle which are designated SPVD at ante mortem or with tuberculous or actinoform lesions. If present, view the diaphragm and palpate the thin skirt. Edible tails must be from animals that have passed examination and are
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	subjected to a quality control check by the operator.
Head PM examination procedures	View head, eyes and surrounding tissue, oral cavity and tonsils (as part of viewing the mucous membranes, pharyngeal cavity and associated areas of the head). Incise the parotid, retropharyngeal and submaxillary lymph nodes If either the tongue or masseter muscles are being saved as edible: incise the external masseter (Two incisions for EU market) and the internal pterygoid muscles. View and palpate the tongue if it is being saved as edible.
Viscera PM examination procedures	
Lungs	View and palpate lungs. View trachea. Incise the left and right bronchial, anterior mediastinal, middle mediastinal, posterior mediastinal and right apical lymph nodes. If trachea or lungs are to be saved as edible then open and examine trachea and main branches of the bronchi. If lungs are saved as edible for the EU, incise the posterior third of the diaphragmatic surfaces perpendicular to main axis.
Heart	View and palpate all external surfaces of the heart and view and palpate the pericardium. Open the heart by cutting through the wall of the left ventricle, the interventricular septum and the atrioventricular orifices. View the internal surface of the heart and muscular surfaces exposed by the incisions. Palpate the internal surface of the heart and muscular surfaces exposed by the incisions. Make one incision from the base to apex into each of the cut surfaces of the interventricular septum. Make one incision parallel to these into each side of the internal surface of the left ventricle about 10 to 20 mm from the base of the septum. Make the incisions at least 75 mm long and sufficiently deep for adequate examination (but not so deep as to penetrate the outer surface of the heart).
Thymus	View the thymus in young cattle.
Liver	View and palpate both sides of the liver. Incise the hepatic lymph nodes. If liver is edible, incise major bile ducts anterior and posterior to the cystic duct. Do not incise if liver has a disease or defect that will obviously designate it pet food, or if the bile ducts are obviously infected with fluke.
Diaphragm	View the diaphragm and palpate the thin skirt.
Gastro-intestinal tract	View the oesophagus, reticulum, rumen, pancreas, intestines and mesenteric lymph nodes. The mesenteric lymph nodes must be incised in all cattle designated SPVD. View and palpate the rumino-reticular junction.
Spleen	View both sides of the spleen.
Kidneys	View and palpate kidneys
Reproductive organs	View pizzle or uterus. If saved for edible, view testicles and epididymis.
Udder	If saved for edible, view, palpate and incise udder.

6.2.2 PM procedures for tuberculosis in cattle

Additional procedures for TB reactor animals or animals in which lesions suspicious of tuberculosis are found:

Incise the following lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions:

- Left and right bronchial
- Anterior, middle and posterior mediastinal
- Right apical

Also incise and view the following lymph nodes:

- Abdominal viscera:
 - Renal
 - Mesenteric
- Carcase
 - Popliteal
 - Iliac
 - Prepectoral
 - Prescapular / Superficial cervical
 - Ischiatic
 - Lumbar chain
 - Atlantal (may be on the head)
 - Precrural /Subiliac

6.2.3 PM procedures for *Cysticercus bovis*/*Taenia saginata*

This part applies to cattle that are suspected of *Taenia saginata* infection. These are animals that are:

- a) detected at post mortem examination with a suspect cysticercus cyst;
- b) from a *Taenia saginata* Surveillance listed farm;
- c) "MPI Surveillance" *Taenia saginata* suspect tagged bovine animals; or
- d) declared on the accompanying Animal Status Declaration as being under MPI movement control for the purposes of *Taenia saginata* control.

All animals from a line (i.e. an affected line) presented for slaughter that includes any animal as described above must be examined and processed according to this notice.

Potentially affected carcasses and offal from all animals in the affected line that have already passed post mortem examination prior to a suspect cysticercus cyst being detected must be identified, examined and processed. This does not include product which has previously been downgraded as not fit for human consumption for other reasons.

Examination procedures additional to the routine New Zealand post mortem examination procedures for these cattle are as follows:

- a) After the external and internal (medial part only) masseter muscles have been dropped or removed from the head, make two deep incisions into the external masseter and one deep incision into the internal masseter, and view and palpate all exposed muscle surfaces.
- b) After the tongue has been dropped or removed, view and palpate. Then make a ventral longitudinal midline incision through the suspensory muscle of the tongue, and view.
- c) Make two additional incisions each parallel to and midway between the edge of the heart and the incision that was made into the internal surface of the ventricle. Make an additional incision into the interventricular septum. Incisions should be equal in depth and extent of the routine incisions

but should not penetrate the outer surface of the heart. View and palpate heart and muscular surfaces exposed by the incisions.

*Suspect *T. Saginata* carcasses for export*

If carcasses and/or offal from bovine animals that are suspected of being infected with *Taenia saginata* are intended for export to US, Canada, Mexico, European Union, and markets specifying EU requirements, the following additional PM examination procedures must be followed:

- Re-examine the oesophagus (view and palpate).
- Remove the peritoneum from the diaphragm. View, palpate and incise the diaphragm and its pillars.
- Re-examine the external and internal muscular surfaces of the carcass (view).

Also, if at least one suspect cysticercus lesion is found in two or more of the tissues above, complete the following additional examination:

- Make an incision into each round exposing the musculature cross-section.
- Make a transverse incision into each forelimb commencing 5 or 8 cm (2 or 3 inches) above the point of the olecranon and extending to the humerus exposing the triceps brachii.
- The cuts in the round and in the foreleg are made on a slope to facilitate viewing the cut surfaces. Cut surfaces must be viewed.

6.2.4 PM procedures for cattle that have received Johnes's Disease vaccine

In cattle that have received a Johnes Disease vaccination, the following additional PM examination procedures must be completed:

- palpation and deep incision of the muscles lateral and parallel to the ligamentum nuchae at or about the likely site of injection and removal of all identified lesions. Incisions may have to be lengthened where there are suspicions the lesions have migrated along the lymphatics of fascial planes; and
- incision of the pre-scapular lymph nodes and, in cattle, the axillary lymph nodes (as vaccination in the dewlap may result in lesions in this node), and removal of the nodes where lesions are found.

6.3 Farmed deer PM Procedures

6.3.1 Routine PM Procedures

Carcase PM examination procedures	View the pleura, peritoneum and all internal and external carcass surfaces. View the iliac, lumbar chain and renal lymph nodes. Palpate the subiliac (precrural) and supramammary / superficial inguinal lymph nodes Incise the superficial cervical (prescapular) lymph nodes. View both sides of the diaphragm. View and palpate the enucleated kidneys. If saved for edible, palpate testicles and epididymis
Head PM examination procedures	View head, eyes, oral cavity and tonsils (as part of viewing the mucous membranes, pharyngeal cavity and associated areas of the head). Incise the parotid, retropharyngeal and submaxillary lymph nodes. View and palpate the tongue.
Viscera PM examination procedures	
Lungs	View and palpate lungs (view dorsal and diaphragmatic surfaces). View trachea; incise if saved for edible. Incise the left and right bronchial, the apical and the mediastinal lymph nodes.

Heart	View, palpate and open the pericardium. View and palpate the outer surface of the heart
Liver	View and palpate both sides of the liver. Make a longitudinal incision which passes through the major bile ducts, parallel to the long axis of the liver. Incise the hepatic lymph nodes.
Diaphragm	View both sides of the diaphragm.
Gastro-intestinal tract	View the oesophagus (if edible), caul fat (mesentery), reticulum, rumen, pancreas (if edible) and intestines. View and palpate the mesenteric lymph nodes.
Spleen	View the spleen.
Kidneys	View and palpate the enucleated kidneys. View renal lymph nodes.
Reproductive organs	View pizzle (palpate if edible) or uterus. If saved for edible, palpate testicles and epididymis – these may be palpated through any overlying integument (including the scrotum) and plastic bag).

Note: Edible tails and tendons must be from animals that have passed examination and are subjected to a quality control check by the operator.

6.3.2 PM procedures for tuberculosis in farmed deer

Additional procedures for TB reactor animals or animals in which lesions suspicious of tuberculosis are found:

Incise and view the following lymph nodes:

- Abdominal viscera:
 - Renal
 - Mesenteric
- Carcase
 - Popliteal
 - Atlantal
 - Iliac
 - Prepectoral
 - Ischiatic
 - Lumbar chain
 - Precrural /Subiliac
 - Superficial inguinal/supramammary

6.3.3 PM procedures for farmed deer that have received Johne's Disease vaccine

In deer that have received a Johne's Disease vaccination, the following additional PM examination procedure must be completed:

- palpation and deep incision of the muscles lateral and parallel to the ligamentum nuchae at or about the likely site of injection and removal of all identified lesions. Incisions may have to be lengthened where there are suspicions the lesions have migrated along the lymphatics of fascial planes.

6.4 Wild (feral) deer PM Procedures

6.4.1 Routine PM Procedures

Carcase PM examination procedures	View the pleura, peritoneum and all internal and external carcass surfaces before and after skinning. View the iliac, lumbar chain and renal lymph nodes. Palpate the subiliac (precrural) and supramammary / superficial inguinal lymph nodes Incise the superficial cervical (prescapular) lymph nodes. View both sides of the diaphragm. View and palpate the enucleated kidneys. If saved for edible, palpate testicles and epididymis
Head PM examination procedures	View head, ears, eyes, oral cavity and tonsils (as part of viewing the mucous membranes, pharyngeal cavity and associated areas of the head). Incise the parotid, retropharyngeal and submaxillary lymph nodes. View and palpate the tongue.
Viscera PM examination procedures	
Lungs	View and palpate the lungs (view dorsal and diaphragmatic surfaces). (Note: the lungs must be examined, but cannot be used for edible purposes). Incise the left and right bronchial, the apical and the mediastinal lymph nodes.
Heart	View, palpate and open the pericardium. View and palpate the outer surface of the heart (Note: the heart must be examined, but cannot be used for edible purposes).
Liver	View and palpate both sides of the liver. Make a longitudinal incision which passes through the major bile ducts, parallel to the long axis of the liver. Incise the hepatic lymph nodes. (Note: the liver must be examined, but cannot be used for edible purposes).
Diaphragm	View both sides of the diaphragm.
Kidneys	View and palpate the enucleated kidneys. (Note: the kidneys must be examined, but cannot be used for edible purposes). View renal lymph nodes.
Reproductive organs	View pizzle (palpate if edible). If saved for edible, palpate testicles and epididymis – these may be palpated through any overlying integument (including the scrotum) and plastic bag).

6.4.2 PM procedures for tuberculosis in wild deer

Additional procedures for TB reactor animals or animals in which lesions suspicious of tuberculosis are found:

Incise and view the following lymph nodes:

- Abdominal viscera:
 - Renal
- Carcase
 - Popliteal
 - Atlantal
 - Iliac
 - Prepectoral
 - Ischiatic
 - Lumbar chain
 - Precrural /Subiliac

- Superficial inguinal/supramammary

6.5 Bobby calf PM Procedures

Carcase PM examination procedures	View abdominal, thoracic and pelvic cavities. View the neck, back, brisket and ventral surfaces of the carcass. View the forequarters, axillae, hind legs and limb joints. View all exposed lymph nodes.
Head PM examination procedures	When the tongue is not being saved for human consumption, no head or tongue examination is required. If the tongue is being saved as edible, the cleaned tongue must be viewed. No head examination is required if the brain is being saved.
Viscera PM Examination Procedures	
Lungs	View both sides. If trachea or lungs edible, incise in the posterior third of lungs, perpendicular to their main axes and incise the trachea and main branches of the bronchi.
Heart	View (after the pericardium has been opened)
Thymus	View thymus if saved for edible.
Liver	View both sides of the liver, especially the umbilical fissure. View hepatic lymph node.
Diaphragm	View both sides.
Gastro-intestinal tract	View the abomasum (vell), intestines, If saving for edible, view both surfaces of the mesentery, oesophagus, pancreas,
Spleen	View spleen.
Kidneys	Lift and view.
Reproductive organs	View testicles if edible

6.6 Camelid PM Procedures

Carcase PM examination procedures	View external and internal surfaces. Incise superficial cervical lymph nodes Palpate popliteal, subiliac, superficial inguinal/supramammary lymph nodes View iliac lymph nodes
Head PM examination procedures	View head, eyes, oral cavity Incise and view parotid, retropharyngeal and submaxillary lymph nodes View and palpate tongue if edible
Viscera PM Examination Procedures	
Lungs	View trachea and lungs Incise bronchial and mediastinal lymph nodes Incise trachea and palpate lungs if edible
Heart	View pericardium and heart Palpate heart if edible
Thymus	View thymus if edible.
Liver	View parietal and visceral surfaces and bile ducts Palpate liver and bile ducts if for edible Incise hepatic lymph nodes
Diaphragm	View both sides.
Gastro-intestinal tract	View the oesophagus, stomachs, spleen, intestines, peritoneum and omentum View and palpate mesenteric lymph nodes View pancreas if edible
Spleen	View spleen.
Kidneys	View kidneys (both sides) and renal lymph node. Palpate kidneys if edible. Note: Kidneys from adult animals with more than six permanent incisors are not to be saved as edible

Reproductive organs	View uterus View testicles and palpate if edible
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Post mortem anatomy comments:

- Camelid lymph nodes may be small and multiple, rather than single and large and may be difficult to locate – inadvertent removal may occur during dressing procedures such as head removal and neck trimming.
- Stomach in 3 compartments, intestinal tract otherwise similar to other ruminants – small intestine, spiral colon, large intestine together with a small caecum.
- Caudal edge of liver may have finger-like projections and is normal
- Kidneys slightly larger than sheep but a similar shape – proportion of medulla to cortex opposite to that of sheep.

¹Multiple small nodes may be found rather than a single large node at certain sites, such as the superficial inguinal or prefemoral (subiliac).

6.7 Horse PM Procedures

Carcase PM examination procedures	View the carcass, pleura and peritoneum View the supramammary lymph nodes In young animals, view and palpate the joints and umbilical area In grey or white horses, incise the subrhomboid lymph nodes and view the muscles of one shoulder beneath the scapular cartilage of grey or white horses after loosening the attachment
Head PM examination procedures	View head, oral cavity and throat (after freeing the tongue) Palpate the parotid, submaxillary and retropharyngeal lymph nodes View and palpate the tongue if edible
Viscera PM Examination Procedures	
Lungs	View and palpate lungs View trachea If the lungs are edible, the main branches of the bronchi must be opened lengthwise and the lungs must be incised in their posterior third, perpendicular to their main axis and the trachea incised Palpate bronchial and mediastinal lymph nodes
Heart	View pericardium View and incise heart by cutting through the ventricles and the interventricular septum lengthwise
Liver	View and palpate liver and hepatic lymph nodes
Diaphragm	View
Gastro-intestinal tract	View gastro-intestinal tract. View the gastric, mesenteric and pancreatic lymph nodes If edible, view the mesentery and oesophagus
Spleen	View
Kidneys	View and palpate enucleated kidneys. Incise the kidney in grey and white horses
Reproductive organs	View udder if edible View genital organs in stallions and mares

6.8 Pig PM Procedures

6.8.1 Routine pig PM procedures

Carcase PM examination procedures	View external and internal carcass surfaces, scrotal area, joints, peritoneum, pleura and iliac lymph nodes. Palpate any castration wounds or scars. View and palpate the superficial inguinal/supramammary lymph nodes and incise these lymph nodes in adult breeding animals. View the diaphragm, kidneys and renal lymph nodes if present.
Head PM examination procedures	View the head, exposed muscle surfaces, tongue and head lymph nodes. Incise the submaxillary lymph nodes
Viscera PM Examination Procedures	
Lungs	View and palpate the lungs, and the bronchial and mediastinal lymph nodes. View the trachea. If lungs or trachea are edible, also: incise the bronchial and mediastinal lymph nodes, incise the trachea and the main branches of the bronchi, and make a transverse incision into the posterior third of the lung
Heart	View heart and pericardium
Liver	View both surfaces of the liver. View and palpate hepatic lymph nodes.
Diaphragm	View
Gastro-intestinal tract	View oesophagus (if edible), stomach, intestines and omentum. View and palpate the mesenteric lymph nodes.
Spleen	View
Kidneys	View kidneys (after enucleation) and renal lymph nodes
Reproductive organs	View and palpate the mammary glands in adult breeding animals. View the uterus. View and palpate the testicles and epididymis if saved as edible.

6.8.2 Procedures when tuberculosis-like lesions are found during routine examination.

The following additional examination procedures are carried out if tuberculosis-like lesions are identified during routine carcass or viscera examination:

- Palpate the liver
- Incise the following carcass/head lymph nodes
 - Anterior cervical
 - Iliac
 - Lumbar chain
 - Popliteal
 - Precural/subiliac
 - Prepectoral
 - Prescapular/superficial cervical
 - Superficial inguinal/supramammary
- Incise the following visceral lymph nodes
 - Bronchial
 - Hepatic
 - Mediastinal
 - Mesenteric
 - Renal

7 Post-mortem examination Table

It should be noted that when printing the pdf files two documents are available. They are "Post-Mortem Examination Table" and "Post-Mortem Table Notes". The latter table contains details that relate to the first file. Both files should be considered concurrently when reading these files

ID	Tissue	Cattle NZ	Cattle TB NZ see *1	Cattle T. saginata see *2	Farmed Deer NZ	Wild Deer NZ	Deer TB NZ see *3	Bobby NZ	Pigs NZ	Pigs TB NZ see *4	Game NZ	Vaccine for Johne's disease see *6	Ratites	Horses NZ
1	Abdominal cavity	V						V			VP			
2	Abomasum							V						
3	Anterior cervical Inn									I				
4	Anterior mediastinal In	I	I1											
5	Atlantal Inn		I				I							
6	Axillae							V						
7	Back carcass							V						
8	Bile duct (e)	VI 2									PI			
9	Bile duct (i)	see edible									PI			
10	Brisket							V						

11	Bronchial Inn							VPI 1	I	I			P
12	Buccal cavity						V						
13	Carcass Inn						V 1			PI 2			
14	Caul Fat				V								
15	Diaphragm	VP 1 - thin skirt. V 1 - thick skirt		VP	V 2	V 2	V 2	V					V
16	Exposed lymph nodes cavities						V 1						
17	Exposed lymph nodes heads						V						
18	External masseter	I 1											
19	External surfaces carcass	V			V	V 1		V		V			
20	External surfaces head						V						
21	Eyes	V			V	V							
22	Forelegs												

23	Forequarters							V						
24	Front of hind legs													
25	Gall bladder													
26	Gastro-intestinal tract													V
27	Head (e)	V		VP	V	V			V 2				V	V
28	Head (i)	see edible		see edible	see edible	see edible			see edible				see edible	See edible
29	Head Inn							V 1	V					
30	Heart (e)	VPI 1		VP	VP 2	VP 23		V 1	V		VP 23		VP	VI 4
31	Heart (i)	see edible		see edible	see edible	see edible		see edible	see edible		VP 2		see edible	See edible
32	Hepatic Inn	IV			I	I		V 2	VP	I	PI			VP
33	Hind legs							V						
34	Iliac Inn		I		V	V	I		V	I				
35	Internal iliac Inn	I												
36	Internal pterygoid	IV												
37	Internal surfaces carcass	V			V	V 1			V					

38	Intestines	V			V			V	V				V	
39	Ischiatic Inn		I				I							
40	Joints							V	V					VP 2
41	Kidneys (e)	VP			VP 1	VP 14		V 2	V 1		VP 4		VP 5	VP I6
42	Kidneys (i)	see edible			see edible	see edible		see edible	see edible		VP		see edible	See edible
43	Left bronchial In	I	I1		I	I								
44	Limb joints	V						V						
45	Liver (e)	VP 1			VP 12	VP 124		V 3 3	V 1	P	VP 4		VP	VP
46	Liver (i)	see edible			see edible	see edible		see edible	see edible	P	VP 1		see edible	See edible
47	Lumber chain Inn		I		V	V	I			I				
48	Lungs (e)	VP 1			VP 2	VP 24		V 6 2	VPI 3		VP 4		VP	VPI 5
49	Lungs (i)	VP			see edible	see edible		V 2	VP		VP		see edible	VP
50	Mammary glands								VP 1					
51	Mediastinal Inn				I	I			VPI 1	I	I			P
52	Mesenteric Inn	V 1			VP		I 3		VP	I				V

53	Mesentery (e)							V 1						V
54	Middle mediastinal ln	I	I1											
55	Nasal cavity							V						
56	Neck							V				PI 12		
57	Neural canal	V												
58	Oesophagus (e)	V		VP	V			V	V					V
59	Omasum													
60	Omental fat													
61	Omentum								V					
62	Oral Cavity	V			V	V		V						V
63	Pancreas (e)	V			V			V						
64	Parotid Inn	I			I	I								P
65	Pelvic cavity							V				VP		
66	Pericardium	V			VP 2	VP 2			V			VP 2		V
67	Peritoneum	V			V	V 1			V			VP		V
68	Peritoneum, visceral													
69	Pizzle (e)	V			VP	VP								

70	Pizzle (i)	V			V	V								
71	Pleura	V			V	V 1			V		VP			V
72	Popliteal Inn		I				I			I				
73	Posterior mediastinal In	I	I1											
74	Precrural/Subiliac Inn	1 & 2	I		P	P	I			I				
75	Prepectoral Inn		I				I			I				
76	Prescapular/ Superficial cervical Inn	1 & 2	I		I	I				I		I 4		
77	Rectal cavity													
78	Renal Inn		I		V	V	I		V	I				
79	Reticulum	V			V									
80	Retropharyngeal Inn	I			I	I								P
81	Right apical In	I	I1											
82	Right bronchial In	I	I1		I	I								
83	Rumen	V			V									
84	Rumino-reticular junction	VP												

85	Scrotal area								VP 1					
86	Spinal column	V												
87	Spleen (e)	V 1			V			V	V				VP	V
88	Spleen (i)	see edible			see edible			see edible	see edible				see edible	See edible
89	Stomach								V					
90	Submaxillary Inn	I			I	I			I					P
91	Superficial inguinal Inn	I	I		P	P	I		VPI 1	I				
92	Supramammary Inn	I	I		P	P	I		VPI 1	I				V
93	Tail (e)													
94	Tail (i)													
95	Tendon (e)													
96	Tendon (i)													
97	Testicles (e)	V 1			VP 1	VP 1		V	VP 1					
98	Testicles (i)	No			No	No		No	No					
99	Thoracic cavity	V						V			VP			
100	Thymus (e)	V 1						V						

101	Tongue (e)	VP		VPI 2	VP	VP		V	V					VP
102	Tongue (i)	see edible		see edible	see edible	see edible			see edible					See edible
103	Tonsils	V 1			V 1	V 1		V 1						
104	Trachea (e)	VI 1			VI			V 1	VPI 1				V	VI 3
105	Trachea (i)	V			V				V				see edible	V
106	Udder (e)	VPI												V
107	Udder(i)	No												See edible
108	Umbilical area													VP 1
109	Uterus	V			V				V					
110	Ventral surface abdomen													
111	Ventral surface carcass							V						
112	Mediastinum										V			
113	Anal Lnn													
114	Axillary Inn													

115	Carcass			V									V2	V
116	Proventriculus												V	
117	Gizzard												V	
118	Abdominal air sacs												V	
119	Thoracic air sacs												V	
120	Gastric Inn													V
121	Genital organs													V 1
122	Pancreatic Inn													V
123	Subrhomboid Inn													I 1
124	Throat													V 1
125	Shoulder													VI 1
126	Ears					V								
127	Apical Inn				I	I								
128	Testicles (Integ)				P 1	P 1								
129	Tail (Integ)				No 1	No 1								
130	Tendon (Integ)				No 1	No 1								

131	Pizzle (Integ)			No 1	No 1							
* 1 For reactor animals or animals in which lesions suspicious of tuberculosis are found.	* 2 Suspected T. saginata cysts. (Not suspect lines) Reinspection by veterinarian or leading hand meat inspector if no veterinarian at the premises.	* 3 For animals in which lesions suspicious of tuberculosis are found and for Tb reactors.	* 4 Where Tb-like lesions are found in the carcass or viscera during routine inspection.	* 5 Refer Manual 16 Amendment X. Requirements are applicable to Option 1 only, for CLA lesions detected on the main chain and for lines suspected to be heavily affected by CLA.	* 6 Vaccinated Cattle and Deer. If the status of cattle, sheep (including lambs) deer and goats is unclear in respect of Johne's Disease vaccine status, they must be considered to have been treated with Johne's Disease vaccine unless the operator can confirm by making appropriate enquiries that the animals have never been on a property where Johne's Disease vaccination is administered.							

V = View
P = Palpate
I = Incise
e = edible
i = inedible
Integ = Standard applies to product with some integument still attached
1-6 = refer Appendix 3 Inspection Table Notes 1-6

#1
After pericardium has been opened.

#2
Pick up & view both sides

#3
Pick up, view both sides and umbilical fissure

ID	Tissue	Notes 1	Notes 2	Note 3	Note 4	Note 5	Note 6
1	Abdominal cavity						
2	Abomasum						
3	Anterior cervical Inn						
4	Anterior mediastinal Inn	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions.					
5	Atlantal Inn						
6	Axillae						
7	Back carcass						
8	Bile duct (e)	In conjunction with liver examination	Incise major ducts anterior and posterior to the cystic duct. Do not incise if liver has a disease of defect that will obviously designate it pet food, or the bile ducts are obviously infected with fluke.	See Liver			
9	Bile duct (i)	Carcass alone edible	In conjunction with liver				

10	Brisket						
11	Bronchial Inn	Incise if lungs are saved as edible	Only in the case of edible lungs				
12	Buccal cavity						
13	Carcass Inn	Exposed Inn	Carcasses detained for disease conditions				
14	Caul Fat	Lift and turn to view both sides	Same as omentum, omental fat.				
15	Diaphragm	Lift to view the pleural cover.	Both sides.				
16	Exposed lymph nodes cavities	Abdominal, thoracic and pelvic cavities					
17	Exposed lymph nodes heads						
18	External masseter	Two incisions for EU market					
19	External surfaces carcass	Both skin-on and skinned carcass examination					
20	External surfaces head						
21	Eyes						

22	Forelegs						
23	Forequarters						
24	Front of hind legs						
25	Gall bladder						
26	Gastro-intestinal tract	Not required to be manipulated, unless to view the spleen					
27	Head (e)	View the buccal cavity and the pharynx. The head does not need to be picked up.	Including exposed muscle surfaces				
28	Head (i)	If the head, tongue nor the brains are required for human consumption					
29	Head Inn	Exposed Inn					
30	Heart (e)	Opening of heart, then through septum, then additional incisions.	Outside surface	Must be inspected but cannot be used for edible purposes	Open the ventricles and cut through the interventricular septum lengthwise		
31	Heart (i)	Carcass alone edible	Outside surface				
32	Hepatic Inn	In conjunction with	One incision in the				

		visceral surface of the liver	largest hepatic lymph node.				
33	Hind legs						
34	Iliac Inn						
35	Internal iliac Inn						
36	Internal pterygoid						
37	Internal surfaces carcass	Both skin-on and skinned carcass examination					
38	Intestines						
39	Ischiatic Inn						
40	Joints	Foreleg and hindleg	Young animals				
41	Kidneys (e)	Enucleate first	Lifted from viscera table	If in carcass VP	Must be inspected but cannot be used for edible purposes	View kidneys in situ and then View and Palpate kidneys after removal from the carcass	Incise entire kidney in grey and white horses
42	Kidneys (i)	Carcass alone edible	Observe on viscera table				
43	Left bronchial In	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully					

		examine cortex for tuberculous lesions.					
44	Limb joints						
45	Liver (e)	The parietal and visceral surfaces	Make a longitudinal incision which passes through the major bile ducts, parallel to the long axis of the liver.	Especially the umbilical fissure.	Must be inspected but cannot be saved for edible purposes		
46	Liver (i)	Both sides	Carcass alone edible				
47	Lumber chain Inn						
48	Lungs (e)	Inspect trachea and main branches of bronchi to edible standard.	View dorsal and diaphragmatic surfaces.	Transverse cut into the posterior third of the lung	Must be inspected but cannot be used for edible purposes	The main branches of the bronchi must be opened lengthwise and the lungs must be incised in their posterior third, perpendicular to their main axes	Incise in their posterior third, perpendicular to their main axes. Inspect trachea and main branches of bronchi to edible standard.
49	Lungs (i)		Lungs inspected to the edible standard (ID 48) can also be used for inedible purposes without additional procedures.				
50	Mammary glands	Adult breeding					

		animals					
51	Mediastinal Inn	Incise if lungs are saved as edible	Only in the case of edible lungs				
52	Mesenteric Inn	Incise in cattle with lesions suspect of TB and those made SPVD	Palpate a representative proportion.	Farmed deer only			
53	Mesentery	Both surfaces.					
54	Middle mediastinal Inn	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions.					
55	Nasal cavity						
56	Neck	Palpation and deep incision of the muscles lateral and parallel to the ligamentum nuchae at or about the likely site of injection	Lengthen the incisions when suspicious the lesions have migrated along the lymphatics of fascial planes				
57	Neural canal						
58	Oesophagus						
59	Omasum						

60	Omental fat						
61	Omentum						
62	Oral Cavity						
63	Pancreas						
64	Parotid Inn						
65	Pelvic cavity						
66	Pericardium	In conjunction with heart examination	Open pericardium				
67	Peritoneum	Both skin-on and skinned carcass examination					
68	Peritoneum, visceral						
69	Pizzle (e)						
70	Pizzle (i)						
71	Pleura	Both skin-on and skinned carcass examination					
72	Popliteal Inn						

73	Posterior mediastinal Inn	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions.					
74	Precrural Inn	Prime cattle and young bulls, see 2 for incise	Prime cattle and young bulls which are SPVD on AM or with tuberculous or actinoform lesions; young bulls if overlying tissue prevents effective palpation; all other cattle.	Can be performed by Company.			
75	Prepectoral Inn						
76	Prescapular Inn	Prime cattle and young bulls, see 2 for incise	Prime cattle and young bulls which are SPVD on AM or with tuberculous or actinoform lesions; young bulls if overlying tissue prevents effective palpation; all other cattle.	Can be performed by Company.	But axillary Inn if vaccinated in dewlap		
77	Rectal cavity	Put two fingers in the rectal cavity and pull the tail back. View the muscular groove on					

		either site of the tail.					
78	Renal Inn						
79	Reticulum						
80	Retropharyngeal Inn	When saving head meats for human consumption					
81	Right apical In	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions.					
82	Right bronchial In	For reactor cattle incise lymph nodes thinly (approximately 2-3mm) and carefully examine cortex for tuberculous lesions.					
83	Rumen						
84	Rumino-reticular junction						
85	Scrotal area	Palpate castration wounds and scars					

86	Spinal column						
87	Spleen (e)	Both sides					
88	Spleen (i)	Carcass alone edible					
89	Stomach						
90	Submaxillary Inn						
91	Superficial inguinal Inn	Incise in adult breeding animals	Can be performed by Company.				
92	Supramammary Inn	Incise in adult breeding animals	Can be performed by Company.				
93	Tail (e)	Company check					
94	Tail (i)	Company check					
95	Tendon (e)	Company check					
96	Tendon (i)						
97	Testicles (e)	Including the epididymis.					
98	Testicles (i)						
99	Thoracic cavity						
100	Thymus	Young cattle					

101	Tongue (e)	When saving head meats	Ventral longitudinal midline incision through the suspensory muscle				
102	Tongue (i)	If the tongue, the head, nor the brains are required for human consumption	When saving head meats				
103	Tonsils	As part of viewing the mucous membranes pharyngeal cavity and associated areas of the head					
104	Trachea (e)	Open trachea and main braches of the bronchi. Inspect the lungs to edible standard.	Do not save for human consumption if lung abnormalities that could involve the trachea.	If lungs are saved for human consumption			
105	Trachea (i)						
106	Udder (e)						
107	Udder(i)						
108	Umbilical area	Young animals					
109	Uterus						
110	Ventral surface abdomen						

111	Ventral surface carcass						
112	Mediastinum						
113	Anal Lnn	If still available					
114	Axillary Inn	In cattle vaccinated in the dewlap					
115	Carcass		All external and internal surfaces				
116	Proventriculus						
117	Gizzard						
118	Abdominal air sacs						
119	Thoracic air sacs						
120	Gastric Inn						
121	Genital organs	For stallions and mares					
122	Pancreatic Inn						
123	Subrhomboid Inn	Grey or white horses					
124	Throat	After freeing the tongue					

125	Shoulder	View muscles of one shoulder beneath the scapular cartilage of grey or white horses after loosening the attachment					
126	Ears						
127	Apical Inn						
128	Testicles (Integ)	May be palpated through scrotum and plastic bag					
129	Tail (Integ)	No requirement for examination by the examination service but instead quality check by the company. The product must have been derived from animals which have been passed as fit for human consumption					
130	Tendon (Integ)	No requirement for examination by the examination service but instead quality check by the company. The					

		product must have been derived from animals which have been passed as fit for human consumption					
131	Pizzle (Integ)	No requirement for examination by the examination service but instead quality check by the company. The product must have been derived from animals which have been passed as fit for human consumption					

Draft for Consultation

Draft for Consultation