

## Lung Washes (Pulmonary lavage)

Pulmonary lavage allows the collection of a greater volume of sample, with a higher concentration of infectious agents in a better condition than other sampling techniques. It is particularly useful for the more fragile agents such as *Mycoplasma* spp.

The technique is described in detail:

### Bronchoalveolar lavage in the investigation of bovine respiratory disease

George Caldow, *In Practice*, 2001, 23, pp 41-43

#### In addition, it is best practice to:

Always bring a second “spare” sampling kit as back-up.

Choose the animal to be sampled as you would for nasal swabbing.

Do not use the technique on animals in severe respiratory distress.

Placing a gag in the animal’s mouth can help in two ways. Firstly it is much more difficult to swallow when the mouth is kept open - this eases the entrance of the lavage tube into the larynx and down the trachea. Secondly it stops the animal chewing the tube should it kink or bend round during insertion.

Judicious use of lubricant makes the technique much easier in practice.

For transtracheal lavage, remember that most of the enervation for the lower half/third of the bovine neck emerges at the angle between the head and neck. Good anaesthesia is crucial when using this type of lavage.

The volume of lavage fluid recovered can be disappointing. The quality for diagnostic purposes is however usually excellent.

All lavage samples arriving at the CVRL or your local RVL will automatically be split and sent for both virology and bacteriology testing.

