**Distal transverse laceration involving the streak canal**

This type of configuration is difficult to repair and often results in partial dehiscence or in fibrosis

of the streak canal. To decrease costs associated with a second surgery following complications,

amputation of the distal end of the teat at the level of the laceration, could be performed. In this

case, the surgery site is left to heal by second intention. Before amputating the distal end of the

teat, it is important to make sure that 2 or 3 mm of normal streak canal is available proximally

and that the rosette has not been damaged by the initial trauma. For the first 2 weeks after the

amputation, a silicone or a wax insert will have to be maintained in place between milking to

avoid scarring in the streak canal. Mechanical milking can be resumed rapidly after the

amputation. Complete healing of the teat is achieved within 3 or 4 weeks. A protective bandage

should be used in the early post-operative period.

The author has not seen long term complications such as dripping milk and mastitis on the cows

that had their distal teat amputated. The cosmetic outcome is good.