Postparturient cows are highly susceptible to disease, which may result in decreased milk production, death and culling. Early disease detection increases cure rates and minimizes production losses. Rectal temperature monitoring (RTM) for the first 10 days in milk (DIM) has been advocated as a critical management tool, however, there are no studies evaluating the efficacy of this labor intensive program. This study compares the efficacy of visual observation (VO) to RTM for detection post-partum disease. Rectal temperature and milk production was recorded for the first 10 and 30 DIM respectively of 208 Holstein cows. Cows with temperatures >103.0°F (FEVER) were further examined for metritis (MET). Health events (HEVNT) diagnosed by dairy staff using VO, calving ease, 5-25 DIM production (5-25dMLK) and first service conception rate (CR1) were also recorded. During their first 10 DIM, 39% of cows had a fever. More cows with dystocia (DYS) had FEVER (50%) than those without (34%) (p=0.0238). Of cows with DYS, 25% had a fever that peaked at 4 DIM, as compared to cows without DYS (15% had a fever that peaked at 3 DIM). Of 79 cows with FEVER, 55% had MET. Thirty-six cows (29%) with no HEVNT had FEVER and half of them had MET undetected by VO. Cows still present in the herd at 30 DIM with FEVER and no HEVNT produced 243 lbs less milk than those without FEVER (p=0.0983). Furthermore, of cows with no HEVNT those with a discharge consistent with MET had a lower CR1 (21%) than those without MET (31% CR1) (p=0.0372). These results suggest FEVER identified by RTM is commonly associated with MET. Therefore, disease undetected by VO but identified by RTM results in significant economic losses through decreased milk production and reproductive efficiency. Rectal temperature monitoring is more effective than visual observation for detection of post-partum disease in dairy cows and could significantly improve the health and productivity of post-partum dairy cows.