

Histological sections confirmed the diagnosis of osteochondrosarcoma.

—Donald A. Dressen '57

4

Congestive Heart Failure. On February 11, 1957, a 14-year old male terrier was admitted to Stange Memorial Clinic, with a history of an enlarged abdomen of 2 months duration. Examination revealed dyspnea, hydroperitoneum, depression, moist rales, and valvular insufficiency. Abdominal paracentesis was performed and 3 liters of fluid were removed. The dog was medicated orally with 1.5 grains of aminophylline and .05 mg. of Crystodigin® (digitalis; Eli Lilly and Company) daily. Two days later approximately 2.5 liters of fluid were again removed. Therapy was continued with steady improvement until the dog was discharged on February 19, 1957, with instructions for the owner to administer orally 1.5 grains of aminophylline and .05 mg. of Crystodigin daily for 10 days and then return the patient for a checkup. If fluid began to accumulate or any other signs of decompensation were noted the owner was instructed to return immediately.

On March 7, 1957, the dog was readmitted with reoccurrence of the previous symptoms. Because of the owner's neglect, medication had been discontinued for 7 days. About 14 liters of fluid were removed by paracentesis. Medication consisting of 1.5 grains of aminophylline and .05 mg. of Crystodigin orally twice per day was immediately instituted. Three days later it was necessary to increase the dose to 1.5 grains of aminophylline and .075 mg. of Crystodigin orally three times per day. No more fluid was collecting in the peritoneal cavity and apparently cardiac compensation had taken place. On March 23, 1957, the patient was discharged with instructions for the owner to give 1.5 grains of aminophylline and .075 of Crystodigin orally three times per day. The owner was again impressed with the necessity of continuous medication.

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This case graphically illustrates the need to impress the client with the importance of continuous medication and also the importance of post-hospitalization checkups.

—R. M. Hogle '58

5

Fracture of the Distal End of the Femur. On April 2, 1957, a 5½ month old Border Collie was admitted to Stange Memorial Clinic with a history of a broken leg. The patient was observed to walk normally on the left rear leg but avoided placing weight upon the right rear leg. With physical examination and



Fracture at epiphysis at distal end of right femur, before treatment.

x-ray, the fracture was located at the epiphysis at the distal end of the right femur.

On April 4, the patient was given ½ grain morphine and 1/100 grain atropine 30 minutes prior to anesthesia. The dog

197