

out through the incision and the ventral portion was incised. Eleven calculi were removed varying in size from a BB shot to a mid-size acorn. The bladder wall was greatly thickened and 2 rows of modified Connel sutures of plain catgut were used to close the incision. The peritoneum was then closed with a continuous apposition suture using No. 1 plain catgut. The muscle was sutured in a like manner. The skin was closed with interrupted nylon sutures, and then covered with collodion and cotton. The patient was then given 400,000 O.U. of procaine hydrochloride penicillin in the left hip. The patient was returned to the kennels and covered with a light cloth to preserve body heat.

The following day the patient was standing and evidence of urine was noted on the papers on the floor of the kennel.

Three days after the operation the urine had a pH of 5.5 and the dog was urinating normally.

During the following week the incisions healed satisfactorily but the abdominal incision showed considerable swelling. One week after the operation, the healed skin incision was opened by blunt dissection and considerable sero-hemorrhagic fluid escaped. After this the dog made a satisfactory recovery and was discharged on Oct. 8, 1950.

D. H. Perkins '51

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Internal Intestinal Strangulation

in a Steer. On Oct. 3, 1950, a fifteen-month-old Hereford steer was admitted to Stange Memorial Clinic with a history of having failed to respond to treatments for constipation.

Rectal palpation revealed a hard pear-shaped mass of intestine just anterior to the pelvic brim. A tentative diagnosis of intussusception was made. The animal was too weak and toxic for surgery. Supportive therapy for the next several days failed and euthanasia was performed.

Post mortem examination revealed a strangulation of the last 3 feet of ileum through an acquired hernial ring in

its own portion of the great mesentery. Adhesions of the ileum to the omentum and to proximal surfaces of the bladder as well as to loops of itself had constricted the lumen to a non-functional diameter in several places.

Sam Holman, '51

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Fracture of the Ilium. A 2-year-old Holstein cow was admitted to Stange Memorial Clinic on Sept. 14, 1950, with a fracture of the external angle of the ilium. The symptoms were as follows: A contused wound over the tuber coxae from which was draining a purulent exudate. There was heat and swelling and the area was very sensitive.

On Sept. 16, the cow was placed on the operating table and a piece of the ilium was removed. The wound was packed and partly sutured. Three days later the pack was removed and the wound irrigated with 1:3000 potassium permanganate, dusted with healing powder and sprayed with fly repellent. This treatment was repeated daily until Sept. 29, when the patient was placed in the stocks and another sequestrum was removed. At this time it was determined that a large sequestrum was still in the wound, but too far anterior and ventral to be removed with the patient in the stocks. The wound was again packed and partly sutured. The purulent exudate still persisted. In the belief the sequestrum could now be removed the decision to operate was made. On Oct. 5, the patient was given a general anesthetic (chloral hydrate), and placed on the operating table in a right lateral recumbency. The operative area was prepared. The previous incision was enlarged about 3 in. ventrally, and several large pieces of necrotic tissue were removed. Another incision was made at right angles to the first and extending about 3 in. anterior to it. It was found that the involved bone was not a sequestrum, but the entire external angle of the ilium, and could be moved about. An obstetrical cutting wire was placed