VETERINARY CLINICAL NOTES

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Veterinary Clinical Notes by Martin R. Steffen

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MARTIN R. STEFFEN

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Veterinary Clinical Notes

BY

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INTRODUCTION

In the treatment, as well as in the diagnosis, of pathological conditions in the domestic animals it is a fact that not infrequently a single clinical item gives the clue to proper handling of the case.

In other instances minor clinical points, when given appropriate consideration by the attending veterinarian, can have much weight in bringing a given case to a satisfactory end.

In the following pages such clinical items and points of practical value are presented in "nut-shell" form.

Only such matter is given as has been found of worth in the practice of the author and other veterinary practitioners.

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MORE important than anything else in the treatment of a case of paraphymosis in the horse is appropriate suspension of the organ.

The most practical, and also the most satisfactory, method of supporting the organ is carried out with the aid of a section of roof gutter. If the latter is not available a piece of tin 18 inches long and 10 inches wide is bent in the shape of a trough or gutter, a number of holes punched along the edges. Tapes or bandages are tied in the holes and the trough padded with cotton. With the organ reposing therein it is suspended close to the belly by means of the bandages or tapes encircling the flank.

The organ must be kept thus suspended until the swelling has gone down to such an extent that partial retraction within the sheath is possible. Swelling persists longest in the true sheath, just above the glans peni. Disappearance of this swelling can be considerably hastened by applying gentle massage, cold water douches, and further suspension. Throughout the course of the treatment the animal must be lightly exercised.

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In some obstinate cases good rcsults follow forcible imprisonment of the organ in the sheath. This can only be resorted to, however, when most of the swelling has disappeared.

After gently kneading and massaging the organ it is slowly and firmly forced into the sheath. A large wad of cotton or a gauze pad is placed and firmly held in front of the orifice by means of tight bandages encircling the animal's body. The organ is allowed to remain thus imprisoned until the animal becomes uneasy. In some cases a few hours bring on restlessness,. while in others the organ can be thus retained a whole day without inconvenience.

The procedure is repeated daily, until complete retraction is possible.

The stethescope is a diagnostic instrument that veterinary practitioners do not make enough use of.

A good stethescope does not only intensify sounds; it also accentuates characteristics of individual sounds.

To become proficient in the art of interpreting intensified and accentuated stethescopic sounds requires prolonged practice. Once acquired, however, this proficiency makes for confidence and accuracy in both diagnosis and prognosis.

Examinations for soundness can hardly be thorough unless the

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stethescope is brought into play. Hidden or obscured, by drugs or other causes, pu³monary emphysema is easily detected. Incipient pulmonary emphysema can hardly be demonstrated by any other means.

Hidden, latent, and controlled lesions in the thoracic cavity can nearly always be "spotted" by means of a good stethescope properly applied.

Prognosis of abdominal diseases, such as impactions, is made more nearly positive when the stethescope sounds are intelligently interpreted.

It is very gratifying to appreciate the confidence which the use of the stethescope instills in the practitioner who has become proficient in its application.

For the beginner in the use of this instrument there are two rules which he must obey if he would acquire any degree of proficiency. They are:

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