

from wooly hair down to the hide in one fell swoop. It is quick, thorough, and you can make the prepped area neat, straight sided, and with good square corners. There's no worry about extension cords or trying to shave with a scalpel blade.\* We feel it's important to make the incision in the center of the prepped area, and make everything nice and neat and clean. Sutures are all placed evenly, the bites are taken the same, so that when we get done, all that can be said is something like, "Boy that's a neat job. I think I'll come to you next time I need to be sewn up." All the client sees when you get done is how it looks on the outside--and from a veterinary standpoint, if you've been meticulous with what it looks like on the outside, chances are--and in our situation, it's the way it happens--you've done a good job all the way in and all the way out.

Here's another practice tip that always brings a chuckle. About the only skin suture we use any more is monofilament nylon fishing line. How's that? We always double it, and we use 40 lb. test for cattle and horses, and 25 lb. test for dogs and cats. We cut it off in 4 or 5 ft. lengths, coil it up, and keep it in disinfectant solution in small plastic jars. It's strong. We have no problem with suture line abscesses. It handles easy. It's economical, but it is a good idea to put 2 or 3 extra throws per knot and pull them tight.

With a Detco Recorder, it's real handy to use one of these magnetic spring clips to hold the graph paper as it comes out of the slot, because it will go right down into the water on the floor of the dairy barn if you are not careful.

Ration balancing is the foundation of all of this dairy work, as a lot of you have found. We find our TI-59 computer real handy for doing this, and many other things, also.

I'd like to leave you with 2 thoughts. If you're not already taking your children on calls with you, I'd encourage you to do so. Ours are only 7, 9, and 12 at this point, but I can already see them growing up. I'm real glad that I've taken time in the past for them to go on calls with me, and I hope to have more opportunity in the future to do so.

The other thought: Up the road a little ways is a church that has catchy little sayings on its sign. One of them goes like this: "Ox in the ditch every Sunday? Sell the ox or fill up the ditch." Enough said.

Thank you very much.

## Vaginal Prolapse Repair:

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Prolapsed vagina is a problem for all of us involved in large animal practice. Our treatment procedures are probably not much difference than anyone else.

We treat most of these cases in our haul-in facility at the clinic. Our facilities are not elaborate, but functional, allowing us to do about 75% of our large animal work at the clinic. I feel this is about the only way a mixed practice can survive continuing to do large animal work.

An electric fence charger wired to a wooden stick for use

as an electric cattle prod is used in the clinic. That's an incidental practice tip. Prolapsed vagina cases are first rectally examined to determine the stage of pregnancy which decides how we are going to treat the cow.

The cow close to term with colostrum is given 5cc Lutalyse + 20cc Dexamethasone intramuscularly to induce labor. We recheck the cow in 48 hours if the calf has not been delivered. We see quite a few of these where the cervix opens, but the fetus is not expelled until after it dies. At 48 hours, we have always had a live calf. The cow is given 100 units oxytocin and the uterus is medicated. We then use 2-4 stay sutures as described later.

If the cow is early pregnant or not pregnant and not nursing a young calf, we recommend immediate slaughter.

Cows in middle to late pregnancy with no colostrum present the biggest problem. We give an alcohol epidural using 3-6cc isopropyl alcohol and 5-10cc lidocaine. The vagina is cleaned, replaced, and held in place with stay sutures. We use a meat stringer purchased from the local butcher supply. It is pushed through both vulvar lips as close to the body of the cow as possible and then pulled back out after being threaded with a nylon cable tie. These are self locking when pulled down snug. The owner is instructed to return the animal for induction of parturition when colostrum becomes evident in the udder. Nylon cable ties are available at auto parts and electronic parts stores and work well on large bull castrations and spays.

*A couple of quick practice tips:* We have gone back to using just old 500 mg generic tetracycline capsules. We use these in the uterus on routine calvings. They cost about 3 cents apiece and 2 grams of tetracycline is going to cost about 12 cents. We'll put these things on a prolapsed vagina for instance; we'll break one open and just sprinkle it in there. We know how much drug we are using, and we are keeping our cost down. We're not just taking a teaspoon of powder and dumping it in there. For use with our producers that want to come in and buy uterine pills we just put a few of them in a gelatine capsule. We are using a lot of Clorox for disinfectant instead of some of the more expensive things. Routine castration instruments are kept in a bucket of water with Clorox, likewise our dehorning instruments. We feel it does a good and very economical job. Some of you may have a problem with Clorox on your hands and may not be able to stand it, but we have not had any. We use 4 ounces per gallon of water for practically anything in routine disinfection.

One other quick statement which I know many of you will argue with - we use paper towels instead of cotton for most procedures. A roll of paper towels; you can buy 5 or 6 rolls of it for the price of the cotton and we feel when we tear them individually and throw them in the water, when you grab 3 or 4 at a time, they do a real good job for us as far as routine cleaning.

## Ligation of the external pudendal artery and vein for the treatment of Gangrenous Mastitis:

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In certain acute cases of gangrenous mastitis (blue bag), I have found it worthwhile to include a ligation technique of the external pudendal artery and vein to decrease the amount of toxic substances in the general circulation.