1955

Cornstalk in Canine Colon

Charles Sheldon

Iowa State College

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Cornstalk in Canine Colon. On January 12, 1955, a four-month-old Beagle pup was admitted to Stange Memorial Clinic with a history of persistent vomiting and anorexia of 4 days standing.

Upon examination abdominal palpation revealed a hard mass in the abdominal region. The patient was given bismuth subcarbonate orally for fluoroscopy on the following day.

Fluoroscopic examination revealed the presence of the mass in the abdominal cavity. Rectal examination indicated that the mass was lodged in the descending colon. Blood studies revealed the following: total white blood cells, 30,380; stabs, 10,200; segmented neutrophils, 15,000; monocytes, 1,200; lymphocytes 4,000. It was decided to perform an exploratory laparotomy.

The patient was prepared for surgery by clipping the ventral abdomen, scrubbing with Germicidal Detergent, (Parke-Davis) defatting with ether and disinfecting with 50 percent isopropyl alcohol. An incision approximately 3 inches in length was made on the midline posterior to the umbilicus and the intestine containing the hard object was brought out through the incision. The intestine was incised and a piece of cornstalk about 1 inch in length and three-fourths inch in diameter was removed. The intestine surrounding the foreign body was slightly necrotic so two rows of sutures were used to close the incision; first a row of Cushing sutures followed by a row of interrupted Lembert sutures. Three cubic centimeters of comiotic were placed on and around the affected intestine and the abdominal wall was closed using No. 00 chromic gut to close the peritoneum, sheath of the rectus and underlying structures. The skin was closed with interrupted No. 50 cotton sutures and a flex-o-seal bandage placed over the wound.

The first and second day post-operative the patient was given one-half pint of milk and one cubic centimeter comiotic I.M. The third and fourth day one-half pint of milk was administered. On the fifth day the patient received one-half pint of milk and one-fourth can of dog food. The bandage was removed and the incision was healing well. The patient was discharged on the sixth day post-operative.

Charles Sheldon ’56

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