

prepuce to allow excision of ancillary and scarred preputial tissue,^{3,4} ensuring 1.5 times the length of the free portion of the penis of preputial tissue is left to reduce the risk of phimosis and recurrent prolapse.^{1,2} Prognosis following recovery from this procedure is good to excellent provided hemorrhage is minimized, urine flow is diverted away from the surgical sites, and extension of the penis remains achievable.^{3,4}

Keywords: Prepuce, prolapse, injury, *Bos indicus*, reefing

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Atypical mammary mass in an intact geriatric female Labrador retriever

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Mammary pathology is a significant finding in any bitch. Published research suggests intact bitches are at a greater risk of developing mammary neoplasia than those ovariectomized before their first heat cycle.¹ A 12-year-old intact female black Labrador Retriever was examined in February 2021 for a rapidly growing mammary mass. The mammary mass was first noticed by the owner in July 2020 and grew slowly until December when it began to rapidly increase in size following standing estrus in late November. At presentation, a fluctuant mass (15 cm) extended from the cranial left abdominal mammary gland to the caudal abdominal mammary gland. The left inguinal lymph node was also enlarged and painful during palpation. All other lymph nodes palpated normally. The patient was over-conditioned, had age-related dental attrition, bilateral nuclear sclerosis, and a soft, free-moving subcutaneous mass medial to the right cranial abdominal mammary gland. All other physical exam findings were within normal limits. An ultrasonographic exam was performed on the mammary mass that revealed an accumulation of hypoechoic, heterogenic fluid with tags of tissue extending from the margins of the mass into the fluid filled center. Hair over the mass was clipped and skin was prepared for a fine needle aspirate which retrieved a hemopurulent, thin and nonfetid fluid. Few epithelial cells and red blood cells, moderate neutrophils, and no bacteria were evident on cytology. An aerobic bacterial culture of the fluid yielded no growth after 4 days. The mass was diagnosed as a sterile intramammary abscess. The patient was sedated

with IV fentanyl and medetomidine then standard surgical preparation and anesthetic monitoring were used throughout the procedure. Stab incisions were made on the cranioventral and caudoventral aspects of the abscess. Compression was applied on the skin over the abscess to facilitate drainage. A gloved finger was used to digitally probe the abscess and debride tissue within the cavity. The cavity was lavaged repeatedly with dilute chlorhexidine solution and 2 Penrose drains were placed. The patient was reversed with intramuscular atipamezole. Recovery was uneventful and the patient was discharged on oral trimethoprim sulfa (960 mg twice daily for 2 weeks) and oral meloxicam (once daily for 5 days). The patient removed 1 drain tube 5 days after the procedure. Reevaluation was performed at 7 and 14 days with normal healing and minimal discharge. The second drain tube was removed 14 days after the procedure. At this abstract submission, the patient has not had recurrence of the mammary swelling. The cause of this sterile abscess is not known. Why the sterile intramammary abscess increased in size exponentially during diestrus is also unknown, though it may have to do with increased blood supply to the mammary glands during this stage of the estrous cycle. Due to financial constraints, concurrent mammary pathology could not be ruled-out histologically. Although the draining lymph node was enlarged, the pain and enlargement were likely due to reactivity from the abscess rather than neoplasia. Additional diagnostics were not performed. In addition, thoracic radiographs were not performed. This case illustrated that not all mammary masses are neoplastic in geriatric intact bitches.

Keywords: Canine, intramammary, sterile abscess, diestrus, geriatric

Reference

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Abnormal mobility in neonatal Labrador Retrievers

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A litter of 3-week-old Labrador Retrievers (n = 5) were evaluated for abnormal ambulation that was noted in 1 puppy. Upon presentation all puppies were evaluated for mobility on a blanket to improve traction. It was determined that the puppy in question had abnormal movement of the rear limbs compared to the remainder of the litter. In addition to this finding, a second puppy was determined to have an abnormally flat chest with decreased ambulation compared to littermates. The owner provided a daily weight chart and records of developmental milestones, such as opening eyes and first steps. Upon review