for the 2 outliers, one of these samples was run on the H911 one day, left overnight at 2°C, and run the next day on the VS analyzer. This same sample also showed outlier values for alkaline phosphatase, alanine aminotransferase, amylase, urea nitrogen, cholesterol, and glucose. This may have been due to the delay in testing but the sample was left in the report to demonstrate the possible effects of time lag between collection and biochemical analysis. The findings for potassium are much like those for albumin. However, the outlier did not show hemolysis of sample, but rather a marginal degree of lipemia. Effects of this on the potassium value are unknown.

The precision test on the VS analyzer showed that, in terms of repeatability, reported values of albumin, potassium, cholesterol, and total bilirubin were not consistent. All others were acceptable.

The methodologies used by the 2 analyzers differ greatly. This may have some effect on the level of agreement of measurements of biochemical analytes. Since this study was conducted using serum samples exclusively, we can not comment at this time on the use of whole blood or plasma.

Except for selected analytes in both canine and feline samples, the VS analyzer is a relatively reliable device, when compared with the H911, and could be an asset to

a veterinary practice, because it is easy to operate, has quick turnaround times, and is readily portable.

Acknowledgments

We thank Dr. Beverly J. McEwen of the Animal Health Laboratory for her time, advice, and assistance with the statistical analysis of our results and the Clinical Pathology staff for their time and technical assistance.

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PRACTITIONERS' CORNER



LE COIN DES PRATICIENS

Preputial prolapse in an alpaca

David Lane

n August 1998, a 4-year-old, male breeding alpaca presented with a 0.5-cm long preputial prolapse. The prolapsed tissue was dry and excoriated, but viable. The nerve supply to the distal half of the prepuce was blocked with local anesthetic, and the prolapsed tissue was soaked in a hyperosmotic fluid (Electrate, MTC, Cambridge, Ontario) for 10 min. Although this shrank the mass somewhat, it was still too firm to manipulate back into the sheath.

A literature search and consultations with several other practitioners yielded no information on preputial prolapse in camelids. Extrapolating from an anecdotal

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equine treatment, an attempt was made to put a constrictive bandage around the prolapsed tissue to compress it. The effort failed, largely due to the small size of the prolapse. However, after the prolapsed tissue had been firmly pinched between the fingers for approximately 20 min, it had shrunk enough to be manipulated back into the prepuce. The alpaca had been cast during this procedure, but showed minimal discomfort (the local anesthetic had worn off by the time this treatment was attempted). A purse-string suture (0 PDS, Ethicon, Somerville, New Jersey, USA) was applied around the preputial opening and left in place for 10 d. At the end of that time, thickened preputial tissue could not be palpated through the sheath. The suture was removed and the prolapse did not recur. The animal began breeding again in mid September with no mishap.