

Owner: Lambert

OSUVDL Accession#: V2009-10841
Date received: 3/25/2009**Final Report****Oregon State University Veterinary Diagnostic Laboratory**P.O. Box 429
Corvallis, OR 97339-0429
Phone: (541)737-3261 Fax: (541)737-6817
<http://www.vet.oregonstate.edu/>Veterinarian/Submitter: Account#: 22000
White Shepherd Genetics Project
PO Box 2068
Howell, MI 48844-2068Owner's Name:
Oliver Lambert**Attention:**

Date specimens received: 3/25/2009

Preliminary reports:

Phone Reports:

Final report: Fax 4/2/2009

Client Phone: (517)546-3046

Client Fax: (517)546-3048

Animal ID: Maya

Sex: Female

Age: 13 Months

Species: Canine

Breed: Shepherd

Tests Requested: Necropsy

Specimens Submitted: One dog

Previous Cases:

LABORATORY TEST STATUS	ORDERED	CURRENT STATUS
Bacterial Culture	3/26/2009	Completed 3/30/2009
Necropsy, companion animal	3/25/2009	Completed 4/2/2009
Hist: Companion An Necropsy	3/25/2009	Completed 4/2/2009
Environmental Surcharge	3/25/2009	Completed 3/25/2009

FINAL DIAGNOSIS:

Mesenteric and omental angiomatosis

COMMENT:

The striking lesion in this animal was an overgrowth of well differentiated, proliferating small blood vessels throughout the mesentery and omentum. It did not appear to be neoplastic, but rather an overgrowth of normal vascular elements of this tissue. In a phone conversation with the referring veterinarian (Dr. Fincel, 3/31/09) it was learned that a hepatic mass had been removed during surgery that was examined by IDEXX Laboratory Services; their diagnosis for that mass was a vascular hamartoma, which is a non-neoplastic, congenital overgrowth of normal tissue elements, in this case blood vessels; their diagnosis correlates very well with the current one of angiomatosis, where the vascular proliferation has been found to extend beyond the hepatic mass and into adjacent connective tissues. The lesion appears to be progressive, and I am convinced that it would have continued to be problematic for this dog, particularly with the amount of fluid that was being lost to the abdominal cavity. As stated above, this is a non-neoplastic condition that is considered congenital; the animal is born with it, but it may become apparent until later in life. I do not know if this has been demonstrated to have a genetic basis.

Owner: Lambert

OSUVDL Accession#: V2009-10841
Date received: 3/25/2009

With regard to the White Shepherd Genetics Project information sheet, I found no evidence of cancer, elbow dysplasia, hip dysplasia, degenerative joint disease, stifle or patellar disease, spinal disease, heart defects, inflammatory bowel disease, or perianal fistulas. The pancreas could not be located due to the massive vascular proliferation in the mesentery. Regarding the Checklist of Common White Shepherd Diseases, I found no evidence of any of the listed conditions..

Pathologist: Jerry R. Heidel, DVM, PhD, DACVP

Pathology

Date completed: 4/2/2009

Test: Hist:Companion An Necropsy

Animal ID: Maya, Canine

Histopathology Report:

The mesentery and omentum have marked hemorrhage and vascular congestion. Through out each tissue there are myriads of proliferating small blood vessels, ranging from capillary to arteriole/venule caliber, that encircle normal vasculature as well as permeate the connective tissue stroma. These vessels are lined by well differentiated endothelial cells. Many of these vessels, both the small proliferative ones as well as the "resident" vasculature harbor fibrin thrombi. Portions of lymph node feature hemorrhage. The spleen is markedly congested. The kidney is markedly autolyzed. Autolysis is prominent in the intestine, primarily in the mucosal layer. Liver, heart, lung, and stomach lack lesions.

Completed: 4/2/2009**Test: Necropsy, companion animal**

Date necropsy completed: 03/25/09

Number of animals: 1

Animal ID: Maya, Canine

Necropsy Results:

A 13-month old female White Shepherd is presented dead for necropsy. There is an intact sutured surgical incision along the ventral midline. The abdominal cavity contains approximately 2 liters of serosanguinous fluid. Large blood clots (approximately 100 ml total) are adherent to the hepatic lobes. The liver is pale. The spleen is enlarged. Both the omentum and mesentery are dark red and have prominent thickened vasculature; the vessels have a "string of pearls" appearance. The serosal surface of the mesentery and omentum are hyperemic. No gross abnormalities are found in the brain, spinal cord, vertebral column, right or left shoulder, elbow, hip, or stifle joints, heart, lungs, trachea, thyroid glands, stomach, small or large intestine, kidneys, or urinary bladder. The pancreas was not visible within the reddened, nodular mesenteric fat.

Date Completed: 3/25/2009**Test: Environmental Surcharge**

Bacteriology

Date completed: 3/30/2009

Test: Culture Results

Animal ID: Maya

Specimen: Abdominal fluid-swab

Isolate
Enterococcus sppGrowth
<1+

Owner: Lambert

OSUVDL Accession#: V2009-10841
Date received: 3/25/2009

Report by: Kristi Crofoot

End of Report

BULLETIN:

Test reliability/function is checked on each run date. Accuracy and/or reproducibility are proven by proficiency testing of known samples (if available). Validation of this test according to the AAVLD/OIE standards is currently in progress. An "*" after the test name indicates the documentation of test validation is complete.

2009 WNV UPDATE:

The OSU VDL in cooperation with the Oregon Department of Health Services is still participating in the national WNV surveillance program. Dead birds such as crows, jays, magpies etc (corvidae) are tested free of charge to the submitter if accompanied by the official WNV surveillance form. Likewise, sera from horses will be tested at no charge if accompanied by the WNV equine surveillance form. The surveillance forms can be downloaded from the DHS website at: <http://www.oregon.gov/DHS/ph/acd/diseases/wnvile/clinicians.shtml>