



Diagnostic Exercise

The Davis-Thompson Foundation

Case #: **211**; Month: **April**; Year: **2023**
Question Sheet

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Clinical History: This 8-week-old, female intact, potbelly piglet had been recently rescued (6 weeks previously). She presented to the VMTH Livestock Medicine Service for dyspnea and was also inappetent and lethargic. No other medical history was available, except that a littermate had passed the week previously from unknown causes. The morning of presentation, she was found in severe respiratory distress. On physical exam, she was dyspneic and tachypneic (R=120) with cyanotic mucous membranes. Flow-by oxygen therapy was initiated with no improvement of clinical signs. Euthanasia was elected after further diagnostics were declined.

Necropsy Findings: A 1.4 kg, 8-week-old female intact piglet was presented approximately 2 hours after euthanasia. Black granular debris was noted multifocally along the flanks (presumed flea dirt). Mild mucoid discharge leaked from the medial canthi of both eyes. The nasal planum was blue tinged. The thoracic cavity contained approximately 30 ml of turbulent, pale tan fluid that filled both sides of the apparently complete mediastinum. All lung lobes were collapsed, wet, and heavy, and sunk in 10% buffered formalin. The heart weighed 14.1 g (1.01% of body weight) with a right ventricular free wall thickness, left ventricular free wall thickness, and interventricular septal thickness of 1.5 mm, 4.0 mm, and 4.0 mm, respectively. There was 20 ml of watery slightly opaque effusion in the abdominal cavity. Lacey, soft, pale tan to white strands (fibrin) coated the diaphragmatic, hepatic, and intestinal surfaces. The liver weighed 40.0 g (2.86% of body weight).

Gross Images:

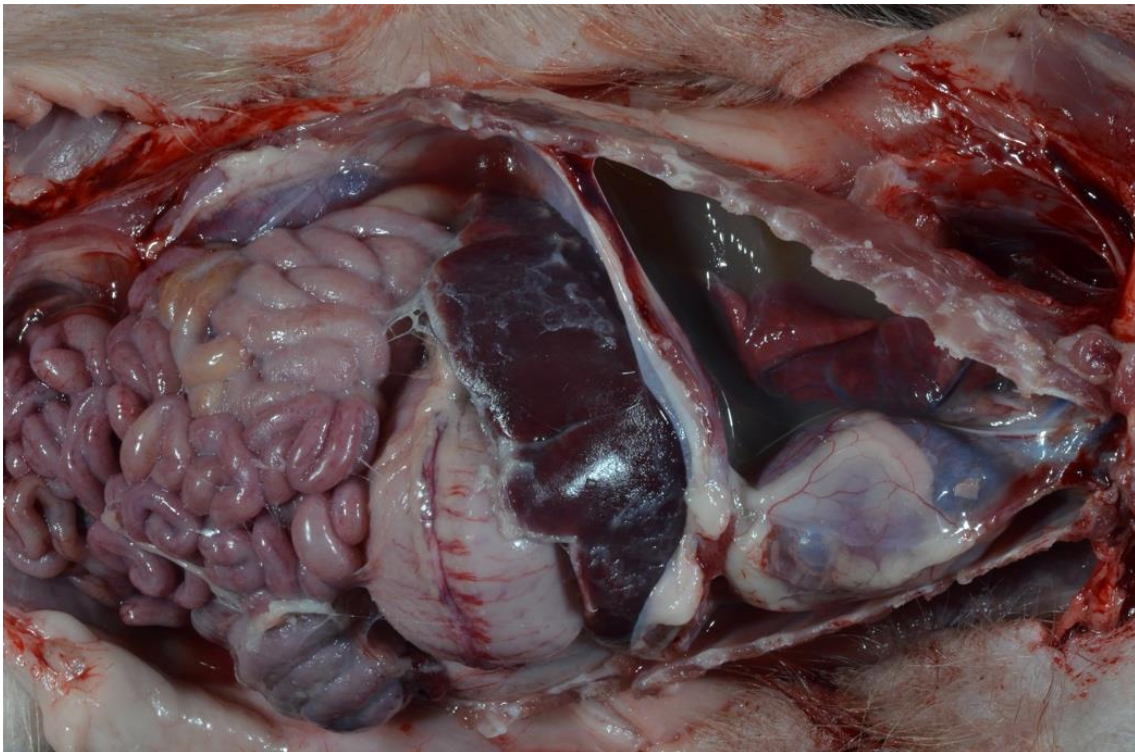


Figure 1. Fibrin strands stretched across the serosal and peritoneal surfaces of the abdomen. The thoracic and abdominal cavities contain slightly viscous, opaque tan fluid



Figure 2: A subcapsular blood clot covers the cranial pole of the kidney.

Follow-up Questions:

- *What are your morphologic diagnoses?*
- *What is your diagnostic plan?*
- *Potential causes?*

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