

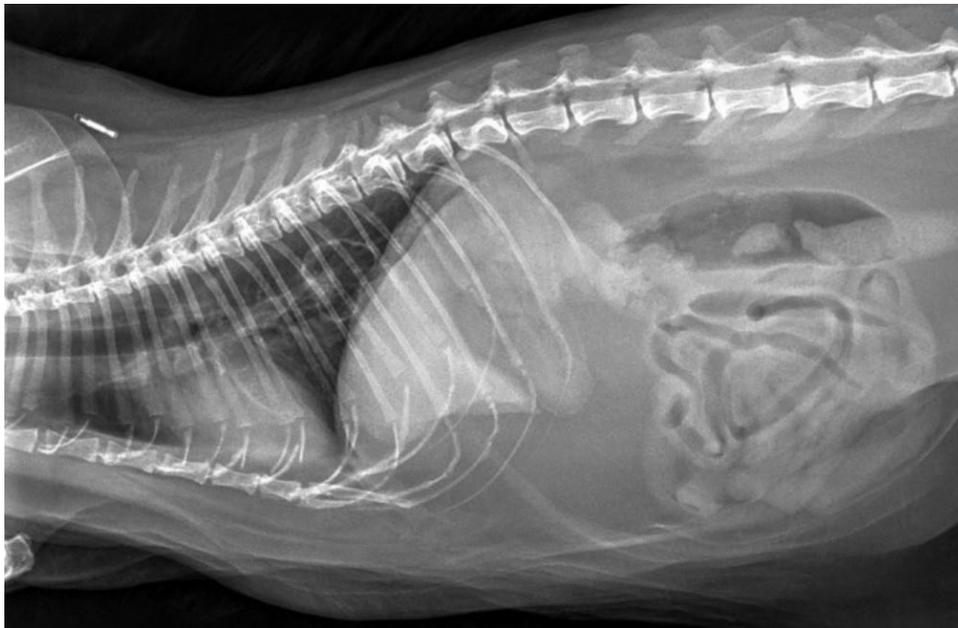
THE UNIVERSITY of TENNESSEE   
College of Veterinary Medicine

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**NPMS 2025, Case #1**

**Author:** Linden Craig, DVM, PhD Dipl. ACVP

**History/Signalment:** 16 year old domestic shorthair cat was presented to emergency clinic at 1am for possible seizures; recently has had difficulty walking. Also has chronic kidney disease. On physical exam was growling and hissing, had bilateral mydriatic pupils and absent menace. Bulla in left caudal lung lobe on radiographs. Small subcutaneous nodule on top of head. No seizures in hospital, but no response to supportive treatment. Euthanized.



**Gross findings:** 2.5cm diameter bulla in left caudal lung lobe, 1cm firm mural nodule in jejunum, 7mm firm subcutaneous nodule on head. Small kidneys with pitted cortices. Brain grossly normal.

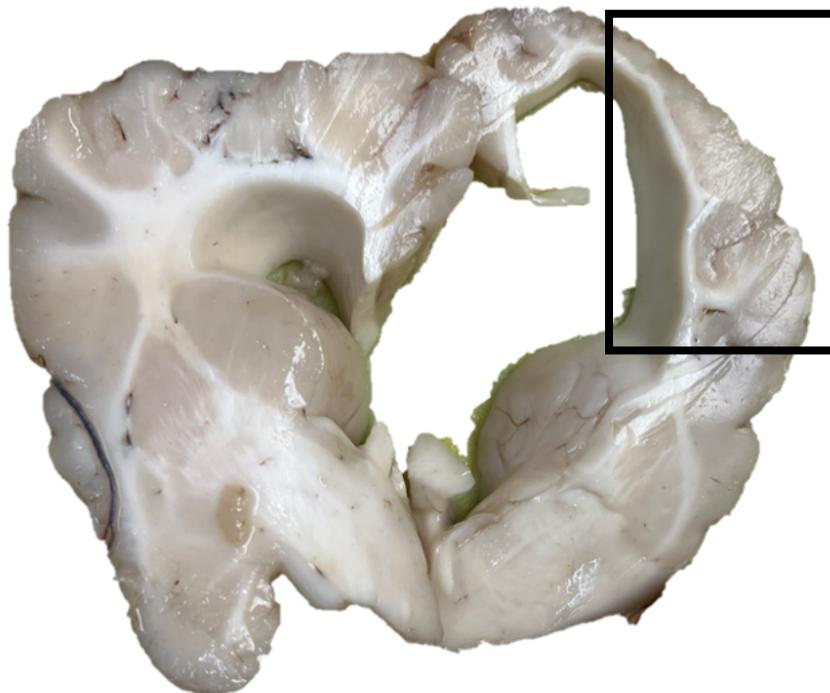


**NPMS 2025, Case # 2**

**Authors:** Emma Borkowski DVM DACVP PhD MRCVS FHEA; Mafalda Casa Nova DVM, MSc (both Ontario Veterinary College, University of Guelph, Guelph, ON, Canada)

**History/Signalment:** 5 month old Westphalian colt. History of gait abnormalities since birth. Neurological examination revealed grade 2/5 proprioceptive ataxia characterized by limb interference when circling tightly and hypermetria of all limbs when the head was elevated (mild in the hind limbs and moderate to marked in the forelimbs). Radiographic examination of the cervical spine did not identify a cause for the clinical signs.

**Gross findings:** The right and left lateral ventricles were dilated to 2 cm and 3 cm diameter, respectively, by clear fluid. The surrounding parenchyma of the right cerebral cortex was thin. A poorly defined area of mottled white tissue was observed in the thin grey matter at the level of the right thalamus. Mild static vertebral stenosis was present at the C4 vertebral body, narrowing the vertebral canal by less than 10 % of its diameter. Dynamic stenosis was observed at intervertebral joints C3-C4, C4-C5, and C6-C7, causing narrowing of the vertebral canal by 20 %, 10 %, and 10 % of its diameter, respectively.





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**College of Veterinary Medicine**

Department of Pathology

**NMPS 2025, Case #3**

**Authors:** Megan J. Crawford, DVM (University of Georgia); Brittany J. McHale, DVM, MPH, Dipl. ACVP (University of Georgia); Alvin C. Camus, DVM, PhD (University of Georgia)

**History/Signalment:** A juvenile, unknown sex hawkfish anthias (*Serranocirrhitis latus*). This aquarium-housed anthias was noted to have several days of abnormal buoyancy nonresponsive to two doses of ceftazidime. The swim bladder was enlarged on radiographs and subsequent percutaneous aspiration performed under anesthesia resulted in negative buoyancy. The fish was found deceased the next morning.

**Gross findings:** There was reddening around the left opercular region. The swim bladder was uniformly enlarged.



NPMS 2025, Case 4

Authors: Kristen L. Shekelle, DVM; Beth Boudreau, DVM, PhD, DACVIM (Neurology); Laura K. Bryan DVM, PhD, DACVP (Texas A&M University)

**History/Signalment:** A 5-month-old, male intact, mixed breed dog was presented for a 2-month history of head tremors and hindlimb ataxia. The owners had adopted the dam as a stray while pregnant and had the dog since birth. Another littermate had similar, more mild head tremors. On neurologic exam, he had an absent menace bilaterally and generalized ataxia. An MRI was unremarkable, and a CSF analysis showed a mild mononuclear pleocytosis. A complete blood count, serum chemistry, and serum ammonia concentration were all within the reference intervals. Negative infectious disease tests included *Neospora caninum* IFA, canine distemper virus PCR, *Toxoplasma gondii* IgG and IgM titers IFA, vector borne PCR panel (*Anaplasma*, *Babesia*, *Bartonella*, *Ehrlichia*, hemotropic *Mycoplasma*, *Rickettsia*), and fungal testing (*Cryptococcus* antigen latex test, *Coccidioides* AGID, *Aspergillus* antigen EIA, *Histoplasma* antibody IgG and IgM EIA, *Blastomyces* antigen EIA). The dog was presented 6 weeks later for worsening ataxia and was started on oral glucocorticoids due to concern for immune-mediated disease. The dog's ataxia and tremors continued to progress while receiving glucocorticoids, and he was presented for euthanasia two months later (at 9 months of age).

**Gross findings:** There were no significant gross findings in the brain or other organs.



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#### **NPMS 2025, Case #4**

**Authors:** Jo Moore (Moredun Research Institute), Fiona Crowden (Scotland's Rural College).

**History/Signalment:** Lamb, female, 18 days old, Suffolk cross; body weight 6.4 kg, body condition adequate. Neurologic signs, intention tremors, weakness, nystagmus, progressing over 3-5 days. Farmer “lifts” the triplets (i.e. removes one lamb from the dam) and raises them as pet lambs on milk replacer with access to lamb creep feed and herbal tubs.



**Gross findings:** Abomasum – atrophy/rupture with abomasal contents in the abdomen and subcutaneous space. Kidney – multifocal haemorrhages over the cranial cortical surface. Brain and spinal cord – no significant findings.

## COLLEGE OF VETERINARY MEDICINE

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### NPMS 2025, Case #6

**Authors:** Miranda D. Vieson, DVM, PhD, DACVP<sup>1</sup>, Nicholas Sharp, BVetMed, MS, PhD, DACVS, DACVIM (Neurology)<sup>2</sup>, and Rachel Lampe, DVM, MS, DACVIM (Neurology)<sup>2</sup>

<sup>1</sup>*Veterinary Diagnostic Laboratory, University of Illinois, Urbana-Champaign, IL*

<sup>2</sup>*Canada West Veterinary Specialists, Vancouver, BC Canada*

**History/Signalment:** 8.5-year-old, male, castrated, Mastiff cross. Acute onset of left forelimb lameness then non-ambulatory tetraparesis associated with large left disc herniation at C3-4 prompting dorsal laminectomy where a large amount of disc was removed. Disc herniation recurred followed by revision surgery. Two hemostatic products were utilized during both surgeries to cover the laminectomy window including CuraSpon, an absorbable gelatin sponge, and Vetigel, a flowable hydrogel of algae- and fungi-derived biopolymers. MRI imaging following a third recurrence of signs showed a collapsed C3-4 disc space, ventral compression, and tubular dorsal tubular material causing additional dorsolateral compression at the previous surgical site. Another surgical intervention was pursued after which the patient hypoventilated and human euthanasia was elected.

**Gross Findings:** The affected C3-C4 segment of spinal cord is submitted to the diagnostic laboratory for evaluation. A third of the leptomeninges are circumferentially reddened. The underlying spinal cord parenchyma is mildly mottled red and black. The dorsal aspect of the dura mater is markedly expanded by tightly adherent tan firm granular tissue including a focal angular hard segment (bone).

