



**Animal Emergency
and Trauma Center**

Hospital Happenings

AETC welcomes the following new team members:

Kayla Rosian

is the newest member of our reception team.

Katilyn Pruett

joins AETC as our newest kennel assistant.

Jessica Ols, Amity MacKinnon, and Traci Trubiano

are all licensed veterinary technicians. Amity is a returning team member after living in Hawaii and traveling the last few years.

Welcome all of you!



SEASONAL TIP

Although not seasonal in nature, we have seen a significant increase in canine marijuana ingestion since the drug became legal in the state of Washington. The same has occurred in other states such as Colorado. Ingestion typically occurs when an edible form of the drug is carelessly left in an area accessible by the family dog.

Symptoms vary but typically include depression, wobbly gait/incoordination, dilated pupils, slow heart rate, depression, dribbling of urine. Some animals may exhibit hyperexcitability, apprehension, vocalization.

Treatment is primarily symptomatic and supportive until the drug is metabolized. Recovery may take 24-72 hours or longer (up to 5 days) depending on the amount ingested, the drug's potency, and the animal's size. There is a wide margin of safety and toxicosis is rarely fatal. The minimum lethal dose in dogs is greater than 3 grams/kilogram which is 1000x the dose that causes behavior changes.



Case of the Quarter



Bailey, a 6 yr old spayed female Boxer, was presented for examination because she was exhibiting distended abdomen, lethargy, and had been retching at home. Gastric dilatation-volvulus (“Bloat”, GDV, gastric torsion) is a real concern and commonly seen in this breed.

A radiograph was immediately taken of Bailey’s abdomen and it was determined that she had over eaten and was



not suffering from GDV. Vomiting was induced and her stomach emptied. It was determined, based on the contents, that she had helped herself

to discarded foodstuffs from a freezer recently emptied by her owner.

She was discharged to her owner feeling much better and possibly avoiding much more serious problems.

Feline Aortic Thromboembolism

Aortic thromboembolism (ATE) is most commonly associated with heart disease in cats. It is theorized that abnormal blood flow and a hypercoagulable state contribute to the formation of a thrombus (clot) within one of the heart chambers. The clot can then break free and travel down the aorta toward the rear limbs. The clot most commonly lodges where the aorta splits to form arteries going to the rear limbs. Other less common sites include the front leg, kidneys, gastrointestinal tract, or brain. The majority of cats have severe heart disease.

Age of onset can range from 1-20 years with an average of 8 years. Males outnumber females 2:1 in frequency. Sudden onset of rear limb paralysis and pain are the most common symptoms. Respiratory distress, vocalization, and anxiety are also commonly seen. Physical exam findings include loss of femoral pulses in rear limbs, cyanotic (bluish nail beds), cool feet, decreased body temperature, heart murmur or abnormal rhythm, and/or rapid respiration.

Short and long term prognosis is poor. Most cats will reemboilize. Most cats that survive an initial episode will recover use of their limbs but approximately 15% had permanent residual effects. Expected course is days to weeks for full recovery of the hind limbs. Patients will need a full cardiology evaluation to help manage the underlying heart disease. Long term prognosis varies from 2 months to several years with the average being a few months with treatment.

