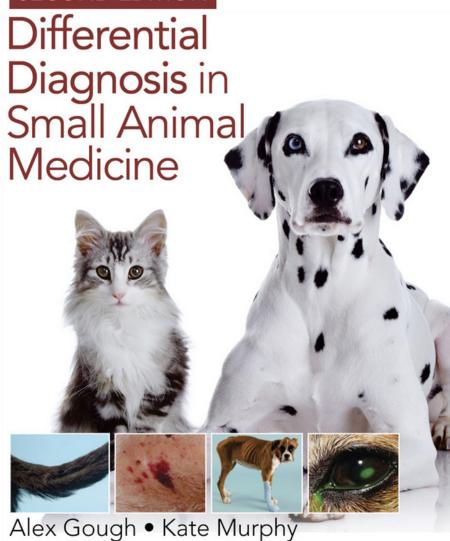
SECOND EDITION



Differential Diagnosis in Small Animal Medicine

Differential Diagnosis in Small Animal Medicine

Second Edition

By

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WILEY Blackwell

This edition first published 2015 © 2015 by John Wiley & Sons, Ltd

Registered Office

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Library of Congress Cataloging-in-Publication Data

Gough, Alex, author.

Differential diagnosis in small animal medicine / by Alex Gough, Kate Murphy. – Second edition. pages; cm

Includes bibliographical references and index.

ISBN 978-1-118-40968-8 (pbk.)

- 1. Dogs-Diseases-Diagnosis-Handbooks, manuals, etc. 2. Cats-Diseases-Diagnosis-Handbooks, manuals, etc.
- Diagnosis, Differential-Handbooks, manuals, etc. I. Murphy, K. F. (Kate F.), author. II. Title.
 [DNLM: 1. Animal Diseases-diagnosis-Handbooks. 2. Diagnosis, Differential-Handbooks.
- 3. Veterinary Medicine-methods-Handbooks. SF 748]

SF991.G672 2015

636.089'6075-dc23

2014034803

A catalogue record for this book is available from the British Library.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic books.

Cover image: dog and cat – iStockphoto © tetsuomorita; all other images – reproduced with permission of the University of Bristol Photographic Unit

Set in 9/10.5pt Sabon by SPi Publisher Services, Pondicherry, India

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Introduction

The first edition of this book was written by Alex Gough to fill a gap in the market. The aim was to provide a ready list of differential diagnoses to assist in the investigation of challenging medical cases, and the sales of the book would suggest this was a success.

This second edition has been co-authored by Alex Gough and Kate Murphy. Content has been reviewed and expanded where needed and some sections have been removed.

This book provides a ready reference for differential diagnoses for the majority of medical presentations that are encountered in general practice, including both common and uncommon conditions. This text should be of use to veterinary students, general practitioners, veterinary interns, residents and anyone who cannot fully carry these lists around in their heads. We hope clinicians find it useful.

The differential diagnosis list is one of the most important aspects of the problem-oriented approach to clinical diagnosis. For those who are not familiar with the problem-oriented approach, a brief outline follows.

As the name implies, problem-oriented medical management (POMM) concentrates on the individual problems of a patient. A differential diagnosis list should be made for each and every problem that is found in a patient, whether in the history, the physical examination, imaging or clinicopathological tests. Although superficially this may not sound very 'holistic', in fact, if all the patient's problems are considered individually, the whole patient will have been evaluated, without falling into the trap of presuming that all of the findings are caused by a single condition. Some problems are of course less specific and less emphasis is given to the problem solving on those signs, e.g. lethargy and inappetence in a vomiting, jaundiced pet.

The problem-oriented approach starts with a thorough history, and it is important to discover what the owners perceive to be the main problems – after all, they usually know their animal better than the clinician does. However, there may be relevant historical signs that the owners had not considered significant, so failing to systematically ask all the questions which could be of importance in a case can lead to overlooking important information.

In every case, a complete physical examination should be carried out, including body systems that are not apparently of immediate concern.

Once the history has been taken and the physical examination has been completed, the clinician should list every problem (ideally rank the problems) that has been discovered. Problems may include such findings as exercise intolerance, pruritus, pyrexia or a heart murmur. A differential diagnosis list should then be created for every problem. The list should be appropriate to that animal. There is no point listing feline leukaemia virus as a likely diagnosis in a dog!

An attempt should also be made to categorise the conditions in order of likelihood, or at least into common and uncommon. Although the more common conditions have been indicated in this book with an asterisk (*), there are few objective data regarding the true incidence of conditions, and the estimate of incidence is largely subjective and influenced by the authors' geographical location and caseload. Familiarity with how common conditions are and their local incidence will help prioritise differential lists. The clinician can then select diagnostic tests in a rough order of probability, although rarer but life-threatening conditions, such as hypoadrenocorticism, should also be ruled out early in the course of investigations. Some authorities rightly point out that emphasis should be placed on historical and physical signs and that 'over-investigating' can be expensive and potentially detrimental to the patient.

However, it is possible to place too much importance on probabilities and how commonly a condition occurs. The newly qualified veterinary surgeon will often look for the rare but exciting and memorable condition they learned about at college, while the experienced practitioner will often remind them that 'common things are common' and suggest they restrict their investigations only to commonly encountered conditions. The ideal approach is probably somewhere in between. The problem-oriented approach means that all differentials should have been considered and investigations can be targeted, but if a diagnosis is not made, the list should be revisited to consider other appropriate testing

Some authorities prefer to categorise the initial approach to a case differently and describe the subjective and objective assessment of a patient as

Introduction 3

part of the SOAP approach (Subjective, Objective, Assessment, Plan). The principle is the same however, in that a detailed history or physical examination is the basis of the initial differential list.

Once the differential diagnosis list has been formulated, the clinician is in a position to select appropriate tests to aid in making a definitive diagnosis. Prioritising the selection of diagnostic tests helps avoid placing undue financial strain on the client and inappropriate or unnecessary testing on the patient. Tests may be prioritised on such factors as the number of conditions which will be ruled in and out, the sensitivity and specificity of the tests; the risk/benefit to the patient ratio; the financial cost/benefit to the client ratio; the incidence or prevalence of the condition being tested for and the importance of the condition being tested for (e.g. hypoadrenocorticism is uncommon, but the consequences of failing to diagnose it may be serious).

After the results of initial testing have been obtained the clinician may be in a position to make a definitive diagnosis. Often, however, it is necessary to refine the differential list and select further appropriate testing. The differential list may be reformulated as often as is necessary until a diagnosis for that problem is made. Often, a single diagnosis will tie in all the problems satisfactorily. However, in many cases, particularly in geriatric patients, concurrent disorders will require multiple diagnoses.

For problem cases in which a clear diagnosis is not made or the patient fails to respond to treatment as expected, returning to the beginning with the history and physical examination, with the condition often having progressed, can be helpful. However, very few tests are 100% sensitive and specific, and many 'definitive' diagnoses in fact leave room for some doubt. The clinician should never be afraid to revise the initial diagnosis if further evidence comes to light. Those who are concerned that failing to make the correct diagnosis in every case is somehow a sign of inferior clinical abilities should take heart from a 2004 study from the School of Veterinary Medicine at the University of California. In this paper, clinical and post-mortem diagnoses of 623 dogs treated between 1989 and 1999 at the Veterinary Teaching Hospital were compared. It was found that the post-mortem diagnosis, presumed to be the correct diagnosis, differed from the clinical diagnosis in approximately one-third of cases.

This book is organised into five parts. Part 1 deals with signs likely to be uncovered during history taking. Part 2 deals with signs encountered at the physical examination. Part 3 deals with imaging findings, Part 4 with clinicopathological findings and Part 5 with electrophysiological findings.

The individual lists are largely organised alphabetically. The more common conditions are labelled with an asterisk, but, as stated above, whether

a condition is considered to be common is largely a matter of subjective opinion. Those conditions that are predominantly or exclusively found only in dogs are marked with a (D) and those in cats are marked with a (C).

Sources for the information in this book are wide ranging. A large number of textbooks, were consulted, but in most cases it was necessary to expand the lists found in these sources, using information from veterinary journals and conference proceedings.

Although there are undoubtedly omissions from some of the lists, encompassing as this book does virtually the whole of small animal veterinary medicine, we have tried to make it as comprehensive as possible. We would be happy to hear of any omissions, corrections or comments on the text, which can be e-mailed with any supporting references to alex.gough@bath-vetreferrals.co.uk.

The following colleagues provided comments on the text of the first edition for which we are grateful: Simon Platt BVM&S DipACVIM DipECVN MRCVS, Chris Belford BVSc DVSc FACVSc RCVS Specialist Pathologist Dip Wldl Mgt, Theresa McCann BVSc CertSAM MRCVS, Rosie McGregor BVSc CertVD CertVC MRCVS, Mark Bush MA VetMB CertSAS MRCVS, Alison Thomas BVSc CertSAM MRCVS, Mark Maltman BVSc CertSAM CertVC MRCVS, Panagiotis Mantis DVM DipECVDI MRCVS, Axiom Laboratories, Stuart Caton BA VetMB CertSAM MRCVS, Tim Knott BSc BVSc CertVetOphth MRCVS, Lisa Phillips CertVR BVetMed MRCVS, Roderick MacGregor BVM&S CertVetOphth CertSAS MRCVS and Mark Owen BVSc CertSAO MRCVS. Any errors are of course ours and not theirs. We are also grateful to Justinia Wood at Wiley for her support in this project.

Key

- * = more common condition
- (D) = condition seen exclusively or predominantly in dogs
- (C) = condition seen exclusively or predominantly in cats
- q.v. = more information can be found on this condition elsewhere in this book see Index

PART 1 HISTORICAL SIGNS

1.1 General, systemic and metabolic historical signs

1.1.1 Polyuria/polydipsia

Diet

Increased salt intake Very-low-protein diet

Drugs/toxins

Aminophylline Corticosteroids Delmadinone acetate Diuretics Ethylene glycol Indomethacin

Lilies

Lithium

Melamine

NPK fertilisers

Paraquat

Phenobarbitone

Potassium bromide

Primidone

Proligestone

Raisins/grapes

Terfenadine

Theophylline

Vitamin D rodenticides

Electrolyte disorders

Hypercalcaemia q.v.

Hypernatraemia q.v.

- Primary
- Secondary to dehydration, lack of intake, excessive loss of water, severe vomiting/diarrhoea, etc.

Hypokalaemia q.v.

Endocrine disease

Acromegaly

Diabetes mellitus*

Diabetes insipidus

- Central
- Nephrogenic

Hyperadrenocorticism

Hyperthyroidism* (C)

Hypoadrenocorticism (D)

Insulinoma

Pheochromocytoma

Primary hyperaldosteronism

Primary hyperparathyroidism

Hepatobiliary disease, e.g.

Hepatic neoplasia* q.v. Hepatitis/cholangiohepatitis* q.v.

Infectious disease, e.g.

Toxaemia, e.g.

Pyometra*

Miscellaneous

Congenital lack of ADH receptors Hypothalamic disease Pericardial effusion Polycythaemia Psychogenic*

Neoplasia*

Physiological

Exercise

High environmental temperature

Renal disorders

Acute kidney injury* q.v.
Chronic kidney disease* q.v.
Following urethral obstruction*
Glomerulonephritis
Primary renal glycosuria
Pyelonephritis
Renal medullary washout

Note: Polyuria and polydipsia are considered together here, since one will lead to the other, with only a few exceptions. These include polydipsia in the face of obstructive lower urinary tract disease or oliguric renal failure and polyuria which is not matched by fluid intake, in which case dehydration will rapidly follow. None of these scenarios are encountered commonly in practice. Polydipsia without polyuria can occur in situations of increased urinary loss of fluid, such as after strenuous exercise.

1.1.2 Weight loss

Decreased nutrient intake

Anorexia* q.v.

Diet

- Poor-quality diet
- Underfeeding

Dysphagia q.v.

Oral disease, e.g.

- Dental disease
- Masticatory myositis
- Temporomandibular joint disease

Regurgitation q.v.

Increased nutrient loss

Burns

Chronic blood loss

- Epistaxis q.v.
- Haematemesis q.v.
- Haematuria q.v.
- Melaena q.v.

Diabetes mellitus/diabetic ketoacidosis*

Effusions q.v.

Fanconi syndrome (D)

Intestinal parasites*

Neoplasia*

Protein-losing enteropathy*

Protein-losing nephropathy

Increased nutrient use

Endocrine, e.g.

Hyperthyroidism* (C)

Neoplasia*

Physiological

Cold environment

Exercise

Fever q.v.

Lactation*

Pregnancy*

Maldigestion/malabsorption

Cardiac failure

Exocrine pancreatic insufficiency

Hepatic failure/bile salt deficiency q.v.

Hypoadrenocorticism (D)

Neoplasia*

Renal disease* q.v.

Small intestinal disease* q.v., e.g.

- · Antibiotic-responsive diarrhoea
- Inflammatory bowel disease
- Lymphangiectasia

Regurgitation and vomiting* q.v.

1.1.3 Weight gain

Decreased energy utilisation, e.g.

Decreased exercise

Fluid accumulation

Ascites* *q.v.* Peripheral oedema *q.v.* Pleural effusion

Increased body fat

Overeating

Boredom
Excessive appetite (normal in some breeds)
High-calorie diets
Overfeeding*

Endocrinopathies

Acromegaly Hyperadrenocorticism Hypogonadism Hypothyroidism* (D) Insulinoma

Increased organ size

Hepatomegaly* q.v. Renomegaly q.v. Splenomegaly* q.v. Uterine enlargement q.v.

- Pregnancy*
- Pyometra*

Neoplasia

Large abdominal mass (often associated with poor body condition)*
Drugs, e.g.

Corticosteroids

1.1.4 Polyphagia

Behavioural/psychological

Boredom

Normal in some breeds*

Psychogenic, e.g. problem with satiety centre

Diet

Highly palatable food* Poor-quality food

Drugs, e.g.

Benzodiazepines Corticosteroids Mirtazapine Progestagens

Endocrine

Acromegaly Diabetes mellitus* Hyperadrenocorticism Hyperthyroidism *(C) Insulinoma

Increased nutrient loss, e.g.

Exocrine pancreatic insufficiency Malabsorption

Small intestinal disease

Increased nutrient use, e.g.

Neoplasia

Malassimilation q.v.

Physiological

Cold environment Increased exercise Lactation Pregnancy

1.1.5 Anorexia/inappetence

Anorexia, primary

Intracranial disease, e.g.

Hypothalamic neoplasia

Anorexia, secondary

Anosmia

- Chronic rhinitis q.v.
- Nasal neoplasia
- Other nasal disease
- Neurological disease

Endocrine disease, e.g.

- Diabetic ketoacidosis
- Hypoadrenocorticism (D)

Fever* q.v.

Gastrointestinal disease q.v., e.g.

- Gastritis
- Inflammatory bowel disease*

Heart disease, e.g.

Cardiac failure*

Hepatic disease* q.v.

Infection*

Metabolic abnormalities, e.g.

- Hypercalcaemia q.v.
- Hypokalaemia q.v.

Pain*

Pancreatic disease*, e.g.

Pancreatitis

Renal disease* q.v.

Respiratory disease, e.g.

- Airway disease* q.v.
- Diaphragmatic hernia
- Pleural effusion* q.v.
- Pneumonia q.v.

Diet

Recent dietary changes*
Unpalatable diet*

Difficulty with mastication

Dental disease*

Lingual disease

Oral neoplasia*

Oral ulceration, e.g.

- Ingestion of caustic or acidic substances*
- Renal disease

Difficulty with prehension

Blindness q.v.

Myopathy, e.g.

- Masticatory myositis
- Tetanus

Pain on opening jaw, e.g.

- Mandibular or maxillary fracture
- Retrobulbar abscess
- Skull fractures
- Soft tissue trauma
- Temporomandibular joint disease

Trigeminal nerve disease, e.g.

- Neoplasia
- · Trigeminal neuritis

Difficulty with swallowing

Pharyngeal disease

Foreign body*

Neoplasia

Neurological disease

Ulceration

Oesophageal disease, e.g.

Foreign body*

Megaoesophagus

Neoplasia

Stricture

Ulceration

Vascular ring anomaly

Historical Signs 13

Drugs

- Acetazolamide
- Amiodarone
- Amphotericin B
- Bethanechol
- Bromocriptine
- Butorphanol
- Cardiac glycosides
- Chlorambucil
- Diazoxide
- Doxorubicin
- Fentanyl
- Hydralazine
- Itraconazole
- Ketoconazole
- Melphalan
- Methimazole
- Mitotane
- Nicotinamide
- Oxytetracycline (C)
- Penicillamine
- Theophylline
- Trimethoprim/sulphonamide (C)

Psychological/behavioural* factors

Altered schedule New family members New house New pets

1.1.6 Failure to grow

With good body condition

Chondrodystrophy (normal in many breeds)* (D) Endocrine disorders

- Congenital hyposomatotropism (pituitary dwarfism)
- Congenital hypothyroidism

With poor body condition

Dietary intolerance

Exocrine pancreatic insufficiency*

Inadequate nutrient intake

- Anorexia q.v.
- Poor-quality diet
- Underfeeding

Cardiac disorders, e.g.

- Congenital
- Endocarditis

Endocrine disease

- Diabetes insipidus
- Diabetes mellitus*
- Hypoadrenocorticism (D)

Gastrointestinal disease, e.g.

- Histoplasmosis
- · Obstruction, e.g.
 - Foreign body*
 - Intussusception*
- Parasites*

Hepatic disorders, e.g.

- Hepatitis q.v.
- Portosystemic shunt

Inflammatory disease Oesophageal disorders, e.g.

- Megaoesophagus q.v.
- Vascular ring anomaly (e.g. persistent right aortic arch)

Renal disease

- Congenital kidney disease
- Glomerulonephritis
- Pyelonephritis

1.1.7 Syncope/collapse

Cardiovascular dysfunction

Bradyarrhythmias q.v., e.g.

- High-grade second-degree heart block
- Sick sinus syndrome (D)

• Third-degree heart block

Myocardial failure

Myocardial infarction

Cardiac disease

- Congenital, e.g.
 - Aortic stenosis (D)
 - Pulmonic stenosis (D)
- Hypertrophic obstructive cardiomyopathy
- Pericardial effusion* (D)
- Pulmonary hypertension
- Arterial obstruction, e.g.
 - Neoplasia
 - Thrombosis

Shock q.v.

Tachyarrhythmias q.v.

- Supraventricular tachycardia*
- Ventricular tachycardia*

Drugs

Anti-arrhythmics, e.g.

- Atenolol
- Digoxin
- Propranolol
- Quinidine

Sedatives, e.g.

Phenothiazines

Vasodilators, e.g.

- ACE inhibitors
- Hydralazine
- Nitroglycerine

Hypoxaemic disease

Carboxyhaemoglobinaemia Methaemoglobinaemia Pleural/thoracic disorders, e.g.

- Pleural effusion
- Pneumothorax
- Rib fractures

Respiratory disease

- Lower airway, e.g.
 - Pneumonia
 - Small airway disease
- Upper airway, e.g.
 - Brachycephalic obstructive airway syndrome
 - Laryngeal paralysis
 - Tracheal collapse
 - Tracheal obstruction
- · Ventilation-perfusion mismatch, e.g.
 - Pulmonary thromboembolism (PTE)
 - Lung collapse

Right-to-left cardiac shunt, e.g.

- Reverse-shunting patent ductus arteriosus
- Severe anaemia

Metabolic/endocrine disorders

Diabetic ketoacidosis
Hypercalcaemia/hypocalcaemia *q.v.*Hypernatraemia/hyponatraemia *q.v.*Hyperthermia/hypothermia *q.v.*Hypoglycaemia *q.v.*Hyperkalaemia/hypokalaemia *q.v.*Severe acidosis *q.v.*Severe alkalosis *q.v.*Pheochromocytoma
Hypoadrenocorticism

Miscellaneous

Insulinoma

Carotid sinus stimulation, e.g.

- Neoplasia
- Tight collar

Hyperventilation Postural hypotension Tussive/cough syncope

Myopathies

Corticosteroid myopathy Exertional myopathy Hypocalcaemic myopathy Hypokalaemic myopathy Malignant hyperthermia Mitochondrial myopathy Muscular dystrophy Polymyopathy Polymyositis Protozoal myopathy

Neurological dysfunction

Brainstem disease

Diffuse cerebral dysfunction, e.g.

- Encephalopathy
- Haemorrhage
- Hydrocephalus
- Inflammation
- Oedema
- Space-occupying lesion
- Trauma

Fibrocartilaginous embolism Glossopharyngeal neuralgia Lower motor neurone disorders

- Endocrine neuropathies, e.g.
 - Diabetes mellitus*
 - Hyperadrenocorticism
 - Hypothyroidism* (D)
- Lumbosacral disease
- Paraneoplastic neuropathies, e.g.
 - Insulinoma
- Peripheral nerve neoplasia
- Polyneuropathy, e. g.
 - Polyradiculoneuropathy

Micturition-related collapse

Narcolepsy/cataplexy

Neuromuscular junction disorders

- Botulism
- · Myasthenia gravis

Seizures q.v.

Swallowing-related collapse *Upper motor neurone disorders*

• Central vestibular disease

- Cerebellar disease
- Cerebral disease
- · Peripheral vestibular disease
- Spinal disease

Skeletal/joint disorders

Bilateral cranial cruciate disease
Bilateral hip disease
Discospondylitis
Intervertebral disc disease
Multiple myeloma
Osteoarthritis
Panosteitis
Patellar luxation
Polyarthritis

1.1.8 Weakness

Cardiovascular diseases

Bradyarrhythmias *q.v.*, e.g.

- High-grade second-degree heart block
- Sick sinus syndrome (D)
- Third-degree heart block

Congestive heart failure*

Hypertension* q.v.

Hypotension* q.v.

Pericardial effusion* q.v.

Tachyarrhythmias q.v., e.g.

Ventricular tachycardia*

• Supraventricular tachycardia

Drugs/toxins

Alphachloralose

Anticoagulant rodenticides

Anticonvulsants

Antihistamines

Blue-green algae

Cannabis

Diclofenac sodium

Glucocorticoids

Hypotensive agents, e.g.

- Beta blockers
- Vasodilators

Ibuprofen

Insulin overdosage

Iron salts

Mistletoe

Opioids

Organophosphates

Petroleum distillates

Phenoxy acid herbicides

Pyrethrin/pyrethroids

Rhododendron

Salbutamol

Sedatives

Endocrine diseases

Diabetes mellitus*

Hyperadrenocorticism

Hyperparathyroidism

Hypoadrenocorticism (D)

Hypoparathyroidism

Hypothyroidism* (D)

Insulinoma

Haematological diseases

Anaemia* q.v.

Hyperviscosity syndrome, e.g. polycythaemia

Inflammatory/Immune-mediated diseases

Chronic inflammatory conditions*

Immune-mediated haemolytic anaemia* q.v.

Immune-mediated polyarthritis

Infectious diseases*

Bacterial

Viral

Fungal

Rickettsial

Protozoal and other parasitic diseases

Metabolic disease

Acid-base disorders

- Acidosis q.v.
- Alkalosis q.v.

Electrolyte disorders*

- Hypercalcaemia*/hypocalcaemia q.v.
- Hyperkalaemia/hypokalaemia* q.v.
- Hypernatraemia/hyponatraemia q.v.

Hepatic failure* q.v.

Hyper-/hypoglycaemia q.v.

Renal disease* q.v.

Neurological diseases

Intracranial disease, e.g.

Cerebrovascular accident

• Epilepsy* q.v.

Infection

Inflammation

Space-occupying lesions

Vestibular disease

Neuromuscular disease, e.g.

- Botulism
- · Myasthenia gravis
- Myopathies
- Tick paralysis

Peripheral polyneuropathies

Drugs/toxins, e.g.

- Cisplatin
- Lead
- Vincristine

Endocrine disorders, e.g.

- Diabetes mellitus*
- Hyperadrenocorticism
- Hypothyroidism* (D)

Polyradiculoneuritis

Paraneoplastic disorders

Spinal cord disease q.v., e.g. Fibrocartilaginous embolism

Infection
Inflammation
Intervertebral disc disease* (D)
Neoplasia
Trauma*

Vestibular disease * q.v.

- Central vestibular disease
- Peripheral vestibular disease

Nutritional disorders

Cachexia, e.g. Heart failure* Neoplasia*

Inadequate calorie intake, e.g.

Anorexia* *q.v.* Poor-quality diet

Specific nutrient deficiencies, e.g.

Minerals Vitamins

Physiological factors

Over-exercise Pain* Stress/anxiety*

Respiratory diseases

Airway obstruction, e.g.

- Feline asthma* (C)
- Foreign body*
- Neoplasia *Pleural effusion*
- Pieurai effusion
- Pulmonary hypertensionPulmonary oedema* *q.v.*
- Pulmonary dedema q.v.
 Pulmonary thromboembolism

Severe pulmonary parenchymal disease

Systemic disorders

Dehydration* Fever* *q.v.* Neoplasia*

1.2 Gastrointestinal/abdominal historical signs

1.2.1 Ptyalism/salivation/hypersalivation

Drugs/toxins

Adder bites

Alphachloralose

Baclofen

Batteries

Benzodiazepines

Bethanechol

Blue-green algae

Cannabis

Carbamate

Chocolate/theobromine

Cotoneaster

Cyanoacrylate adhesives

Daffodil

Dieffenbachia

Dinoprost tromethamine

Glyphosphate

Horse chestnut

Ivermectin

Ketamine

Laburnum

Levamisole (C)

Loperamide

Metronidazole

Mistletoe

NPK fertilisers

Organophosphates

Paracetamol

Paraquat

Phenoxy acid herbicides

Plastic explosives

Plants

Pyrethrin/pyrethroids

Pyridostigmine
Rhododendron
Rowan
Terfenadine
Toads
Trimethoprim/sulphonamide (C)
Xylazine

Nausea/regurgitation/vomiting q.v.*

Neurological disease

Cataplexy/narcolepsy Hepatic encephalopathy Intracranial neoplasia Partial seizures

Normal breed variation, e.g.*

St Bernard

Oral cavity disease

Dental disease*
Foreign body*
Neoplasia*, e.g. tonsillar
Inability to close mouth, e.g.

- Mandibular trauma*
- Trigeminal nerve disease, e.g.
 - Idiopathic trigeminal neuritis
 - Infiltrating neoplasia, e.g.
 - Lymphoma
 - Nerve sheath tumours

Infection, e.g.

Rabies

Inflammation, e.g.

- Faucitis*
- · Lip fold dermatitis
- Gingivitis*
- Glossitis*
- Oesophagitis*
- Stomatitis*

Ulceration*, e.g.

- Chronic kidney disease*
- Immune-mediated disease
- · Ingestion of irritant substance

Physiological factors

Appetite stimulation*
Fear*
Stress*

Salivary gland disease q.v.

Salivary gland necrosis/sialadenitis Salivary mucocoele Sialadenosis

1.2.2 Gagging/retching

Congenital disease

Achalasia, e.g.

• Cricopharyngeal achalasia (D)

Cleft palate

Hydrocephalus

Inflammatory and infectious disease

Asthma* (C)

Bacterial encephalitis

Fungal disease

• Granuloma complex

Idiopathic glossopharyngitis

Laryngitis*

Nasopharyngeal disease, e.g. polyps (C)

Pharyngitis*

Rabies

Rhinitis*

Sialadenitis

Viral encephalitis

Neoplasia

Central nervous system Epiglottis

Lpigiottis

Inner ear

Nasal

Pharyngeal

Tonsillar

Neurological disease

Brainstem disease Cranial nerve defects (V, VII, IX, XII) Encephalitis Laryngeal paralysis* Muscular dystrophy Myasthenia gravis

Nutrition

Food texture and size

Respiratory disease (expectoration), e.g.

Bronchitis* Haemorrhage Pulmonary oedema*

Systemic disorders

Hypocalcaemia Renal disease*

Toxic

Botulism Ingestion of irritant chemical Smoke

Trauma

Foreign body* Pharyngeal haematoma Styloid apparatus trauma Tracheal rupture

1.2.3 Dysphagia

Infectious/inflammatory disease

Oral disease

Dental disease*

Osteomyelitis of the jaw

Periodontitis*

Pharyngitis*

Rabies

Retrobulbar abscess

Severe gingivitis*

Salivary gland disease, e.g.

Sialadenitis

Tooth root abscess*

Ulceration, e.g.

- Ingestion of irritant substance
- Renal disease*

Neurological/neuromuscular disease

Cricopharyngeal achalasia

Myasthenia gravis

Myopathy, e.g.

Masticatory myopathy

Trigeminal nerve disease, e.g.

- Intracranial disease
- Trigeminal neuritis

Obstruction

Foreign body*

Granuloma

Neoplasia

Sialocoele

Temporomandibular joint disease

Trauma*

Fracture

Haematoma

Laceration

1.2.4 Regurgitation

Endocrine disease

Hypoadrenocorticism (D) Hypothyroidism* (D)

Gastric disease (can develop regurgitation secondary to outflow obstruction)

Gastric dilatation/volvulus* (D)

Hiatal hernia

• Gastro-oeosophageal intussusception

Pyloric outflow obstruction, e.g.

- Foreign body*
- Neoplasia
- Pyloric stenosis

Immune-mediated disease

Dermatomyositis (D) Polymyositis Systemic lupus erythematosus

Neurological disease

Central nervous system disease, e.g.

Brainstem disease

Distemper infection (D)

Infection

Inflammation

Intracranial space-occupying lesion

Storage diseases

Trauma

Neuromuscular junctionopathies, e.g.

Anticholinesterase toxicity

Botulism

Myasthenia gravis

Tetanus

Peripheral neuropathies, e.g.

Giant cell axonal neuropathy (D)

Lead poisoning

Polyneuritis

Polyradiculoneuritis

- Idiopathic
- · Tick paralysis

Oesophageal disease

Foreign body*

Granuloma, e.g. Spirocerca lupi

Mediastinal mass (extraluminal obstruction)

Megaoesophagus

- Idiopathic
- Acquired

Neoplasia

Oesophageal diverticulum

Oesophageal fistula

Oesophageal inclusion cysts

Oesophagitis*, e.g.

- Secondary to gastric reflux
- Severe vomiting
 - Post anaesthesia
 - Idiopathic
 - Ingestion irritants

Stricture

Vascular ring anomaly, e.g.

• Persistent right aortic arch

Salivary gland disease

Sialadenitis Sialadenosis

1.2.5 Vomiting

ACUTE VOMITING

Dietary

Dietary indiscretion* Dietary intolerance* Sudden change in diet*

Drugs/toxins

Acetazolamide

Adder bite

Allopurinol

Alpha-2 agonists

Aminophylline

Amphotericin B

Apomorphine

Aspirin

Atipamezole

Atropine

Batteries

Benzalkonium chloride

Bethanechol

Blue-green algae

Borax

Bromocriptine

Calcium edetate

Carbimazole

Carboplatin

Cardiac glycosides

Cephalexin

Chlorambucil

Chloramphenicol

Chlorphenamine

Clomipramine

Colchicine

Cotoneaster

Cyclophosphamide

Cyclosporin

Cytarabine

. Daffodil

Dichlorophen

Diclofenac sodium

Dinoprost tromethamine

Dopamine

Doxorubicin

Doxycycline

Dieffenbachia

Ethylene glycol

Erythromycin

Glipizide

Glucocorticoids

Glyphosphate

Honeysuckle

Horse chestnut

Hydralazine

Ibuprofen

Indomethacin

Ipecacuanha

Iron/iron salts

Ivermectin

Ketoconazole

Laburnum

Lead

Levamisole

Lignocaine

Loperamide

Medetomidine

Melphalan

Metaldehyde

Methimazole

Metronidazole

Mexiletine

Misoprostol

Mistletoe

Mitotane

Naproxen

Nicotinamide

Nitroscanate

NPK fertilisers

NSAIDs

Paracetamol

Paraquat

Penicillamine

Pentoxifylline

Petroleum distillates

Phenoxy acid herbicides

Phenytoin

Pimobendan

Piperazine

Plastic explosives

Poinsettia

Potassium bromide

Procainamide

Propantheline bromide

Pyracantha

Pyrethrin/pyrethroids

Pyridostigmine

Rhododendron

Rowan

Salt

Selective serotonin reuptake inhibitors

Sildenafil

Sotalol

Strychnine

Sulphasalazine

Terfenadine

Tetracycline

Theobromine

Theophylline

Tricyclic antidepressants

Trimethoprim/sulphonamide

Ursodeoxycholic acid

Vitamin D rodenticides

Xylazine

Yew

Zinc

Endocrine disease, e.g.

Diabetic ketoacidosis* Hypoadrenocorticism (D)

Gastrointestinal disease

Colitis*

Constipation/obstipation* q.v.

Foreign body*

Gastric dilatation/volvulus*

Gastric or duodenal ulceration*

Gastritis/enteritis*

Haemorrhagic gastroenteritis*

Infection, e.g.

- Bacterial*
- Parasites*
- Viral*

Inflammatory bowel disease* Intestinal volvulus Intussusception Neoplasia*

Metabolic/systemic disease

Hypercalcaemia/hypocalcaemia q.v.
Hyperkalaemia/hypokalaemia* q.v.
Hyperthermia* q.v.
Liver disease* q.v.
Pancreatitis*
Peritonitis*
Prostatitis*
Pyometra* (D)
Renal disease* q.v.
Septicaemia*
Urinary obstruction*
Vestibular disease*

Miscellaneous conditions

Central nervous system disease Diaphragmatic hernia Motion sickness* Psychogenic

CHRONIC VOMITING

Endocrine disease, e.g.

Diabetes mellitus* Hyperthyroidism* (C) Hypoadrenocorticism (D)

Gastrointestinal disease

Bacterial overgrowth Colitis*

Constipation/obstipation* q.v.

Enterogastric reflux

Gastric motility disorders*

Gastric or duodenal ulceration*

Gastritis/enteritis*

Infection, e.g.

- Bacterial
- Fungal
- Parasites*
- Viral

Inflammatory bowel disease

- Eosinophilic
- Lymphocytic
- Lymphoplasmacytic
- Mixed

Irritable bowel syndrome

Neoplasia*

- Intestinal, e.g. lymphoma and adenocarcinoma
- Gastrinoma
- Mast cell tumour

Obstruction, e.g.

- Foreign body*
- Inflammatory bowel disease (gastritis or enteritis)
- Intussusception*
- Neoplasia*
- Pyloric stenosis
- Ulceration

Metabolic/systemic disease

Heartworm disease

Hypercalcaemia/hypocalcaemia q.v.

Hyperkalaemia/hypokalaemia q.v.

Liver disease* q.v.

Pancreatitis*

Prostatitis

Pyometra* (D)

Renal disease* q.v.

Septicaemia

Miscellaneous conditions

Abdominal neoplasia Diaphragmatic hernia Sialadenitis Hydrocephalus Brain tumour

1.2.6 Diarrhoea

SMALL INTESTINAL DIARRHOEA

Diet

Dietary intolerance, e.g.
Food hypersensitivity*
Food intolerance
Gluten-sensitive enteropathy

Overfeeding

Sudden change in diet

Drugs/toxins (see Large intestinal diarrhoea)

Extra-gastrointestinal disease

Exocrine pancreatic insufficiency*
Hepatic disease* q.v.
Hyperthyroidism* (C)
Hypoadrenocorticism (D)
IgA deficiency
Nephrotic syndrome
Pancreatic duct obstruction
Pancreatitis*
Renal disease* q.v.
Right-sided congestive heart failure*
Systemic lupus erythematosus
Uraemia

Idiopathic disease

Lymphangiectasia

Infection

Bacterial*, e.g.

Campylobacter spp.

Clostridium spp.

E. coli

Salmonella spp.

Staphylococcus spp.

Small intestinal bacterial overgrowth/antibiotic-responsive diarrhoea

Fungal

Helminths*

Hookworm

Roundworm

Tapeworm

Whipworm

Protozoal*, e.g.

Cryptosporidiosis

• Giardia spp.

Rickettsial

Viral*, e.g.

Coronavirus

Feline leukaemia virus (C)

Parvovirus

Inflammatory/immune-mediated disease

Basenji enteropathy (D)

Duodenal ulceration

Haemorrhagic gastroenteritis*

Inflammatory bowel disease*

- Eosinophilic
- Granulomatous
- Lymphoplasmacytic

Protein-losing enteropathy and nephropathy of the soft-coated wheaten terrier (D)

Motility disorders, e.g.

Dysautonomia Enteritis Functional obstruction (ileus) Hypoalbuminaemia Hypokalaemia

Neoplasia*, e.g.

Adenocarcinoma Carcinoid tumours Leiomyoma Lymphoma Mast cell tumours Sarcoma

Partial obstruction*

Foreign body Intussusception Neoplasia Stricture

LARGE INTESTINAL DIARRHOEA

Diet*

Dietary hypersensitivity Dietary indiscretion

Drugs/toxins

Acetazolamide

Adder bite Allopurinol

Aminophylline

Amoxicillin

Amphotericin B

Ampicillin

Atenolol

Benzalkonium chloride

Bethanechol

Blue-green algae

Borax

Calcium edetate

Carbamate insecticides

Cardiac glycosides

Cephalexin

Chloramphenicol

Chlorphenamine

Colchicine

Cotoneaster

Cyclophosphamide

Cyclosporin

Cytarabine

Daffodil

Diazoxide

Diclofenac sodium

Dieffenbachia

Doxycycline

Glyphosphate

Honeysuckle

Horse chestnut

Ibuprofen

Indomethacin

Iron/iron salts

Laburnum

Lactulose

Levamisole

Lithium

Loperamide

Mebendazole

Metaldehyde

Methiocarb

Misoprostol

Mistletoe

Mitotane

Naproxen

Nicotinamide

NPK fertilisers

NSAIDs

Organophosphates

Oxytetracycline

Pamidronate

Pancreatic enzyme supplementation

Paracetamol

Paraquat

Pentoxifylline

Petroleum distillates

Phenoxy acid herbicides

Piperazine

Poinsettia

Procainamide

Pyracantha

Pyrethrin/pyrethroids

Pyridostigmine

Quinidine

Rhododendron

Rowan

Salt

Selective serotonin reuptake inhibitors

Sotalol

Theobromine

Theophylline

Vitamin D rodenticides

Yew

Zinc sulphate

Extra-intestinal conditions

Metastatic neoplasia

Neurological disease leading to ulcerative colitis

Pancreatitis

Toxaemia

Uraemia

Idiopathic conditions

Fibre-responsive large-bowel diarrhoea Irritable bowel syndrome

Infection

Bacterial*, e.g.

Campylobacter spp.

Clostridium difficile

Clostridium perfringens E. coli Salmonella spp. Yersinia enterocolitica

Fungal, e.g. Histoplasmosis Protothecosis

Parasitic*, e.g.

Amoebiasis *Ancylostoma* spp.

Balantidium coli

Cryptosporidiosis

Giardia spp.

Heterobilharzia americana

Roundworm

Tapeworm

Tritrichomonas foetus (C)

Uncinaria spp. Whipworm

......

Protozoal, e.g. Toxoplasmosis

Viral*

Coronavirus

Feline immunodeficiency virus (C)

Feline infectious peritonitis (C)

Feline leukaemia virus (C)

Parvovirus

Inflammatory/Immune-mediated disease

Histiocytic ulcerative colitis or granulomatous colitis of boxers (and other breeds) (D) Inflammatory bowel disease*

Neoplasia*

Benign, e.g. Adenomatous polyps Leiomyoma

Malignant, e.g. Adenocarcinoma Lymphoma

Obstruction

Caecal inversion Foreign body* Intussusception* Neoplasia Stricture

Miscellaneous

Secondary to chronic small intestinal disease

Note: Perirectal diseases, e.g. anal sac disease, anal furunculosis, perineal hernia, rectal prolapse and perianal adenoma, may cause signs mimicking large-bowel disease (tenesmus, haematochezia, mucoid stool).

1.2.7 Melaena

Extra-gastrointestinal disease

Hypoadrenocorticism (D)

Liver disease* q.v.

Mastocytosis

Pancreatitis*

Septicaemia*

Shock* q.v.

Systemic hypertension* q.v.

Uraemia* q.v.

Vasculitis, e.g.

Rocky Mountain spotted fever

Coagulopathy q.v., e.g.

Anticoagulant toxicity* q.v.

Congenital clotting factor deficiency q.v.

Disseminated intravascular coagulation

Thrombocytopenia q.v.

Thrombocytopathia

von Willebrand's disease (D)

Gastrointestinal disease

Enteritis*

Gastritis*

Oesophagitis

Parasites*

Gastrointestinal ulceration*

Gastrinoma

Helicobacter infection

Inflammatory gastroenteric disease*

Neurological disease

Post foreign body*

Stress

Uraemia* q.v.

Drugs, e.g.

- Glucocorticoids*
- NSAIDs*

Ischaemia, e.g.

Mesenteric avulsion

Mesenteric thrombosis/infarction

Mesenteric volvulus

Post gastric dilatation/volvulus* (D)

Neoplasia*, e.g.

Adenocarcinoma

Leiomyoma

Leiomyosarcoma

Lymphoma

Ingestion of blood

Nasal disease (see also Epistaxis), e.g.

Coagulopathy* q.v.

Neoplasia*

Trauma*

Oropharyngeal haemorrhage

Coagulopathy* q.v.

Neoplasia*

Trauma*

Respiratory disease (see also Haemoptysis), e.g.

Coagulopathy* q.v.

Exercise-induced pulmonary haemorrhage

Parasites, e.g. Angiostrongylus vasorum

Neoplasia*

Ruptured aneurysm

Trauma*

1.2.8 Haematemesis

Extra-gastrointestinal disease

Hypoadrenocorticism (D)

Liver disease* q.v.

Mastocytosis

Pancreatic disease

Septicaemia*

Shock*

Systemic hypertension* q.v.

Uraemia* q.v.

Coagulopathies q.v., e.g.

Anticoagulant toxicity*

Congenital clotting factor deficiency

Disseminated intravascular coagulation

Thrombocytopenia

Thrombocytopathia

von Willebrand's disease(D)

Toxins, e.g.

Calcipotriol

Paraquat

Vasculitis, e.g.

Rocky Mountain spotted fever

Gastrointestinal disease

Gastritis*

Haemorrhagic gastroenteritis

Oesophagitis

Gastrointestinal ulceration*

Drugs, e.g.

- NSAIDs
- Glucocorticoids*

Gastrinoma

Helicobacter infection*

Inflammatory gastroenteric disease*

Neurological disease

Post foreign body*

Stress

Systemic mastocytosis

Uraemia*

Ischaemia, e.g.

Post gastric dilatation/volvulus* (D)

Neoplasia*, e.g.

- Adenocarcinoma
- Lymphoma

Ingestion of blood

Nasal disease (see also Epistaxis), e.g.

Coagulopathy* q.v.

Infection, e.g. fungal

Neoplasia*

Trauma*

Oropharyngeal haemorrhage

Coagulopathy* q.v.

Neoplasia*

Trauma*

Respiratory disease (see also Haemoptysis), e.g.

Coagulopathy* q.v.

Exercise-induced pulmonary haemorrhage

Parasites

Neoplasia*

Ruptured aneurysm

Trauma*

1.2.9 Haematochezia

Drugs

Glucocorticoids

Extra-gastrointestinal disease

Neurological disease leading to ulcerative colitis

Coagulopathies q.v., e.g.

Anticoagulant toxicity*
Congenital clotting factor deficiency *q.v.*Disseminated intravascular coagulation
Thrombocytopenia *q.v.*von Willebrand's disease (D)

Perirectal disease, e.g.

Anal furunculosis* Anal sac disease* Perianal adenoma* Perineal hernia* Rectal prolapse*

Gastrointestinal disease

Algal, e.g.
Protothecosis

Bacterial*, e.g.

Campylobacter spp. Clostridium spp. E. coli Salmonella spp.

Dietary

Dietary hypersensitivity Dietary indiscretion

Fungal, e.g. Histoplasmosis

Idiopathic conditions

Fibre-responsive large-bowel diarrhoea Caecal disease, e.g.

- Typhlitis
- Inversion

Haemorrhagic gastroenteritis Irritable bowel syndrome

Inflammatory/immune-mediated disease

Histiocytic ulcerative colitis or granulomatous colitis of boxers (and other breeds) (D) Inflammatory bowel disease*

Neoplasia

- · Benign, e.g.
 - Adenomatous polyps
 - Leiomyoma
- Malignant, e.g.
 - Adenocarcinoma
 - Lymphoma

Obstructive disease

Foreign body*
Intussusception*

Parasitic*, e.g.

Amoebiasis
Ancylostoma spp.
Balantidium coli
Cryptosporidiosis
Giardia spp.
Heterobilharzia americana
Roundworm
Tapeworm

• Toxoplasmosis

Tritrichomonas foetus (C)

Uncinaria spp.

Whipworm

Viral*

Coronavirus

Feline immunodeficiency virus (C)

Feline infectious peritonitis (C)

Feline leukaemia virus (C)

Parvovirus

1.2.10 Constipation/obstipation

Behavioural factors*, e.g.

Change of daily routine

Dirty litter box

Hospitalisation

Inadequate water intake

Inadequate exercise

Novel litter substrate

Congenital conditions

Atresia ani

Atresia coli

Diet

Ingestion of hair, bones and foreign material Low-fibre diets

Drugs/toxins

Aluminium antacids

Butylscopolamine (hyoscine)

Diphenoxylate

Diuretics

Loperamide

Opioids

Propantheline bromide

Sucralfate

Verapamil

Vincristine

Idiopathic conditions

Idiopathic megacolon*

Neuromuscular disease

Feline dysautonomia (C) (also reported rarely in dogs)

Lumbosacral disease*

Pelvic nerve disease, e.g.

Traumatic*

Obstructive disease

Intraluminal/intramural

Diverticulum

Foreign body*

Neoplasia*, e.g.

- Adenoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma

Stricture

Extraluminal

Granuloma

Neoplasia*

Pelvic fracture*

Perineal hernia*

- Prostatic disease (D)
 Abscess
 - Benign prostatic hypertrophy*
 - Neoplasia
 - Prostatitis*

Sublumbar lymph node disease

Painful conditions

Anal furunculosis*

Anal or rectal inflammation*

Anal or rectal mass*

Anal or rectal stricture

Anal sac disease*, e.g.

- Abscess
- Anal sacculitis

Orthopaedic disease causing pain and failure to posture Pelvic trauma (soft tissue or bony)*

Perianal fistula Proctitis Spinal cord disease*

Prolonged colonic distension, e.g.

Narrowing of the pelvic canal post fracture*

Systemic disease

Dehydration*
Hypercalcaemia *q.v.*Hypokalaemia* *q.v.*Hypothyroidism* (D)
Hyperparathyroidism

1.2.11 Faecal tenesmus/dyschezia

Anal sac disease, e.g.

Abscess/cellulitis Anal sacculitis* Impaction Neoplasia Stricture

Caudal abdominal mass*

Colorectal disease, e.g.

Colitis *q.v.*Congenital disease
Foreign body
Large intestinal neoplasia
Megacolon
Polyp
Stricture

Constipation/obstipation q.v.

Diet

Excess bone Excess fibre

Perianal disease, e.g.

Anal furunculosis/perianal fistulas* (D)

Perianal adenoma*

Perineal hernia*

Rectal prolapse*

Pelvic narrowing

Prostatic disease (D)

Abscess

Benign prostatic hypertrophy*

Neoplasia

Paraprostatic cyst

Prostatitis*

Trauma, e.g.

Pelvic fracture*

Urogenital disease*, e.g.

Lower urinary tract disease Urethral obstruction

1.2.12 Faecal incontinence

Anal sphincter incompetence

Myopathy

Neoplasia*

Trauma*

latrogenic disease, e.g.

Damage to anal sphincter during anal sacculectomy

Neurological, e.g.

Cauda equina syndrome

Degenerative myelopathy/CDRM* (D)

Distemper encephalomyelitis

Dysautonomia

Lumbosacral stenosis

Myelodysplasia/spinal dysraphism

Peripheral neuropathy Polyneuropathy Sacrocaudal dysgenesis Spinal arachnoid cysts Spinal trauma

Perianal disease, e.g.

Perianal fistula* Neoplasia

Reservoir incontinence

Behavioural CNS disease *q.v.* Colitis* Constipation Diet* Neoplasia* Perineal hernia

1.2.13 Flatulence/borborygmus

Aerophagia*

Competitive/aggressive eating Nervous animal

Diet

High-fibre diets Milk products/lactase deficiency Spoiled food

Drugs/toxins, e.g.

Lactulose Metaldehyde

Maldigestion, e.g.

Exocrine pancreatic insufficiency

Malabsorption, e.g.

Inflammatory bowel disease

1.3 Cardiorespiratory historical signs

1.3.1 Coughing

Drugs/toxins/irritants

Benzalkonium chloride ingestion Chemical fume inhalation Potassium bromide (C) Smoke inhalation

Infection

Bacterial, e.g. Bordetellosis*

Mycoplasma

Fungal, e.g. Coccidioidomycosis

*Viral, e.g.*Canine distemper*

Parasitic

Aelurostrongylus abstrusus (C) Angiostrongylus vasorum (D) Dirofilaria immitis Oslerus osleri (D) Paragonimiasis

Inflammatory/immune-mediated disease

Asthma* (C) Chronic bronchitis*

Miscellaneous conditions

Aspiration pneumonia Idiopathic pulmonary fibrosis Inhaled foreign body Laryngeal paralysis Left atrial enlargement* Lung lobe torsion Primary ciliary dyskinesia

Neoplasia

Adenocarcinoma Alveolar carcinoma Bronchial gland carcinoma Metastatic disease Squamous cell carcinoma

Pulmonary haemorrhage

Coagulopathy q.v. Exercise induced Neoplasia* Traumatic

• Angiostrongylus vasorum (D)

Pulmonary oedema (D)

Airway obstruction Cardiogenic* Electrocution Hypoglycaemia Hypoproteinaemia q.v. Iatrogenic

Ketamine

Neurological

- Cranial trauma
- Seizures

Obstruction of lymphatic drainage Primary alveolar-capillary membrane injury Re-expansion Strangulation

Dyspnoea/tachypnoea

See Section 2.3.1.

1.3.3 Sneezing and nasal discharge

Anatomical deformities

Acquired nasopharyngeal stenosis Cleft palate Oronasal fistula

Congenital disease

Ciliary dyskinesia

Dental disease

Tooth root abscess*

Infection

Bacterial

Bordetella bronchiseptica* Chlamydophila spp.* Coliforms Mycoplasma spp. Pasteurella spp. Staphylococcus spp. Streptococcus spp.

Fungal

Aspergillosis
Cryptococcosis
Exophiala jeanselmei
Penicillium spp.
Phaeohyphomycosis
Rhinosporidium seeberi

Parasitic

Cuterebra spp. Eucoleus böehmi Linguatula serrata Pneumonyssoides caninum

Viral

Canine distemper virus* (D) Canine infectious tracheobronchitis* (D) Feline calicivirus* (C)
Feline herpesvirus* (C)
Feline immunodeficiency virus* (C)
Feline leukaemia virus* (C)
Feline poxvirus
Feline reovirus (C)

Inflammatory disease

Allergic rhinitis*
Granulomatous rhinitis
Lymphoplasmacytic rhinitis*
Nasopharyngeal polyp* (C)

Neoplasia

Adenocarcinoma*
Chondrosarcoma
Fibrosarcoma
Haemangiosarcoma
Lymphoma*
Mast cell tumour
Melanoma
Neuroblastoma
Osteosarcoma
Squamous cell carcinoma*
Transmissible venereal tumour
Undifferentiated carcinomas*

Physical

Foreign body* Irritant gases Trauma

Systemic disease (see also Epistaxis)

Coagulopathy *q.v.*Hypertension *q.v.*Hyperviscosity syndrome
Vasculitis

- Ehrlichiosis
- Rocky Mountain spotted fever

1.3.4 Epistaxis

Coagulopathies q.v.

Angiostrongylus vasorum infection Coagulation factor deficiency q.v. Platelet disease

- Thrombocytopathia q.v.
- Thrombocytopenia q.v.

Miscellaneous conditions

Hypertension q.v.

Hyperviscosity syndrome e.g.

- Hyperlipidaemia,
- Polycythaemia

Increased capillary fragility Thromboembolism

Nasal disease

Dental disease

Oronasal fistula
Tooth root abscess*

Infection

Bacterial

- Mycoplasma spp.*
- Pasteurella spp.*

Fungal

- Aspergillosis
- Cryptococcus spp.
- Exophiala jeanselmei
- Penicillium spp.
- Phaeohyphomycosis
- Rhinosporidium seeberi

Parasitic

- Cuterebra
- Eucoleus böehmi
- Linguatula serrata
- Pneumonyssoides caninum

Viral

- Canine distemper virus* (D)
- Canine infectious tracheobronchitis* (D)
- Feline calicivirus* (C)
- Feline herpesvirus* (C)
- Feline immunodeficiency virus* (C)
- Feline leukaemia virus* (C)

Inflammatory disease

Allergic rhinitis*

Lymphoplasmacytic rhinitis*

Neoplasia

Adenocarcinoma*

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Lymphoma*

Mast cell tumour

Melanoma

Osteosarcoma

Squamous cell carcinoma*

Transmissible venereal tumour Undifferentiated carcinomas*

Physical

, Trauma*

1.3.5 Haemoptysis

Cardiovascular disease

Arteriovenous fistula Bacterial endocarditis Dirofilaria immitis (D) Pulmonary oedema* q.v.

latrogenic

Diagnostic procedures, e.g.

- Bronchoalveolar lavage
- Bronchoscopy

- Lung aspirate
- Trans-tracheal wash

Endotracheal intubation*

Pulmonary disease

Pulmonary hypertension Pulmonary thromboembolism

Infection

Bacterial

- Nocardiosis
- Pneumonia*
- Pulmonary abscessation

Fungal

- Blastomycosis
- Coccidioidomycosis
- Histoplasmosis

Parasitic

- Aelurostrongylus abstrusus (C)
- Angiostrongylus (D)
- Capillaria aerophila
- Dirofilaria immitis (D)
- Paragonimus kellicotti

Viral

· Infectious tracheobronchitis*

Inflammatory

Bronchiectasis

Bronchopneumonia

Chronic bronchitis* (D)

Pulmonary infiltrate with eosinophils

Neoplastic

Adenocarcinoma

Chondrosarcoma

Metastatic tumours*

Squamous cell carcinoma

Physical

Abscess

Bronchial gland carcinoma

Foreign body Lung lobe torsion Trauma, e.g.

Pulmonary contusions

Systemic disease

Coagulation factor deficiency *q.v.* Thrombocytopathia *q.v.* Thrombocytopenia *q.v.*

1.3.6 Exercise intolerance

Cardiovascular disease, (see Section 1.1.7) e.g.

Arrhythmias
Congestive heart failure*
Cyanotic heart disease *q.v.*Myocardial dysfunction
Obstruction to ventricular outflow

Drugs, e.g.

Drugs causing hypotension

Metabolic/endocrine disease, e.g.

Anaemia*
Hyperthyroidism* (C)
Hypoadrenocorticism (D)
Hypoglycaemia *q.v.*Hypokalaemic polymyopathy
Hypothyroidism* (D)
Malignant hyperthermia

Neuromuscular/musculoskeletal disease, e.g.

Botulism Cervical myelopathy (D) Coonhound paralysis Ischaemic neuromyopathy* (C) Intermittent claudication Lumbosacral pain Myasthenia gravis

Myopathies

- Congenital
- Hypokalaemic
- Toxic

Peripheral neuropathy q.v.

Polyarthritis

Polymyositis

Protozoal myositis

Tick paralysis

Respiratory disease q.v., e.g.

Idiopathic pulmonary fibrosis

Pleural effusion*

Pulmonary oedema*

Upper airway obstruction q.v.

1.4 Dermatological historical signs

1.4.1 Pruritus

Drugs/toxins

Methimazole Paracetamol

Endocrine disorders

Calcinosis cutis*

Hyperthyroidism* (C)

Predisposing to pyoderma

- Hyperadrenocorticism
- Hypothyroidism* (D)

Environmental

Contact irritant dermatitis*
Sunburn/solar dermatitis*

Immune-mediated disease

Drug eruptions
Discoid lupus erythematosus
Systemic lupus erythematosus

Allergy/hypersensitivity

Atopy*

Contact allergy*

Food hypersensitivity*

Hormonal hypersensitivity (D)

Parasite hypersensitivity*, e.g.

- Fleas
- Mosquitoes

Pemphigus complex

Pemphigus erythematosus

Pemphigus foliaceus

Pemphigus vegetans

Pemphigus vulgaris

Bullous pemphigoid

Infection

Bacterial

Deep pyoderma*

Surface pyoderma/acute moist dermatitis (wet eczema*)

Superficial bacterial folliculitis*

Fungal

Candidiasis

Dermatophytosis*

Malassezia dermatitis*

Pythiosis

Parasitic

Cheyletiellosis

Demodicosis*

Dermanyssus gallinae

Dirofilariasis

Dracunculiasis

Fleas*

Hookworm dermatitis

Lynxacarus radovskyi (C)

Notoedres cati (C)

Otobius megnini (D)

Otodectes cynotis

Pediculosis

Pelodera dermatitis

Pneumonyssoides caninum (D) Sarcoptic mange* (D) Schistosomiasis Trombiculiasis*

Keratinisation disorders

Acne* Idiopathic facial dermatitis Primary seborrhoea Vitamin A-responsive dermatosis

Miscellaneous

Feline hypereosinophilic syndrome (C) Idiopathic sterile granulomatous dermatitis Sterile eosinophilic pustulosis Subcorneal pustular dermatosis Urticaria pigmentosa Waterline disease of black Labradors (D) Zinc-responsive dermatosis

Neoplasia

Cutaneous T cell lymphoma Mast cell tumour* Mycosis fungoides Other neoplasia with secondary pyoderma Paraneoplastic pruritus

Neurological, e.g.

Syringohydromyelia

1.5 Neurological historical signs

1.5.1 Seizures

INTRACRANIAL

Congenital

Ceroid lipofuscinosis Chiari-like malformation Cortical dysplasia Hydrocephalus Intracranial arachnoid cysts Lissencephaly Lysosomal storage diseases Organic acidurias, e.g.

• L-2-hydroxyglutaricaciduria

Idiopathic* Infectious

Bacterial, e.g. Nocardiosis

Pasteurella spp. Staphylococcus spp.

Fungal

Aspergillosis Blastomycosis Coccidioidomycosis Cryptococcosis Histoplasmosis Mucormycosis

Parasitic

Aberrant migration of *Cuterebra* spp. Dirofilariasis

Protozoal, e.g.

Neosporosis (D) Toxoplasmosis

Rickettsial encephalitis

Ehrlichiosis/anaplasmosis Rocky Mountain spotted fever

Viral

Canine distemper* (D)
Canine herpesvirus (D)
Eastern equine encephalitis
Feline immunodeficiency virus* (C)

Feline infectious peritonitis* (C) Feline leukaemia virus* (C) Pseudorabies Rabies

Inflammatory/immune-mediated disease

Breed-specific necrotising meningoencephalitis Distemper vaccine associated (D) Eosinophilic meningoencephalitis Granulomatous meningoencephalomyelitis* (D) Steroid-responsive meningoencephalitis

Neoplasia

Local extension
Middle-ear tumour
Nasal/paranasal sinus tumour
Pituitary tumour
Skull tumour

Metastatic, e.g.

Haemangiosarcoma Lymphoma Malignant melanoma Mammary carcinoma Prostatic carcinoma Pulmonary carcinoma Teratoma

Primary intracranial

Astrocytoma
Choroid plexus tumours
Ependymoma
Ganglioblastoma
Glioma
Medulloblastoma
Meningioma
Neuroblastoma
Oligodendroglioma

Physical

Trauma

Vascular

Haemorrhage, e.g.

Angiostrongylus vasorum

Coagulopathy q.v.

Feline ischaemic encephalopathy (C)

Hypertension q.v.

Trauma

Infarction, e.g.

Thromboembolism

EXTRACRANIAL

Drugs/toxins

Alphachloralose

Arsenic

Baclofen

Blue-green algae

Borax

Cannabis

Carbamate

Doxapram

Ethylene glycol

Glyphosphate

Honeysuckle

Hymenoptera stings

Ibuprofen

Iodine-containing myelographic contrast media

Laburnum

Lead

Lignocaine

Metaldehyde

Metronidazole

Mexiletine

Mistletoe

Organophosphates

Paracetamol

Petroleum distillates

Phenoxy acid herbicides

Piperazine

Plastic explosives

Pyrethrin/pyrethroids/permethrin

Risperidone

Salt

Selective serotonin reuptake inhibitors

Strychnine

Terfenadine

Theobromine

Theophylline

Tricyclic antidepressants

Vitamin D rodenticides

Yew

Metabolic

Electrolyte imbalances*, e.g.

- Hypernatraemia q.v.
- Hypocalcaemia q.v.
- Hyponatraemia q.v.

Hepatic encephalopathy* q.v.

- Hypoglycaemia q.v.
- Renal disease* q.v.

Nutritional

Thiamine deficiency

1.5.2 Trembling/shivering

Drugs/toxins

5-Fluorouracil

Baclofen

Benzodiazepines

Blue-green algae

Bromethalin

Caffeine

Carbamate

Guarana

Hexachlorophene

Horse chestnut

Ivermectin

Macadamia nuts

Metaldehyde

Mexiletine

Mycotoxins

Risperidone

Organochlorines

Organophosphates

Petroleum distillates

Plastic explosives

Piperazine

Pyrethrin/pyrethroids/permethrin

Rhododendron

Salbutamol

Salt

Strychnine

Terbutaline

Theobromine Theophylline

Tricyclic antidepressants

Yew

Zinc phosphate

Metabolic

Hepatic encephalopathy q.v.*

Hyperadrenocorticism/hypoadrenocorticism (D)

Hyperkalaemia q.v.

Hypocalcaemia q.v.

Hypoglycaemia q.v.

Primary hyperparathyroidism

Uraemia q.v.*

Neurological

Abiotrophies

Cerebellar disease q.v.

Central nervous system inflammatory disease

Cerebrospinal hypomyelinogenesis and dysmyelinogenesis

Corticosteroid responsive tremor syndrome ('white dog shaker disease')

Idiopathic head nod of Dobermanns and bulldogs Lumbosacral disease, e.g.

- Disc herniation
- Discospondylitis
- Neoplasia
- Stenosis

Lysosomal storage disease

Neuroaxonal dystrophy (D)

Nerve root compression

Niemann-Pick disease (C)

Peripheral neuropathies q.v.

Primary orthostatic tremor

Senility

Spongiform encephalopathy

Physiological

Ballistocardiographic* Fatigue/weakness*

Fear*

Reduced environmental temperature*

1.5.3 Ataxia

FOREBRAIN

Congenital

Dandy–Walker syndrome Hydrocephalus Intra-arachnoid cyst

Degenerative

Leukodystrophy Lysosomal storage disease Mitochondrial encephalopathy Multi-system neuronal degeneration Spongy degeneration

Immune-mediated disease/infection

Encephalitis *q.v.* Feline spongiform encephalopathy

Metabolic

Electrolyte/acid–base disorders *q.v.** Hepatic encephalopathy *q.v.** Hypoglycaemia *q.v.* Uraemic encephalopathy *q.v.**

Neoplasia

Choroid plexus tumours
Dermoid cyst
Ependymoma
Epidermoid cyst
Glioma
Lymphoma
Medulloblastoma
Meningioma
Metastatic tumour

Vascular

Cerebrovascular accident

BRAINSTEM/CENTRAL VESTIBULAR DISORDERS

Congenital

Chiari-like malformation Hydrocephalus Intra-arachnoid cysts

Degenerative

Lysosomal storage disorders

Drugs

Metronidazole

Immune mediated/infectious

Feline spongiform encephalopathy (C) Meningoencephalitis *q.v.*

Metabolic

Electrolyte abnormalities* q.v. Hepatic encephalopathy* q.v. Uraemic encephalopathy* q.v.

Neoplastic

Choroid plexus tumours
Dermoid cyst
Epidermoid cyst
Glioma
Lymphoma
Medulloblastoma
Meningioma
Metastatic tumour

Nutritional

Thiamine deficiency

Trauma

Vascular

Cerebrovascular accident

CEREBELLUM (generally ataxia without conscious proprioceptive deficits)

Congenital

Feline cerebellar hypoplasia (C)

Degenerative

Cerebellar cortical degeneration

Gangliosidosis

Hereditary ataxia of Jack Russell and smooth-coated

fox terriers (D)

Leukoencephalomalacia (D)

Neuroaxonal dystrophy (D)

Neuronal vacuolation and spinocerebellar degeneration (D)

Storage diseases

Drugs/toxins

Heavy metals Organophosphates

Immune mediated/infectious q.v.

In utero infection with feline parvovirus (C)

Metabolic

Thiamine deficiency

Neoplastic

Choroid plexus tumours Dermoid cvst Epidermoid cyst Glioma Lymphoma Medulloblastoma Meningioma

Metastatic tumour

Vascular

Cerebrovascular accident q.v.

PERIPHERAL VESTIBULAR DISEASE

Congenital

Lymphocytic labyrinthitis Non-inflammatory cochlear degeneration

Drugs/toxins

Aminoglycosides Chlorhexidine Topical iodophors

Idiopathic

Canine geriatric vestibular disease Feline idiopathic vestibular disease

Immune mediated/infectious

Nasopharyngeal polyps*

Otitis media/interna*

- Primary secretory otitis media in the Cavalier King Charles Spaniel
- Secondary to otitis externa

Metabolic

Hypothyroidism* (D)

Neoplastic

Middle- or inner-ear tumours, e.g.

Adenocarcinoma

Chondrosarcoma

Fibrosarcoma

Lymphoma

Osteosarcoma

Squamous cell carcinoma

Traumatic SPINE

Congenital

Atlanto-occipital dysplasia

Atlantoaxial subluxation

Cartilaginous exostoses

Dermoid sinus

Epidermoid cyst

Hereditary myelopathy

Meningocoeles

Sacral osteochondritis dissecans

Sacrocaudal dysgenesis

Spina bifida

Spinal arachnoid cyst

Spinal dysraphism

Syringohydromyelia (D)

Tethered cord syndrome

Vertebral malformations q.v.

Degenerative

Cervical fibrotic stenosis

Cervical spondylomyelopathy

Degenerative disc disease* (D)

Degenerative myelopathy*

Leukoencephalomalacia

Lumbosacral disease

Lysosomal storage disease

Neuroaxonal dystrophy

Neuronal vacuolation and spinocerebellar degeneration (D)

Other leukodystrophies Synovial cysts

Idiopathic

Calcinosis circumscripta
Disseminated idiopathic skeletal hyperostosis

Immune mediated

Cauda equina neuritis Granulomatous meningoencephalomyelitis* Steroid-responsive meningitis-arteritis

Infectious

Discospondylitis Foreign body Meningomyelitis Spinal epidural empyema

Neoplastic

Extradural

Chondrosarcoma Fibrosarcoma

Haemangiosarcoma

Lipoma

Lymphoma

Malignant nerve sheath tumour

Meningioma

Metastatic disease

Myeloma

Osteosarcoma

Intradural extramedullary

Malignant nerve sheath tumour

Meningioma

Metastatic

Intramedullary

Astrocytoma

Ependymoma

Metastatic tumour Oligodendroglioma

Nutritional

Hypervitaminosis A Thiamine deficiency

Traumatic

Brachial plexus avulsion Dural tear Fracture* Gunshot wound Luxation* Sacrocaudal injury Traumatic disc injury*

Vascular

Fibrocartilaginous embolism* Fat-graft necrosis Myelomalacia Spinal cord haematoma Spinal cord haemorrhage Vascular anomaly

PERIPHERAL NERVES (mono- or polyneuropathies)

Degenerative

Birman cat distal polyneuropathy (C)

Boxer dog progressive axonopathy (D)

Giant axonal neuropathy of German shepherds (D)

Globoid cell leukodystrophy

Golden retriever hypomyelinating polyneuropathy (D)

Hereditary/idiopathic polyneuropathy of Alaskan malamutes (D)

Hypertrophic neuropathy

Hypomyelinating polyneuropathy

Laryngeal paralysis-polyneuropathy complex

Lysosomal storage diseases

- Fucosidosis (D)
- Globoid cell leukodystrophy
- Glycogen storage disease type IV
- Niemann–Pick disease (C)

Mucopolysaccharidosis IIIA (D) Sensory neuropathy (D)

Immune mediated/infectious

Chronic inflammatory demyelinating polyneuropathy Feline leukaemia virus associated Polyradiculoneuritis Protozoal Sensory ganglioradiculoneuritis

Neoplastic

Lymphoma Malignant nerve sheath tumours Myelomonocytic neoplasia Paraneoplastic neuropathy

Traumatic

Bite wounds* Iatrogenic Missile injuries Traction injuries

Vascular

Ischaemic neuromyopathy* Neurogenic claudication

SYSTEMIC

Drugs/toxins

Alphachloralose

Baclofen

Benzodiazepines

Blue-green algae

Butorphanol

Cannabis Carbamate

Carbamat Codeine

Daffodil

Dichlorophen

Diclofenac

Ethylene glycol toxicity

Fentanyl and other sedatives and tranquillisers

Glyphosphate

Horse chestnut

Ivermectin

Loperamide

Metaldehyde

Methiocarb

Metronidazole

Naproxen

Nitroscanate (C)

Organophosphates

Paracetamol

Paraquat

Phenobarbitone

Phenoxy acid herbicides

Phenytoin

Piperazine

Plastic explosives

Potassium bromide

Primidone

Pyridoxine (Vitamin B6)

Selective serotonin reuptake inhibitors

Terfenadine

Thallium

Theobromine

Tricyclic antidepressants

Vincristine Vincristine

Walker Hound mononeuropathy

Yew

Metabolic

Electrolyte/acid-base disorders*

Endocrine disease, e.g.

- Diabetes mellitus*
- Hypothyroidism* (D)

Hepatic encephalopathy*

Hyperadrenocorticoid neuropathy

Hyperchylomicronaemia

Insulinoma/hypoglycaemia

Nutritional

Vitamin B6 (pyridoxine) overdose

1.5.4 Paresis/paralysis

SPINAL DISEASE

Congenital

Atlantoaxial subluxation

Atlanto-occipital dysplasia

Cartilaginous exostoses

Dermoid sinus

Epidermoid cyst

Hereditary myelopathy

Meningocoeles

Osteochondromatosis

Sacrocaudal dysgenesis

Sacral osteochondritis dissecans

Spina bifida

Spinal arachnoid cyst

Spinal dysraphism

Syringohydromyelia (D)

Vertebral malformations q.v.

Degenerative

Afghan hound hereditary myelopathy (D)

Calcinosis circumscripta

Cervical spondylomyelopathy

Degenerative disc disease* (D)

Degenerative myelopathy* (D)

Labrador retriever axonopathy (D)

Lumbosacral disease

Lysosomal storage disease

Neuronal vacuolation and spinocerebellar degeneration (D)

Rottweiler leukoencephalomyelopathy (D)

Other leukodystrophies

Synovial cysts

Idiopathic

Calcinosis circumscripta

Disseminated idiopathic skeletal hyperostosis

Immune mediated

Cauda equina neuritis Epidural granuloma Granulomatous meningoencephalomyelitis* Steroid-responsive meningitis–arteritis

Infectious

Discospondylitis Infectious meningoencephalomyelitis Spinal epidural empyema

Neoplastic

Extradural

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Lipoma

Lymphoma

Malignant nerve sheath tumour

Meningioma

Metastatic

Multiple myeloma

Osteosarcoma

Plasma cell tumour

Intradural extramedullary

Malignant nerve sheath tumour

Meningioma

Metastatic

Intramedullary

Astrocytoma Ependymoma Metastatic tumour Oligodendroglioma

Nutritional

Hypervitaminosis A Thiamine deficiency

Traumatic

Brachial plexus avulsion

Dural tear

Foreign body

Fracture*

Gunshot wound

Luxation*

Sacrocaudal injury

Traumatic disc injury*

Vascular

Fibrocartilaginous embolism*

Fat-graft necrosis

Ischaemic neuromyopathy*

Myelomalacia

Neurogenic claudication

Spinal cord haematoma

Spinal cord haemorrhage

Vascular anomaly

PERIPHERAL NERVES (mono- or polyneuropathies)

Degenerative

Adult-onset motor neurone disease

Birman cat distal polyneuropathy (C)

Boxer dog progressive axonopathy (D)

Distal denervating disease (D)

Giant axonal neuropathy of German shepherds (D)

Golden retriever hypomyelinating polyneuropathy (D)

Hereditary/idiopathic polyneuropathy of Alaskan malamutes (D)

Hypertrophic neuropathy

Idiopathic polyneuropathy

Laryngeal paralysis-polyneuropathy complex

Lysosomal storage diseases

- Fucosidosis (D)
- Globoid cell leukodystrophy
- Glycogen storage disease type IV
- Niemann–Pick disease (C)

Mucopolysaccharidosis IIIA (D)

Rottweiler distal sensorimotor polyneuropathy (D)

Sensory neuropathy of long-haired dachshunds (D) Spinal muscular atrophy

Drugs/toxins

Baclofen

Blue-green algae

Cannabis

Daffodil

Horse chestnut

Ivermectin

Methiocarb

Organophosphate

Petroleum products

Phenoxy acid herbicides

Pyrethrin/pyrethroids

Salinomycin toxicity (C)

Thallium

Vincristine

Vitamin K antagonists

Walker hound mononeuropathy (D)

Immune mediated/infectious

Acute idiopathic polyradiculoneuritis (coonhound paralysis in the USA) (D)

Brachial plexus neuritis

Chronic inflammatory demyelinating polyneuropathy

Protozoal polyradiculoneuritis

Sensory ganglioradiculoneuritis

Metabolic

Diabetic neuropathy*

Hyperchylomicronaemia

Hypothyroid neuropathy*

Primary hyperoxaluria

Neoplastic

Insulinoma

Lymphoma

Malignant nerve sheath tumours

Myelomonocytic neoplasia

Paraneoplastic neuropathy, e.g. lymphoma

Traumatic

Bite wounds*
Iatrogenic
Missile injuries
Traction injuries

Vascular

Arterial thromboembolism Ischaemic neuromyopathy* Traumatic ischaemic neuromyopathy associated with bottom-hung pivot windows and garage doors

1.5.5 Coma/stupor

INTRACRANIAL DISEASE

(*Note*: Especially lesions of the midbrain through the medulla that impair the ascending reticular activating system)

Congenital

Hydrocephalus

Degenerative

Inherited neurodegenerative diseases

- Multi-system neuronal degeneration of cocker spaniels (D)
- Multi-systemic chromatolytic neuronal degeneration
- Spongiform degenerations

Inflammatory/infectious q.v. Neoplastic

Local extension

Nasal tumour

Skull osteochondroma

Metastatic

Carcinoma

Haemangiosarcoma

Primary

Choroid plexus papilloma

Glioma

Lymphoma

Meningioma

Pituitary tumour

Trauma

Head trauma Intracranial haemorrhage Subdural haematoma

Vascular

Cerebrovascular accident Feline ischaemic encephalopathy (C) Hypertension *q.v.* Intracranial haemorrhage

EXTRACRANIAL DISEASE

CNS perfusion disturbances

Anaemia (severe/acute)* q.v. Cardiorespiratory disease* Haemoglobin-related toxicity Hyperviscosity Hypovolaemia (severe/acute)*

Drugs/toxins

Alphachloralose

Baclofen

Barbiturates

Benzodiazepines and other sedatives/anaesthetic agents

Blue-green algae

Borax

Cannabis

Carbamate insecticides

Diclofenac sodium

Ethylene glycol

Ibuprofen

Indomethacin

Iron

Ivermectin

Lead

Loperamide

Metaldehyde

Methiocarb

Metronidazole

Naproxen

Organophosphates

Paracetamol

Phenoxy acid herbicides

Salt

Tricyclic antidepressants

Vitamin K antagonists

Water

Xylitol

Yew

Metabolic

Electrolyte disturbances* q.v.

Hepatic encephalopathy*

Hypoglycaemia q.v.

Hypothyroid myxoedema coma

Uraemic encephalopathy q.v.

Nutritional

Thiamine deficiency

1.5.6 Altered behaviour: General changes

(E.g. disorientation, increased aggression, and loss of normal behaviour)

INTRACRANIAL DISEASE

Congenital

Hydrocephalus Lissencephaly

Lysosomal storage diseases

Degenerative

Cognitive dysfunction

Drugs/toxins

Acepromazine

Benzodiazepines

Other sedatives/tranquillisers

Cannabis

Ibuprofen

Ivermectin

Petroleum distillates

Phenylpropanolamine

Risperidone

Salbutamol

Selective serotonin reuptake inhibitors

Selegiline

Terfenadine

Infectious

Bacterial

Fungal

Prion

Feline spongiform encephalopathy

Protozoal

Neosporosis

Toxoplasmosis

Viral

Canine distemper* (D)

Feline immunodeficiency virus* (C)

Feline infectious peritonitis* (C)

Feline leukaemia virus* (C)

Inflammatory/immune mediated

Granulomatous meningoencephalitis Meningoencephalitis of unknown origin

Necrotising meningoencephalitis

Neoplastic, e.g.

Glioma Lymphoma Meningioma Metastatic disease Pituitary

Physical

Trauma

EXTRACRANIAL DISEASE

Metabolic

Hepatic encephalopathy *q.v.* Hypocalcaemia *q.v.* Hypoglycaemia *q.v.* Renal disease *q.v.* Thiamine deficiency

1.5.7 Altered behaviour: Specific behavioural problems

Aggression

Dominance*

Fear*

Hypocholesterolaemia

Petting*

Play*

Possessive*

Predatory*

Territorial*

Inappropriate urination and defecation

Cognitive dysfunction

Fear

Gastrointestinal disease q.v.

Hyperexcitability

Litter box related

Dirty litter

- New location of the litter box
- Unfamiliar litter

Separation anxiety

Territorial marking

Urinary tract disease (see Incontinence/inappropriate urination)

Stereotypy/compulsive behaviour

Boredom*

Frustration*

Genetic predisposition*

Physical triggers, e.g.

- Anal sac disease (tail chasing)*
- Dermatitis in over-grooming*

Neurological disease

- Brainstem lesions *q.v.*
- Forebrain disease *q.v.*
- · Lumbosacral disease (tail chasing)
- Seizures* q.v.
- Sensory neuropathies (self-mutilation)
- Vestibular lesions (circling)* q.v.

Stress*

1.5.8 Deafness

Congenital conditions

Aplasia/hypoplasia of auditory receptors Hydrocephalus

Degenerative disease

Presbycusis/age-related hearing loss*(D)

- Cochlear conductive defects
- Senile ossicle or receptor degeneration

Drugs/toxins

Antibiotics

Aminoglycosides Amphotericin B Ampicillin Bacitracin

Chloramphenicol

Colistin

Erythromycin

Griseofulvin

Hygromycin B

Minocycline

Polymyxin B

Tetracyclines

Vancomycin

Antiseptics

Benzalkonium chloride

Benzethonium chloride

Cetrimide

Chlorhexidine

Ethanol

Iodine

Iodophors

Cancer chemotherapeutics

Actinomycin

Cisplatin

Cyclophosphamide

Vinblastine

Vincristine

Diuretics

Bumetanide

Ethacrynic acid

Frusemide

Metals/heavy metals

Arsenic

Gold salts

Lead

Mercury

Triethyl/trimethyl tin

Miscellaneous

Ceruminolytic agents

Danazol

Detergents

Digoxin

Dimethyl sulphoxide

Diphenylhydrazine

Insulin

Potassium bromide

Prednisolone

Propylene glycol

Quinidine

Salicylates

Idiopathic

Infection/inflammation

Otitis externa* q.v. Otitis interna*

Otitis media*

Mechanical

Loud noise

Trauma

Neoplasia

Intracranial

Middle ear

Nasopharyngeal polyp*

1.5.9 Multifocal neurological disease

Congenital

Hydrocephalus Syringohydromyelia

Degenerative

Mitochondrial encephalopathies Organic acidurias Storage diseases

Drugs/toxins

Alphachloralose

Baclofen

Benzodiazepines

Blue-green algae

Borax

Cannabis

Carbamate

Daffodil

Dichlorophen

Diclofenac sodium

Ethylene glycol

Glyphosphate

Horse chestnut

Ibuprofen

Ivermectin

Laburnum

Loperamide

Metaldehyde Methiocarb

Naproxen

Organophosphates

Paracetamol

Petroleum products

Piperazine

Plastic explosives

Pyrethrin/pyrethroids

Rhododendron

Salbutamol

Salt

Selective serotonin reuptake inhibitors

Terfenadine

Theobromine

Tricyclic antidepressants

Vitamin D2/D3

Vitamin K antagonists

Yew

Idiopathic conditions

Dysautonomia

Immune-mediated disease

Granulomatous meningoencephalomyelitis

Necrotising encephalitis Spinal cord vasculitis Steroid-responsive meningitis-arteritis

Infectious

Bacterial

Bacterial encephalitis/meningitis
Tetanus

Fungal

Aspergillosis Blastomycosis Candidiasis Coccidioidomycosis Cryptococcosis

Parasitic

Cuterebra spp. Toxocariasis

Protozoal

Neosporosis Toxoplasmosis

Rickettsial

Ehrlichiosis/anaplasmosis Protothecosis Rocky Mountain spotted fever

Viral

Canine distemper virus (D)*
Feline immunodeficiency virus* (C)
Feline infectious peritonitis* (C)
Feline leukaemia virus* (C)
Herpesvirus
Parainfluenza virus
Parvovirus*

Metabolic

Hepatic disease* q.v.

Hyperosmolarity Hypoglycaemia *q.v.* Hypothyroidism* (D) Renal disease* *q.v.*

Neoplastic

Leukaemia Lymphoma Metastatic neoplasia

Nutritional

Thiamine deficiency

Vascular

Intracranial and/or spinal haemorrhage

- Angiostrongylus vasorum
- Coagulopathy
- Trauma
- · Vascular anomaly

Hypertension q.v.

Thromboembolism

1.6 Ocular historical signs

1.6.1 Blindness/visual impairment

CENTRAL NERVOUS SYSTEM (CNS) Brain disease

Congenital, e.g. Hydrocephalus

Degenerative, e.g.
Neuronal ceroid lipofuscinosis
Lysosomal storage diseases

Drugs/toxins, e.g.
Ivermectin/moxidectin
Lead

Levamisole Metaldehyde

Immune mediated/infectious, e.g.

Granulomatous meningoencephalomyelitis Toxoplasmosis

Metabolic, e.g.

Hepatic encephalopathy q.v.

Neoplastic, e.g.

Lymphoma

Meningioma

Pituitary tumour

Trauma

Vascular, e.g.

Cerebrovascular accident

Optic nerve disease, e.g.

Optic nerve hypoplasia/aplasia

Optic neuritis

Space-occupying lesion compressing the optic nerve

Trauma

INTRAOCULAR/PERIOCULAR

Acquired

Anterior uveitis

Cataract* q.v.

Chorioretinitis

Chronic superficial keratitis/pannus*

Chronic uveitis*

Corneal lipid dystrophy/degeneration

Corneal oedema and endothelial dysfunction*

Endophthalmitis

Entropion

Generalised progressive retinal degeneration

Glaucoma*

Hypertensive ocular disease*

Hyphaema

Intraocular haemorrhage*

Keratoconjunctivitis sicca*

Nutritional retinal degeneration

- Taurine deficiency
- Vitamin A deficiency
- Vitamin E deficiency

Phthisis bulbi, e.g.

Secondary to ocular trauma or chronic uveitis

Pigmentary keratitis

Retinal degeneration

Retinal detachment* q.v.

Retinal haemorrhage

Retinal pigment epithelial cell dystrophy

Sudden acquired retinal degeneration

Superficial keratitis

Symblepharon

Trauma*

Ulcerative keratitis and corneal scarring

Vitreal haemorrhage

Sequelae to chronic uveitis*

Corneal oedema

Cyclitic membranes

Exudative retinal detachment

Hyphaema

Intraocular adhesions

Lens luxation

Phthisis bulbi

Secondary cataracts

Secondary glaucoma

Secondary retinal degeneration*

Congenital

Ankyloblepharon

Anophthalmia

Anterior segment dysgenesis

Collie eye anomaly

Congenital vitreous opacification

Corneal dermoid

Entropion (severe)

Microphthalmia

Persistent hyperplastic primary vitreous

Persistent hyperplastic tunica vasculosa lentis

Persistent pupillary membranes

Posterior segment coloboma

Vitreo-retinal dysplasia

Lens disorders

Aphakia

Cataracts

Coloboma

Lenticonus/lentiglobus

Microphakia

Spherophakia

Retinal disorders

Congenital retinal dystrophy

Early-onset photoreceptor dystrophies

- Early retinal degeneration
- Photoreceptor dysplasia
- Rod–cone dysplasia
- Rod dysplasia

Hemeralopia

Lysosomal storage diseases

Primary retinal dysplasia

Secondary retinal dysplasia

- Idiopathic/inherited
- Intrauterine trauma
- Maternal infections
- Radiation
- Vitamin A deficiency during pregnancy

1.6.2 Epiphora/tear overflow

Impaired tear drainage Dacryocystitis

Entropion

Imperforate/obstructed punctum or canaliculus Lacrimal canalicular aplasia Small lacrimal lakes

Painful/irritating ocular conditions

Extraorbital conditions

Diseases of paranasal sinuses Mechanical or olfactory stimulation of the pasal mucosa

Eyelid conditions*

Blepharitis
Distichiasis/ectopic cilia
Entropion
Facial nerve paralysis
Lid laceration
Neoplasia
Trichiasis

Intraocular conditions

Acute uveitis Anterior lens luxation (D) Glaucoma Trauma

Ocular surface conditions

Conjunctivitis*
Corneal ulceration*
Foreign body
Keratitis*

Third eyelid conditions*

Lymphoid hyperplasia Neoplasia Prolapsed nictitans gland Scrolled third eyelid Trauma

1.7 Musculoskeletal historical signs

1.7.1 Forelimb lameness

YOUNG ANIMALS

Any site

Infection*

Metaphyseal osteopathy

Panosteitis

Trauma*

- Bruising or strain of soft tissues*
- Laceration*
- Penetrating wound*

Shoulder

Brachial plexus avulsion

Fracture of the humerus*

Fracture of the scapula

Haemarthrosis

Joint capsule rupture

Luxation (congenital or acquired)

Medially displaced biceps tendon

Osteochondrosis* (D)

Septic arthritis*

Shoulder dysplasia*

Traumatic arthritis*

Elbow

Avulsion of the medial epicondyle

Collateral ligament rupture or avulsion

Degenerative joint disease*

Elbow incongruity

Fracture of the humerus*

Fracture of the radius*

Fracture of the ulna*

Growth plate disorders

Haemarthrosis

Luxation (congenital or acquired)

Osteochondrosis (D)*

- Fragmented medial coronoid process
- Osteochondritis dissecans of the medial condyle of the humerus
- Ununited anconeal process

Septic arthritis

Traumatic arthritis*

Carpus

Carpal hyperextension

Collateral ligament rupture or avulsion

Degenerative joint disease*

Dysostosis

Flexor tendon contracture

Fracture of the carpal bones*

Fracture of the metacarpal bones*

Fracture of the radius*

Fracture of the ulna*

Growth plate disorders

Luxation

Osteochondrosis

Septic arthritis

Shearing injury

Subluxation

Foot

Avulsion of the deep digital flexor tendon

Avulsion of the superficial digital flexor tendon

Claw disease q.v.*

Degenerative joint disease*

Fracture of distal metacarpal bones*

Fracture of phalanges*

Injury to the integument, e.g.

- Bite wound
- Foreign body
- Laceration

Other pathology of the integument*

Luxation/subluxation

Septic arthritis

Sesamoid disease/fracture

ADULT ANIMALS

Any site

Infection*

Trauma*

- Bruising or strain of soft tissues
- Laceration
- · Penetrating wound

Shoulder

Biceps tendon rupture

Bicipital tenosynovitis (D)

Degenerative joint disease*

Fracture of the humerus*

Fracture of the scapula*

Haemarthrosis

Infraspinatus contracture/other muscle contractures

Joint capsule rupture

Luxation (congenital or acquired)*

Medially displaced biceps tendon

Neoplasia*, e.g.

- Metastatic tumour
- Nerve root tumour
- Primary bone tumour
- Soft tissue tumour
- Synovial sarcoma

Osteochondrosis

Septic arthritis

Shoulder dysplasia

Traumatic arthritis*

Elbow

Collateral ligament rupture or avulsion

Degenerative joint disease*

Elbow incongruity

Fracture of the humerus*

Fracture of the radius*

Fracture of the ulna*

Haemarthrosis

Incomplete ossification of the humeral condyle

Luxation (congenital or acquired)

Medial spur

Neoplasia*

- Bone
- Metastatic
- Soft tissue

Osteochondrosis

Septic arthritis

Traumatic arthritis*

Carpus

Carpal hyperextension

Degenerative joint disease*

Fracture of the radius*

Fractures of the carpal bones*

Fractures of the metacarpal bones*

Haemarthrosis

Luxation or subluxation

Neoplasia*

- Bone
- Metastatic
- Soft tissue

Septic arthritis

Shearing injury

Traumatic arthritis*

Foot

Avulsion of the superficial or deep digital flexor tendon

Claw disease q.v.

Degenerative joint disease*

Fracture of the distal metacarpal bones*

Fracture of the phalanges*

Fracture of the sesamoid bones*

Haemarthrosis

Injury to the integument*, e.g.

- Bite wound
- Foreign body
- Laceration

Other pathology of the integument*

Luxation

99

Neoplasia

- Bone
- Metastatic
- Soft tissue

Septic arthritis

Sesamoid disease

Traumatic arthritis*

1.7.2 Hindlimb lameness

YOUNG ANIMALS

Any site

Infection

Metaphyseal osteopathy

Panosteitis

Trauma

- Bruising or strain of soft tissues
- Laceration
- · Penetrating wound

Hip

Avascular necrosis of the femoral head (D)

Fracture of the acetabulum*

Fracture of the femur*

Haemarthrosis

Hip dysplasia*

Luxation*

Septic arthritis

Traumatic arthritis*

Stifle

Caudal cruciate ligament rupture or avulsion

Cranial cruciate ligament rupture or avulsion*

Femorotibial luxation

Fracture of the femur*

Fracture of the fibula*

Fracture of the patella*

Fracture of the tibia*

Genu valgum

Haemarthrosis

Long digital extensor tendon avulsion

Meniscal trauma*

Osteochondrosis*

Patellar ligament rupture or avulsion

Patellar luxation*

Septic arthritis

Stifle hyperextension

Traumatic arthritis*

Hock

Calcaneal tendon rupture, laceration or avulsion

Collateral ligament avulsion

Congenital tarsal anomalies

Fracture of the tibia*

Fracture of the fibula*

Fractures of the metatarsal bones*

Fractures of the tarsal bones*

Gastrocnemius tendon rupture, laceration or avulsion

Growth plate disorders

Haemarthrosis

Luxation

Osteochondrosis*

Septic arthritis

Shearing injury

Tibial dysplasia

Traumatic arthritis*

Foot

Avulsion of the superficial or deep digital flexor tendon

Claw disease q.v.*

Degenerative joint disease*

Fractures of the distal metatarsal bones*

Fractures of the phalanges*

Fractures of the sesamoid bones

Haemarthrosis

Injury to the integument*, e.g.

- Bite wound
- Foreign body
- Laceration

Other pathology of the integument* Luxation Septic arthritis Sesamoid disease Traumatic arthritis*

ADULT ANIMALS

Any site

Infection

Trauma

- Bruising or strain of soft tissues
- Laceration
- Penetrating wound

Hip

Avascular necrosis of the femoral head* Degenerative joint disease* Fracture of the acetabulum* Fracture of the femur* Haemarthrosis Hip dysplasia*

Luxation*

Myositis ossificans

Neoplasia*

- Bone
- Soft tissue
- Metastatic

Septic arthritis

Traumatic arthritis*

Stifle

Caudal cruciate ligament rupture or avulsion Cranial cruciate ligament rupture or avulsion* Degenerative joint disease*

Femorotibial luxation

Fracture of the femur*

Fracture of the fibula*

Fracture of the patella*

Fracture of the tibia*

Haemarthrosis

Long digital extensor tendon avulsion

Meniscal trauma*

Neoplasia*

- Bone
- Soft tissue
- Metastatic

Osteochondrosis*

Patellar ligament rupture or avulsion

Patellar luxation*

Septic arthritis

Stifle hyperextension

Traumatic arthritis*

Hock

Calcaneal tendon rupture, laceration or avulsion

Collateral ligament avulsion

Degenerative joint disease*

Fracture of the fibula*

Fracture of the tibia*

Fractures of the metatarsal bones*

Fractures of the tarsal bones*

Gastrocnemius tendon rupture, laceration or avulsion

Growth plate disorders

Haemarthrosis

Luxation

Neoplasia*

- Bone
- Soft tissue
- Metastatic

Osteochondrosis*

Septic arthritis

Shearing injury

Superficial digital flexor luxation

Tibial dysplasia

Traumatic arthritis*

Foot

Avulsion of the superficial or deep digital flexor tendon

Claw disease* q.v.

Degenerative joint disease*

Fractures of distal metatarsal bones*

Fractures of phalanges*

Fractures of sesamoid bones

Haemarthrosis

Injury to the integument*, e.g.

- Bite wound
- Foreign body
- Laceration

Other pathology of the integument*

Luxation*

Neoplasia*

- Bone
- Soft tissue
- Metastatic

Septic arthritis

Sesamoid disease

Traumatic arthritis*

Traumatic tenosynovitis

1.7.3 Multiple joint/limb lameness

Young animals

Borreliosis

Chondrodysplasia

Drug reaction

- Sulphonamide
- Vaccine

Excessive joint laxity

- Collagen defect
- Dietary
- Traumatic

Haemarthroses

Metaphyseal osteopathy (D)

Nutritional secondary hyperthyroidism

Panosteitis

Polyarthritis

Osteochondrosis*

Septic arthritis

Viral arthritis

Adult animals

Borreliosis

Chondrodysplasia

Degenerative joint disease*

Drug reaction

- Sulphonamide
- Vaccine

Excessive joint laxity

- Collagen defect
- Dietary
- Traumatic

Haemarthroses

Hyperparathyroidism

Neuromuscular disease

Osteochondrosis*

Nutritional, e.g.

- Hypervitaminosis A
- Copper deficiency

Periosteal proliferative arthritis

Polyarthritis

Septic arthritis

Systemic lupus erythematosus

Viral arthritis

1.8 Reproductive historical signs

1.8.1 Failure to observe oestrus

Abnormal sex chromosomes
Early embryonic death *q.v.*Idiopathic
Immune-mediated oophoritis
Inadequate display of oestrus*
Inadequate observation of oestrus*
Inappropriate photoperiod (C)
Lactational anoestrus*
Panhypopituitarism

Physical/athletic training Poor diet Prepuberty* Previous ovariectomy* Pseudohermaphroditism Pseudopregnancy* Seasonal anoestrus (C)* Social factors Spontaneous ovulation Sterile matings True hermaphroditism

Concurrent disease

Hyperadrenocorticism Hypoadrenocorticism (D) Hypothyroidism* (D) Poor body condition

latrogenic

Anabolic steroids Androgens Glucocorticoids Progesterones

Ovarian disease

Ovarian aplasia

Ovarian cysts and tumours

- Granulosa-thecal cell tumours
- Luteal cysts
- Other neoplasms or cysts causing ovarian atrophy

Ovarian hypoplasia

Senile ovarian failure

Stress*

Frequent showing Frequent travel Overcrowding Temperature extremes

1.8.2 Irregular seasons

Short pro-oestrus followed by anoestrus

Poor diet

Shortened inter-pro-oestrus intervals (see succeeding text)

Stress

Reduced intensity of visible signs of oestrus

Concurrent disease*

Drugs*

- Anabolic steroids
- Androgens
- Glucocorticoids
- Progesterones

Persistence of oestrus behaviour

Signs of oestrus in the absence of true hormonal oestrus

Vaginal foreign body

Vaginal tumour

Vaginitis*

Vulvitis*

Prolonged pro-oestrus/oestrus

Excessive adrenal production of oestrogen (C)

Follicular cysts*

Hepatic disease

Merging of waves of follicular growth (C)

Normal in young females*

latrogenic

Drugs used to prevent pregnancy after mating Exogenous gonadotrophins

Ovarian tumours

Adenocarcinoma

Cystadenoma

Granulosa cell tumour

Shortened inter-pro-oestrus interval

Follicular cysts
Frequent episodes of pro-oestrus
Ovulatory failure
Short anoestrus
Split heats

latrogenic

Bromocriptine Cabergoline Prostaglandins

Prolonged inter-pro-oestrus interval

Normal in some breeds Hypothyroidism* (D) Idiopathic Ovarian cysts or neoplasia Severe systemic disease Silent heat

1.8.3 Infertility in the female with normal oestrus

Failure to achieve intromission

Male factors* q.v.

Congenital defects of the vestibule and vagina

Intersexes Vaginal septa Vestibulovaginal strictures Vulval constrictions

Acquired vaginal conditions

Foreign body
Post-partum fibrosis
Transmissible venereal tumour
Vaginal hyperplasia*

Vaginal tumours Vaginal ulceration

Failure of ovulation

Idiopathic (D)

Inadequate number of matings (C)

Incorrect timing of mating* (C)

Miscellaneous

Cervical stenosis

Cystic endometrial hyperplasia*

Early embryonic loss q.v.

Endometritis

Herpesvirus

Hypoluteodism/insufficient progesterone secretion by corpus luteum

Incorrect timing of mating/insemination*

Infertile male

Non-patent oviducts or uterus

Segmental aplasia of the paramesonephric (Müllerian) duct

Stress

Uterine polyps

Uterine tumours

1.8.4 Male infertility

Failure to achieve intromission

Female factors q.v.

Acquired abnormalities

Neoplasia of the penis/prepuce

Phimosis

Trauma of the penis/prepuce

Urethral obstruction and subsequent haematoma

Congenital abnormalities, e.g.

Diphallus

Penile hypoplasia

Persistent penile frenulum

Preputial stenosis

Pseudohermaphroditism

Historical Signs 109

Miscellaneous

Incomplete erection

Ineffective thrusting

- Experience*
- Poor socialisation*
- Short os penis
- Size discrepancy*
- Trauma (desensitised glans)

Premature full attainment of erection in inexperienced dog* Premature loss of erection*

Inability to mount the female

Prostatic disease *q.v.* Orthopaedic disease*

Lack of fertility where normal mating(s) is(are) achieved

Failure of/incomplete ejaculation

Discomfort or stress during mating*

Inadequate tie*

Retrograde ejaculation

- Disorder of the sympathetic nervous system
- Urethral sphincter incompetence

Lack of libido

Age related

Prepubertal* Senility*

Behavioural

Inexperience*

Previous bad experience when mating*

Training not to display sexual interest*

Concurrent/systemic disease*, e.g.

Hypoadrenocorticism

Hypogonadism

Hypothyroidism* (D)

Diet

Malnutrition

Obesity*

Drugs

Anabolic steroids

Cimetidine

Glucocorticoids

Ketoconazole

Oestrogens

Overuse of testosterone

Progestagens

Management

Overuse*

Testicular disease

Idiopathic testicular degeneration

Orchitis

Sertoli cell tumour

Low/absent sperm number or quality

Artefact

Poor collection technique/analysis*

Acquired defects

Infections causing azoospermia or abnormal sperm/semen

- Balanoposthitis
- Epididymitis
- Orchitis
- Prostatitis
- Urethritis

Increases in testicular temperature

- Chemotherapeutics, e.g.
 - Chlorambucil
 - Cisplatin
 - Cyclophosphamide
- High environmental temperature
- Hyperthermia
- Iatrogenic
- Orchitis in the contralateral testis
- Other drugs
 - Anabolic steroids
 - Androgens
 - Glucocorticoids

- Radiation therapy/excessive radiography
- Scrotal dermatitis

Local trauma

- Dog bites
- Kicks/blows
- Lacerations

Neoplasia of the testis

Overuse*

Pain*

Prepuberty*

Retrograde ejaculation

Toxins

Congenital defects

Cryptorchidism

Genetic abnormalities in spermatogenesis

- Chromosomal abnormalities, e.g.
 - XXY syndrome (D)
 - 38,XY/57,XXY (C)
- Immotile cilia (Kartagener's syndrome)

Segmental aplasia of the duct system

Testicular hypoplasia

1.8.5 Vaginal/vulval discharge

Ovarian remnant syndrome

Pseudopregnancy*

Pyometra*

Stump pyometra*

Vaginal or uterine neoplasia

Vaginitis*

Vulvitis*

1.8.6 Abortion

Drugs, e.g.

Cabergoline Corticosteroids Prostaglandins

Habitual abortion

Abnormal uterine environment, e.g.

• Cystic endometrial hyperplasia

Poor luteal function

Infection

Brucella canis (D)

Canine adenovirus (D)

Canine distemper virus (D)*

Canine herpesvirus (D)

Chlamydophila psittaci (C)

Ehrlichiosis

Feline herpesvirus (C)*

Feline infectious peritonitis (C)*

Feline leukaemia virus (C)*

Feline panleukopenia virus (C)*

Leishmaniasis

Toxoplasmosis

1.8.7 Dystocia

MATERNAL CAUSES

Obstruction of the birth canal

Congenital uterine malformations

- Aplasia of the cervix
- Aplasia of the corpus uteri
- Aplasia of the uterine horns

Fibrosis of the birth canal

Narrow pelvic canal

- Congenital
- Fracture*
- Immaturity*

Neoplasia

Uterine malposition

Uterine rupture

Uterine torsion Vaginal septa

Uterine inertia*

Primary uterine inertia

Fatty infiltration of the myometrium

Hormonal deficiencies

Hypocalcaemia* q.v.

Inherited

Maternal systemic disease

Overstretching of the myometrium, e.g.

- Excessive intrauterine fluids
- · Large foetuses*
- Large litter*

Poor diet

Senile changes*

Single puppy syndrome*

Secondary uterine inertia

Exhaustion of the myometrium*

- Obstruction of birth canal*
- Prolonged labour*

FOETAL CAUSES

Malpresentation*

Backward flexion of front legs

Breech

Lateral or downward deviation of the head

Posterior

Transverse

Two foetuses presenting simultaneously

Oversized foetuses

Physically normal but large puppy*

Monstrosities

- Duplications
- Hydrocephalus
- Oedema

1.8.8 Neonatal mortality

Congenital abnormalities*, e.g.

Congenital heart disease Hydrocephalus Hypothyroidism

Infections*, e.g.

Feline calicivirus*
Feline herpesvirus*
Feline infectious peritonitis*
Feline parvovirus*
Septicaemia

Maternal/management factors*

Asphyxiation

Euthanasia for reasons of congenital deformities or undesirable cosmetic features

Hypoglycaemia q.v., e.g.

· Secondary to sepsis

Hypothermia

Inadequate lactation

Poor environment, e.g.

- Draughts
- Heating

Poor hygiene

Poor mothering

Poor nutrition/health of breeding stock

Miscellaneous

Fading puppy syndrome* Low birth weight Neonatal isoerythrolysis Stillbirth Historical Signs 115

1.9 Urological historical signs

1.9.1 Pollakiuria/dysuria/stranguria

Normal urine

Behavioural* Feline lower urinary tract disease Idiopathic detrusor-urethral dyssynergia Neuromuscular

With haematuria, pyuria or bacteriuria

Diabetes mellitus*

Feline lower urinary tract disease* (C)

Hyperadrenocorticism/corticosteroid treatment

Iatrogenic disorders

Infection

Infiltrative urethral diseases

Neoplasia

Neuromuscular disorders

Prostatic disease

Renal disease* q.v.

Structural abnormalities

Trauma/bladder rupture

Urolithiasis*

1.9.2 Polyuria/polydipsia (see Section 1.1.1

for full differentials)

Diet

Drugs/toxins

Congenital lack of ADH receptors

Electrolyte disorders

Endocrine disease

Hepatobiliary disease

Hypothalamic disease

Infectious disease

Metabolic (e.g. hypercalcaemia) Neoplasia* Pericardial effusion Physiological Polycythaemia Psychogenic Renal disorders

1.9.3 Anuria/oliguria

Pre-renal

Dehydration* Hypoadrenocorticism (D) Shock *q.v.**

Renal

Acute kidney injury *q.v.* Chronic kidney disease*

Post-renal

Prostatic disease* Urethral spasm

Neoplasia

Bladder Extra-urinary tract Urethra

Trauma

Avulsion of ureters Ruptured bladder/urethra

Urolithiasis*

Nephroliths
Ureteroliths
Uroliths in the bladder or urethra

1.9.4 Haematuria

Extra-urogenital disease

Coagulopathy q.v.

Drugs/toxins

Paracetamol

Heatstroke

Thrombocytopenia/thrombocytopathia

Penile disease

Neoplasia

Trauma

Physiological

Pro-oestrus

Prostatic disease

Abscess

Benign prostatic hyperplasia* (D)

Cysts

Neoplasia

Prostatitis*

Pseudohaematuria (non-haematuria-related red urine)

Bilirubinuria q.v.

Food pigments

- Blackberries
- Beets
- Rhubarb

Haemoglobinuria q.v.

Myoglobinuria q.v.

Phenazopyridine

Phenolphthalein

Phenothiazines

Renal disease

Cysts

Glomerulonephritis

Iatrogenic

- Biopsy
- Fine-needle aspirate

Idiopathic renal haematuria

Infarction, e.g.

• Disseminated intravascular coagulation

Neoplasia*

Parasites

Dioctophyma renale

Pyelonephritis

Renal telangiectasia

Trauma

Uroliths*

Ureteral, urinary bladder and urethral disease

Drugs

Cyclophosphamide

Feline lower urinary tract disease*

Iatrogenic

- Cystocentesis*
- Forceful catheterisation*

Neoplasia

Parasites

• Capillaria plica

Polyps

Trauma*

Urethritis

Uroliths*

Uterine disease

Metritis

Neoplasia

Pyometra*

Sub-involution*

Vaginal disease

Neoplasia

Trauma

1.9.5 Urinary incontinence/inappropriate urination

With bladder distension

Detrusor atony

Bladder over-distension
Dysautonomia
Lower motor neurone disease
Neoplastic infiltration of the bladder wall

Functional obstruction

Reflex dyssynergia*
Upper motor neurone disease
Urethral inflammation*
Urethral pain

Upper motor neurone disease

Partial physical obstruction

Granulomatous urethritis
Neoplasia
Prostatic disease*
Retroflexion of the bladder into a perineal hernia
Urethral fibrosis/stricture
Urolithiasis*
Vestibulovaginal stenosis

Without bladder distension

Bladder hypercontractility
Chronic partial obstruction*
Detrusor instability
Inflammation*
Neoplasia

Miscellaneous

Behavioural Ectopic ureters

Iatrogenic

Ureterovaginal fistulation
 Secondary to polydipsia/polyuria
 Ureterocoele
 Urolithiasis

Reduced bladder storage

Fibrosis Hypoplasia Neoplasia

Urethral sphincter incompetence

Congenital
Hormone responsive*
Intersex
Prostatic disease*
Urethral inflammation*
Urethral neoplasia
Urinary tract infection*

PART 2 PHYSICAL SIGNS

2.1 General/miscellaneous physical signs

2.1.1 Abnormalities of body temperature – hyperthermia

TRUE FEVER

Drugs/toxins

Adder bites

Amphotericin B

Aspirin

Benzalkonium chloride

Benzodiazepines

Borax

Cannabis

Carbamate

Daffodil

Dichlorophen

Diclofenac sodium

Dinoprost tromethamine

Glyphosate

Horse chestnut

Hymenoptera stings

Indomethacin

Ivermectin

Differential Diagnosis in Small Animal Medicine, Second Edition.

Alex Gough and Kate Murphy.

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Metaldehyde
Organophosphates
Oxytetracycline
Paracetamol
Paraquat
Penicillamine
Petroleum distillates
Phenytoin
Poinsettia
Procainamide
Pyrethrin/pyrethroids
Salbutamol
Theobromine
Yew

Immune-mediated disease

Autoimmune skin disease

- Bullous pemphigoid
- Discoid lupus erythematosus
- · Pemphigus erythematosus
- Pemphigus foliaceus
- Pemphigus vulgaris

Drug reactions

Evan syndrome

Familial renal amyloidosis (Shar Pei fever)

Immune-mediated haemolytic anaemia*

Immune-mediated joint disease*

- Erosive
 - Rheumatoid arthritis
- Non-erosive
 - Chronic inflammatory/infectious
 - Idiopathic
 - Enteropathic
 - Neoplasia
 - Periosteal proliferative arthritis
 - Systemic lupus erythematosus

Immune-mediated thrombocytopenia

Lymphadenitis

Pemphigus

Plasmacytic-lymphocytic gonitis

Physical Signs 123

Polyarteritis nodosa Polymyositis Steroid-responsive meningitis Systemic lupus erythematosus

Immunodeficiency syndromes

Defects in specific immunity, e.g.

Agammaglobulinaemia

C3 deficiency

Canine leucocyte adhesion deficiency

Lethal acrodermatitis

Low immunoglobulins in Weimaraners (D)

Neutrophil defect of Weimaraners (D)

Pneumocystic pneumonia in miniature

Dachshunds (D)

Transient hypogammaglobulinaemia

Selective immunoglobulin (IgA) deficiency

Selective IgM deficiency

Severe combined immunodeficiency disease

Defects in non-specific immunity

Bone marrow dyscrasia in Poodles (D)

Canine cyclic haematopoiesis (D)

Canine granulocytopathy syndrome (D)

Chediak–Higashi syndrome (C)

Complement deficiency (D)

Hypotrichosis with thymic aplasia (C)

Immotile cilia syndrome

Trapped neutrophil syndrome

Pelger-Huet anomaly

Secondary immunodeficiencies

Drugs

- Corticosteroids
- Immunosuppressive therapy

Endocrine

Hyperadrenocorticism

Infectious, e.g.

- Canine distemper virus* (D)
- Demodecosis*

- Feline immunodeficiency syndrome* (C)
- Feline leukaemia virus* (C)
- Parvovirus

Metabolic

Uraemia

Neoplastic

• Haematopoietic

Nutritional

Zinc deficiency

Infection

Bacterial

Generalised/multifocal, e.g.

- Bartonellosis
- Brucellosis (D)
- Leptospirosis*
- Lyme disease
- Mycobacterium spp.
- Mycoplasma spp.
- Plague
- Septicaemia from septic focus

Localised, e.g.

- Abscess*, e.g.
 - Dental
 - Lung
 - Retrobulbar
- Cellulitis*
- Cholangiohepatitis
- Cystitis
- Dental disease*
- Discospondylitis
- Endocarditis
- Gastrointestinal infection*
- Mastitis
- Metritis*
- Osteomyelitis*
- Peritonitis*
- Pneumonia*
- Prostatitis*

Physical Signs 125

- Pyelonephritis
- Pyometra/stump pyometra*
- Pyothorax*
- Septic arthritis*
- Urinary tract infection*

Fungal, e.g.

Aspergillosis

Blastomycosis

Coccidioidomycosis

Cryptococcosis

Histoplasmosis

Parasitic, e.g.

Aberrant helminth migration

Babesiosis

Chagas disease (Trypanosomiasis)

Cytauxzoon felis

Dirofilaria immitis

Hepatozoonosis

Leishmaniasis

Protozoal, e.g.

Neosporosis (D)

Toxoplasmosis

Rickettsial, e.g.

Ehrlichiosis

Rocky Mountain spotted fever (D)

Salmon poisoning

Viral (many), e.g.

Canine distemper virus* (D)

Canine hepatitis virus* (D)

Canine parainfluenza virus* (D)

Canine parvovirus* (D)

Feline calicivirus* (C)

Feline herpes virus* (C)

Feline immunodeficiency virus* (C)

Feline infectious peritonitis* (C)

Feline leukaemia virus* (C)

Feline panleukopenia virus* (C)

Miscellaneous

Metabolic bone disorders

- Hypervitaminosis A (C)
- Metaphyseal osteopathy
- · Nutritional secondary hyperthyroidism
- Panosteitis

Pansteatitis (C)

Portosystemic shunt

True pyrexia of unknown origin

Neoplasia

Lymphoma*

Lymphoproliferative disease

Leukaemia

Histiocytic disease (systemic histiocytosis, malignant

histiocytosis, histiocytic sarcoma)

Myeloproliferative disease

Solid tumours*

Tissue damage*

Surgery*

Trauma*

OTHER CAUSES OF HYPERTHERMIA

Heat stroke*

Hyperpyrexic syndrome

Increased muscular activity

Episodic myokymia

Hypocalcaemic tetany q.v.

Normal exercise*

Pain

Seizures* q.v.

Stress

Pathological hyperthermia

Hypermetabolic states

- Hyperthyroidism* (C)
- Pheochromocytoma

Hypothalamic lesions

Malignant hyperthermia

Physical Signs 127

2.1.2 Abnormalities of body temperature – hypothermia

Drugs/toxins

Alphachloralose

Baclofen

Benzodiazepines

Cannabis

Daffodil

Ethylene glycol

General anaesthetics

Ivermectin

Loperamide

Paracetamol

Sedatives

Yew

Miscellaneous

Aortic thromboembolism* (C)

Cardiac disease* q.v.

Coma q.v.

Environmental cold*

Hypoadrenocorticism (D)

Hypothalamic disorders

Hypothyroidism* (D)

Loss of thermoregulatory abilities following heat stroke

Near drowning

Severe sepsis/endotoxaemia*

2.1.3 Enlarged lymph nodes

INFILTRATION

Neoplastic disease

Haemolymphatic

Leukaemia

Lymphoma*

Lymphomatoid granulomatosis

Malignant histiocytosis Multiple myeloma Systemic mastocytosis

Metastatic

Adenocarcinoma Carcinoma Malignant melanoma Mast cell tumour Sarcoma

Non-neoplastic disease

Eosinophilic granuloma complex Mast cell infiltration

PROLIFERATION/INFLAMMATION

Infectious

Algal

Protothecosis

Bacterial

Actinomycosis
Bartonella spp.
Brucella canis (D)
Corynebacterium spp.
Localised infection
Mycobacterium spp.
Nocardiosis
Septicaemia
Streptococcus spp.
Yersinia pestis

Fungal

Aspergillosis Blastomycosis Coccidioidomycosis Cryptococcosis Histoplasmosis

Phycomycosis Sporotrichosis

Parasitic

Babesiosis Cytauxzoonosis Demodecosis Hepatozoonosis Leishmaniasis Trypanosomiasis

Protozoal

Neosporosis (D) Toxoplasmosis

Rickettsial

Ehrlichiosis Rocky Mountain spotted fever Salmon poisoning

Viral

Canine herpes virus* (D)
Feline immunodeficiency virus* (C)
Feline infectious peritonitis* (C)
Feline leukaemia virus* (C)
Infectious canine hepatitis* (D)

Non-infectious

Dermatopathic lymphadenopathy Drug reactions Idiopathic

Immune-mediated

- Immune-mediated polyarthritides
- Mineral-associated lymphadenopathy
- · Granulomatous lymphadenitis
- Puppy strangles* (D)
- Rheumatoid arthritis
- Systemic lupus erythematosus

Localised inflammation*

Post-vaccine

2.1.4 Diffuse pain

Gastrointestinal disease, e.g.

Cholecystolithiasis/cholecystitis*
Gastrointestinal inflammation/ulceration
Gastrointestinal parasitism*
Pancreatitis*

Miscellaneous Panniculitis

MUSCULOSKELETAL DISEASE, E.G.

Polyarthritis Polymyositis

Neurological disease, e.g.

Meningoencephalitis Spinal disease* *q.v.* Thalamic pain syndrome

Urological disease, e.g.

Cystitis Prostatic disease* Pyelonephritis Renal parasitism Urethral tumour Urolithiasis

Other causes of abdominal pain q.v.

Mesenteric thrombosis Pansteatitis Peritonitis

2.1.5 Peripheral oedema

Generalised

Hypoalbuminaemia* *q.v.* Increased central venous pressure

- Central venous occlusion
 - Neoplasia
 - Thro mbosis
- Congestive heart failure*

Vasculitis

Localised

Arteriovenous fistula

Cellulitis*

Drugs/toxins

- Alphaxalone/alphadolone
- Paracetamol
- Salbutamol

Inflammation*

Lymphangitis

Lymphoedema

Neurogenic or hormonal vasoactive stimuli

Proximal venous obstruction

Vascular trauma

Vasculitis

Regional

Bilateral forelimb oedema/head and neck oedema

Cranial vena cava syndrome

- Compression of cranial vena cava, e.g. by mediastinal mass
- Granuloma of cranial vena cava
- Neoplasia of cranial vena cava
- Thrombosis of cranial vena cava

Bilateral hind limb oedema

Budd-Chiari-like syndrome

Obstruction of sublumbar lymph nodes,

e.g. neoplasia

Increased central venous pressure

Central lymph obstruction

Central venous occlusion, e.g.

- Mediastinal mass
- Thrombosis

2.1.6 Hypertension

Adrenal disease

Hyperadrenocorticism Hyperaldosteronism Pheochromocytoma

Anaemia* q.v.

CNS disease q.v.

Drugs/toxins

Corticosteroids

Ciclosporin A Dobutamine

Dopamine

Doxapram

Erythropoietin

Fludrocortisone

Phenylpropanolamine

Theobromine

Endocrine disease

Acromegaly Diabetes mellitus* (D)

Hyperoestrogenism

Hyperthyroidism* (C)

Hyperviscosity

Hyperglobulinaemia *q.v.* Polycythaemia *q.v.*

latrogenic

Overzealous fluid administration

Idiopathic

Essential/primary hypertension

Renal disease

Renal arterial disease

Renal parenchymal disease

- Amyloidosis
- Chronic interstitial nephritis*
- Glomerulonephritis
- Glomerulosclerosis
- Pyelonephritis

Thyroid disease

Hyperthyroidism* (C)

2.1.7 Hypotension

Decreased cardiac function

Arrhythmias* q.v.
Cardiomyopathy*
Congenital heart disease
Electrolyte/acid–base disorders* q.v.
Hypoxia
Valvular disease*

Decreased preload

Heatstroke*

Hypoadrenocorticism (D)

Hypovolaemia*

- Blood donation
- Burns
- Effusions *q.v.*
- Diarrhoea q.v.
- Haemorrhage q.v.
- Polyuria without polydipsia q.v.
- Vomiting *q.v.*

Decreased vascular tone

Anaphylaxis

Babesiosis

Electrolyte/acid-base disorders* q.v.

Hypoxia

Neurological disease q.v.

Systemic inflammatory response syndrome

Decreased venous return

Cardiac tamponade

Caval syndrome/heartworm disease

Gastric dilatation/volvulus*

Pneumothorax* q.v.

Positive pressure ventilation

Restrictive pericarditis

Drugs/toxins

ACE inhibitors

Adder bites

Amiloride

Amiodarone

Daffodil

Diazoxide

Dopamine

General anaesthetics and sedatives

Hydralazine

Hymenoptera stings

Indomethacin

Isosorbide dinitrate

Lignocaine

Medetomidine

Mexiletine

Midazolam

Mistletoe

Nitroprusside Oxytetracycline (intravenous)

Phenoxybenzamine

Prazosin

Procainamide

Propofol

Pyridostigmine

Quinidine

Ranitidine (intravenous)

Rhododendron

Snake venom

Sotalol

Terbutaline

Terfenadine

Tricyclic antidepressants Verapamil Xylazine

Yew

2.2 Gastrointestinal/abdominal physical signs

2.2.1 Oral lesions

Congenital deformities e.g.

Cleft palate

Neoplasia

Oropharyngeal tumours

Extramedullary plasmacytoma

Fibroma/fibrosarcoma

Fibropapilloma

Granular cell tumour

Haemangiosarcoma

Histiocytoma

Lymphoma

Mast cell tumour

Melanoma*

Mixed mesenchymal sarcoma

Papilloma (D)

Rhabdomyosarcoma

Squamous cell carcinoma

Transmissible venereal tumour (D)

Odontogenic tumours

Acanthomatous epulides

Ameloblastic adenomatoid

Ameloblastoma

Calcifying epithelial odontogenic tumour

Cementoma

Dentinoma

Fibromatous epulides Fibromyxoma Hamartoma Inductive fibroameloblastoma (C) Keratinising ameloblastoma (C) Odontogenic fibroma Odontoma

Inflammatory masses, e.g.

Feline eosinophilic granuloma complex*

Oral ulceration

Ossifying epulides

Immune-mediated/inflammatory, e.g.

- Eosinophilic granuloma complex*
- Lymphoplasmacytic*

Infectious, e.g.

• Feline calicivirus

Ingestion of irritant/caustic substances*

Metabolic, e.g.

• Uraemia* q.v.

Traumatic*

Periodontitis/gingivitis

Bacterial infection* Diabetes mellitus*

Diet (non-abrasive)*

Immune deficiency, e.g.

- Feline immunodeficiency virus* (C)
- Feline leukaemia virus* (C)

Immune-mediated disease, e.g.

- Lymphoplasmacytic*
- Periodontal foreign material*, e.g.
 - Grass
 - Hair

Tooth abnormalities*, e.g.

- Crowding
- Malocclusion
- Rough surfaces

Salivary gland enlargement

Infarction

Infection

Neoplasia

- Acinic cell tumour
- Adenocarcinoma
- Monomorphic adenoma
- Mucoepidermoid tumour
- Pleomorphic adenoma
- Undifferentiated carcinoma

Sialadenitis

Sialadenosis

Sialocele

Stomatitis

Immune-mediated/inflammatory, e.g.

- Eosinophilic stomatitis
- Lymphoplasmacytic stomatitis*

Infection, e.g.

- Bartonella henselae
- Feline calicivirus* (C)
- Feline herpes virus* (C)

Ingestion of irritant/caustic substances

Metabolic, e.g. uraemia*

Traumatic*

Tooth disease

Caries

Feline odontoclastic resorptive lesions* (C)

Trauma*

2.2.2 Abdominal distension

Abdominal neoplasia*

Ascites* q.v.

Bladder distension* q.v.

Gastric dilatation*

Gastric distension*

Intestinal dilatation/volvulus

Obesity

Obstipation* q.v.

Organomegaly*

- Enlarged kidney q.v.
- Enlarged uterus q.v.
- Hepatomegaly q.v.

• Splenomegaly q.v.

Pneumoperitoneum

Pregnancy

Weakness of abdominal musculature

- Hyperadrenocorticism
- Ruptured prepubic tendon

2.2.3 Abdominal pain

Drugs/toxins

Allopurinol

Blue-green algae

Borax

Daffodil

Diclofenac sodium

Dieffenbachia

Horse chestnut

Ibuprofen

Indomethacin

Itraconazole

Loperamide

Metaldehyde

Misoprostol

Naproxen

NPK fertilisers

Paracetamol

Paraquat

Petroleum distillates

Phenoxy acid herbicides

Poinsettia

Rhododendron

Theobromine

Zinc sulphate

Gastrointestinal disease

Colitis*

Constipation* q.v.

Enteritis*

Gastric dilatation/volvulus* (D)

Gastric foreign body*

Gastric ulceration*

Gastritis*

Intestinal volvulus

Neoplasia*

Small intestinal foreign body*

Hepatobiliary disease

Cholangitis

Cholecystitis*

Cholelithiasis

Gall bladder obstruction

Hepatitis*

Liver lobe torsion

Portal hypertension

Mechanical factors

Dilatation of a hollow viscus

Bladder distension* q.v.

Gastric dilatation/volvulus* (D)

Intestinal dilatation, e.g.

- Foreign body
- Volvulus

Obstruction of outflow

Obstruction of bile outflow

Urinary tract obstruction

Mesenteric tension/traction/torsion

Abscess

Bowel incarceration in hernia or mesenteric tear

Cryptorchid testicular torsion

Foreign body*

Haematoma

Intestinal volvulus

Gastric dilatation/volvulus* (D)

Intussusception*

Neoplasia

Splenic torsion

Stenosis/stricture

Uterine torsion

Miscellaneous

Mesenteric thromboembolism Sterile nodular panniculitis and pansteatitis in Weimaraners

Musculoskeletal pain

Abdominal muscle rupture Referred spinal pain*

Organ rupture

Bile duct

Gall bladder

Intestine

Spleen

Stomach

Urinary tract

Uterus, e.g.

Pyometra

Pancreas

Pancreatic abscess

Pancreatitis*

Pancreatic neoplasia

Peritoneal cavity

Ascites q.v.

Pneumoperitoneum

Haemoabdomen

Angiostrongylus vasorum infection

Coagulopathy q.v.

Neoplasia*

Trauma*

Peritonitis

Blunt trauma*

Feline infectious peritonitis* (C)

Iatrogenic, e.g.

Post-surgical*

Pancreatitis*

Penetrating trauma

Primary (C)

Prostatitis*

Rupture or penetration of gastrointestinal tract

Ruptured pyometra

Uroabdomen

Rupture of urinary tract

Reproductive system

Labour/dystocia*

Metritis*

Prostatic disease

Pyometra*

Trauma

Fractures*

Ruptured viscus

Urinary system

Cystitis*

Lower urinary tract obstruction*

Nephritis

Nephrolithiasis

Pyelonephritis

Ureteral obstruction

2.2.4 Perianal swelling

Anal/rectal prolapse*

Faecal tenesmus*

Anal sac disease

Anal sac abscess*

Anal sac adenocarcinoma

Anal sac impaction*
Anal sacculitis*

Neoplasia

Perianal adenoma* Other perianal neoplasia

Perineal hernia*

Idiopathic

Secondary to causes of tenesmus q.v.

2.2.5 Jaundice

PRE-HEPATIC

Haemolytic anaemia *q.v.* Congenital porphyria Ineffective erythropoiesis Internal haemorrhage Severe myolysis

HEPATIC

Drugs/toxins

Barbiturates

Blue-green algae

Carbimazole

Diazepam

Glipizide

Glucocorticoids

Glyphosate

Griseofulvin

Ketoconazole

Methimazole

Methyltestosterone

Metronidazole

Mexiletine

NSAIDS, e.g.

Carprofen

- Ibuprofen
- Paracetamol
- Phenylbutazone

Phenobarbitone

Plastic explosives

Primidone

Salicylates

Sulphasalazine

Tetracycline

Intrahepatic cholestasis

Hepatic necrosis, e.g.

Infection

Toxin

Infection

Bacterial*

Fungal

Viral

- Adenovirus* (D)
- Feline immunodeficiency virus* (C)
- Feline infectious peritonitis* (C)
- Feline leukaemia virus* (C)

Inflammation

Cholangitis/cholangiohepatitis*

Miscellaneous

Amyloidosis

Cirrhosis

Hepatic erythrohaemophagic syndrome

Hepatic lipidosis

Polycystic kidney disease with

liver cysts (C)

Neoplasia, e.g.

Lymphoma*

Mast cell tumour

Myeloproliferative disease

POST-HEPATIC

Bile duct occlusion

Extraluminal

Choledochal cysts (C)

Duodenal disease

Pancreatic neoplasia

Pancreatitis*

Polycystic disease (C)

Secondary to peribiliary disease

Stricture at porta hepatis

Intramural

Cholangitis

Cholecystitis*

Choledochitis

Gall bladder/duct neoplasia

Intraluminal

Choledochal cysts (C)

Cholelithiasis

Gall bladder mucocoele

Haemobilia

Inspissated bile

Polycystic kidney disease with liver cysts(C)

2.2.6 Abnormal liver palpation

Generalised enlargement

Drugs

Glucocorticoids

Endocrine disease

Diabetes mellitus*

Hyperadrenocorticism

Inflammation/infection, e.g.

Abscess*

Cholangiohepatitis*

Feline infectious peritonitis* (C)

Fungal infection

Granuloma

Hepatitis*

Lymphocytic cholangitis

Miscellaneous

Amyloidosis

Cholestasis (see Jaundice q.v.)

Cirrhosis (early)

Hepatic lipidosis

Nodular hyperplasia

Peliosis

Storage diseases

Neoplasia* e.g.

Lymphoma

Malignant histiocytosis

Venous congestion

Caudal vena cava occlusion (post-caval syndrome)

- Adhesions
- Cardiac neoplasia
- Congenital cardiac disease
- Diaphragmatic rupture/hernia*
- Dirofilariasis
- Pericardial disease
- Thoracic mass*
- Thrombosis
- Trauma

Right-sided congestive heart failure, e.g.

- Dilated cardiomyopathy*
- Pericardial effusion

Focal enlargement

Abscess*

Biliary pseudocyst

Cyst

Granuloma

Haematoma*

Hepatic arteriovenous fistula

Hyperplastic/regenerative nodule*

Liver lobe torsion

Neoplasia

Adenocarcinoma*

Biliary cystadenoma

Haemangiosarcoma*

Hepatocellular carcinoma*

Hepatoma

Lymphoma*

Malignant histiocytosis

Metastatic*

Reduced liver size

Cirrhosis*

Diaphragmatic rupture/hernia* (apparent reduction)

Hypoadrenocorticism (D)

Idiopathic hepatic fibrosis

Portosystemic shunt

- Acquired
- Congenital

2.3 Cardiorespiratory physical signs

2.3.1 Dyspnoea/tachypnoea

Drugs/toxins

Benzalkonium chloride

Blue-green algae

Dichlorophen

Ibuprofen

Metaldehyde

Naproxen

Paracetamol (methaemoglobinaemia)

Paraquat

Salbutamol

Strychnine

Terfenadine

Physiological causes

Exercise

Fear

High ambient temperature Pain

Upper airway disorders

Cervical tracheal disease

Extraluminal compression Foreign body Hypoplasia/stenosis Neoplasia

- Extraluminal
- Intraluminal
 - Adenocarcinoma
 - Chondroma
 - Chondrosarcoma
 - Leiomyoma
 - Lymphoma
 - Osteochondroma
 - Osteosarcoma
 - Plasmacytoma
 - Polyps
 - Rhabdomyosarcoma
 - Squamous cell carcinoma

Tracheal collapse*

Trauma

Laryngeal disease

Éverted saccules* (D)

Inflammation

Laryngeal paralysis* (D)

Neoplasia

Oedema*

Nasal disease (more often dyspnoea than tachypnoea) e.g.

Aspergillosis
Foreign body*
Inflammatory disease*
Nasopharyngeal polyp
Neoplasia
Stenotic nares

Pharyngeal disease

Elongated or oedematous soft palate* (D)

Enlarged tonsils*

Lower airway disorders

Thoracic tracheal disease, e.g.

Extraluminal compression

Foreign body

Hypoplasia/stenosis

Neoplasia (extra- or intraluminal)

Tracheal collapse*

Trauma

Bronchial disease

Bronchiectasis

Broncho-oesophageal fistula

Bronchitis* (D)

Cystic-bullous lung disease, e.g. secondary to emphysema

Eosinophilic bronchitis*

Extraluminal compression

- Enlarged left atrium
- Hilar lymphadenopathy, e.g.
 - Fungal disease
 - Granulomatous disease
 - Neoplasia

Feline asthma* (C)

Foreign body

Lungworm

Neoplasia

Primary ciliary dyskinesia

Pulmonary parenchymal disease

Foreign body

Abscess

Chronic pulmonary fibrosis

Eosinophilic bronchopneumonopathy

Eosinophilic pneumonitis

Eosinophilic pulmonary granulomatosis

Hilar lymph node enlargement

Inhalation pneumonia

Idiopathic pulmonary fibrosis

Inflammatory disease

Irritating gases

Near drowning

Neoplasia*

Paraquat toxicity

Pneumonia/infectious disease*

- Aspiration/inhalation pneumonia
- Bacterial, e.g.
 - Bordetella bronchiseptica
 - Chlamydophila psittaci
 - Escherichia coli
 - Klebsiella pneumoniae
 - Mycobacterium spp.
 - Mycoplasma pneumoniae
 - Pasteurellosis
- Endogenous lipid pneumonia
- Fungal, e.g.
 - Aspergillosis
 - Blastomycosis
 - Coccidioidomycosis
 - Cryptococcosis
 - Histoplasmosis
 - Pneumocystis
- Parasitic, e.g.
 - Aelurostrongylus abstrusus
 - Angiostrongylus vasorum
 - Capillaria aerophila
 - Crenosoma vulpis
 - Oslerus spp.
 - Paragonimus kellicotti
 - Visceral larval migrans
- · Protozoal, e.g.
 - Toxoplasmosis
- Rickettsial
- Viral, e.g.
 - Canine distemper virus* (D)
 - Feline calicivirus* (C)
 - Feline immunodeficiency virus* (C)
 - Feline leukaemia virus* (C)

Pulmonary oedema q.v.

Pulmonary thromboembolism, e.g.

- Cardiac disease
- Heartworm disease
- Hyperadrenocorticism

Smoke inhalation

Trauma, e.g.

- Pulmonary contusions
- Pulmonary haemorrhage

Restrictive disorders

Diaphragmatic hernia, e.g.

- Peritoneopericardial diaphragmatic hernia
- Traumatic*

Large intra-abdominal mass

Neoplasia

- Mediastinal
- Thoracic wall

Pickwickian syndrome (extreme obesity)

Pleural effusion* q.v.

Pneumothorax* q.v.

Severe ascites q.v.

Severe gastric distension

Severe hepatomegaly q.v.

Thoracic wall abnormalities, e.g.

- Neoplasia
- · Pectus excavatum
- Trauma*

Systemic and miscellaneous disorders

Anaemia* q.v.

Central neurological disease causing damage to respiratory centres, e.g.

- Head trauma
- Hyperthermia* q.v.
- Hyperthyroidism* (C)
- Hypoxia*
- Metabolic acidosis q.v.
- Neuromuscular weakness, e.g. polyradiculoneuritis
- Shock/hypovolaemia* q.v.

Acute respiratory distress syndrome

Aspiration of acidic substances

Drug reaction

Inhalation injury

Lung lobe torsion

Multiple transfusions

Pancreatitis

Sepsis

Shock

Surgery

Trauma

2.3.2 Pallor

Anaemia q.v.

Decreased peripheral perfusion

Shock q.v.

Syncope

Vasoconstriction

Drugs/toxins

Adder bites

Baclofen

Diclofenac sodium

Ibuprofen

Ivermectin

Metaldehyde

Naproxen

Paracetamol

Vitamin D rodenticides

2.3.3 Shock

Cardiogenic

Decreased systolic function Dilated cardiomyopathy*

Drugs/toxins, e.g.

Doxorubicin

Myocardial infarction

Myocarditis

Decreased ventricular filling

Hypertrophic cardiomyopathy* (C)

Pericardial effusion/tamponade*

Restrictive cardiomyopathy* (C)

Restrictive pericarditis

Obstruction

Heartworm disease

Intracardiac mass

Thrombosis

Severe arrhythmia q.v.

Valve disease

Severe myxomatous degeneration of mitral valve* (D)

Rupture of chordae tendinae

Distributive

Anaphylactic Septic

Hypovolaemic

Haemorrhage* q.v.

Hypoadrenocorticism (D)

Dehydration, e.g.

Diabetic ketoacidosis*

Diarrhoea* q.v.

Prolonged use of diuretics

Renal disease* q.v.

Vomiting* q.v.

Hypoproteinaemia/plasma loss, e.g.

Abdominal surgery

Ascites q.v.

Burns

Peripheral oedema q.v.

Pleural effusion

Hypoxaemic

Anaemia* *q.v.*Respiratory disease* *q.v.*Toxins

- Carbon monoxide
- Paracetamol

Metabolic

Heat stroke* Hypoglycaemia Sepsis* Toxins, e.g.

Cyanide

Neurogenic

Acute central nervous system disease Electrocution Heat stroke

2.3.4 Cyanosis

PERIPHERAL

Arterial obstruction, e.g.

Aortic thromboembolism* (C)

Vasoconstriction

Hypothermia* q.v. Reduced cardiac output* Shock* q.v.

Venous obstruction, e.g.

Right-sided heart failure* Thrombophlebitis Tourniquet

CENTRAL

Drugs/toxins Baclofen Blue-green algae Loperamide

Metaldehyde

Paracetamol (and other causes of methaemoglobinaemia)

Paraquat

Theobromine

Нурохаетіа

Cardiovascular disease (anatomic shunts), e.g.

Pulmonary arteriovenous fistula

Reverse-shunting patent ductus arteriosus

Reverse-shunting ventricular septal defect

Tetralogy of Fallot

Haemoglobin abnormalities

Reduced inspired oxygen

Altitude

Anaesthetic

Respiratory disease

Hypoventilation

- Pleural effusion* q.v.
- Pneumothorax* q.v.
- Respiratory muscle failure
- Toxicity

Obstruction

- Brachycephalic obstructive airway syndrome
- Foreign body
 - Laryngeal
 - Tracheal
- Large mass in airway, e.g.
 - Abscess
 - Neoplasia
 - Parasite
- Laryngeal paralysis*

Ventilation-perfusion mismatch

- Acute respiratory distress syndrome
- Chronic obstructive pulmonary disease*
- Pneumonia
- Pulmonary inflammatory disease
- Pulmonary neoplasia*

- Pulmonary oedema* q.v.
- Pulmonary thromboembolism

2.3.5 Ascites (see Section 3.7.10 for full listing)

Bile

Blood

Chyle

Exudate

Transudate/modified transudate

Urine

2.3.6 Abnormal respiratory sounds

Crackles

Exudate in airways*
Haemorrhage in airways
Pulmonary fibrosis
Pulmonary oedema* *q.v.*

Stertor

Nasopharyngeal obstruction, e.g.
Brachycephalic obstructive airway syndrome
Foreign body*
Neoplasia

Stridor

Upper airway obstruction

Brachycephalic obstructive airway syndrome

Laryngeal obstruction, e.g.

- Foreign body
- Laryngospasm
- Neoplasia
- Oedema
- Paralysis*

Tracheal obstruction, e.g.

- Collapse*
- Extraluminal compression

- Exudate
- Foreign body
- Haemorrhage
- Neoplasia
- Stenosis

Wheezes

Airway narrowing, e.g.
Bronchoconstriction*
Extraluminal compression
Exudate in airways*
Masses in airways

2.3.7 Abnormal heart sounds

TRANSIENT HEART SOUNDS (HEART SOUNDS OF SHORT DURATION)

Loud S1

Anaemia* q.v.

Intensity varies with arrhythmias, e.g.

- Atrial fibrillation
- Heart block
- Sinus arrhythmia*
- Ventricular premature depolarisations*

High sympathetic tone*
Mitral insufficiency*
Systemic hypertension* q.v.
Tachycardia* q.v.
Thin animals*
Young animals*

Quiet S1

Decreased myocardial contractility, e.g.

Dilated cardiomyopathy*
 Diaphragmatic hernia*

Emphysema

First-degree heart block*

Obesity* Pericardial effusion *q.v.* Pleural effusion* *q.v.* Shock* *q.v.*

Split S1

Bundle branch block Cardiac pacing Ectopic beats* Physiological in healthy large-breed dogs*

Note: A split S1 should be differentiated from presystolic gallop, ejection sounds and diastolic clicks.

Loud S2

Anaemia* q.v.

Fever* q.v.

Hyperthyroidism* (C)

Intensity varies with arrhythmias, e.g.

- Atrial fibrillation
- Heart block
- Sinus arrhythmia*
- Ventricular premature depolarisations*

Tachycardia* q.v.

Thin animals*

Young animals*

Quiet S2

Decreased myocardial contractility, e.g.

Dilated cardiomyopathy*

Diaphragmatic hernia*

Emphysema

Obesity*

Pericardial effusion q.v.

Pleural effusion* q.v.

Thoracic masses*

Shock* q.v.

Split S2

Physiological in healthy large-breed dogs*

Aortic valve closure follows pulmonic valve closure (A2 follows P2)

Aortic stenosis

Left bundle branch block

Systemic hypertension

Ventricular ectopic beats*

Pulmonic valve closure follows aortic valve closure (P2 follows A2)

Left to right intracardiac shunt (atrial septal defect)

Pulmonary hypertension, e.g.

Heartworm disease

Pulmonic stenosis

Right bundle branch block

Ventricular ectopic beats*

Gallop rhythms

Accentuated S3 (protodiastolic)

Occasionally noted in healthy animals

on phonocardiography

Anaemia* q.v.

Hyperthyroidism* (C)

Mitral regurgitation*

Myocardial dysfunction*

Patent ductus arteriosus

Septal defects

Accentuated S4 (presystolic)

Inaudible in healthy animals, but may be noted

on phonocardiography

Hyperthyroidism* (C)

Hypertrophic cardiomyopathy* (C)

Marked left ventricular hypertrophy

Profound heart failure following rupture of chordae tendinae

Early diastolic sounds

Opening snaps (rare)

· Mitral valve stenosis

Pericardial knocks

· Constrictive pericarditis

Plops

Mobile atrial tumours

Ejection sounds (high frequency sounds in early diastole)

Aortic stenosis

Dilatation of the great vessels

Heartworm disease

Hypertension* q.v.

Opening of abnormal semilunar valves

Pulmonic stenosis

Tetralogy of Fallot

Systolic clicks (short, mid- to high-frequency sounds in mid to late systole)

Early degenerative valvular disease

MURMURS (HEART SOUNDS OF LONGER DURATION ARISING FROM TURBULENT BLOOD FLOW)

Innocent murmurs*

Physiological murmurs

Anaemia* q.v.

Fever* a.v.

Hypertension* q.v.

Hyperthyroidism* (C)

Pregnancy*

Murmurs associated with cardiovascular disease

Continuous

Coronary arteriovenous fistula

Coronary artery or ruptured sinus aneurysm communicating directly with right atrium

Patent ductus arteriosus

Pulmonary arteriovenous fistula

Diastolic

Aortic insufficiency (congenital or associated with bacterial endocarditis)

Mitral stenosis

Systolic

Holosystolic crescendo-decrescendo

- Aortic stenosis
- Pulmonic stenosis
- Ventricular septal defect

Holosystolic plateau-shaped

- Mitral regurgitation*
- Tricuspid regurgitation*
- Ventricular septal defect

2.3.8 Abnormalities in heart rate

BRADYCARDIA

Normal in athletic dogs, during rest/sleep

Cardiac disease/arrhythmias q.v.

CNS disease

Hypothermia

Severe systemic disease

Drugs/toxins

Adder bites

Amiodarone

Antidysrhythmics, e.g. beta blockers

Atenolol

Baclofen

Bethanechol

Cannabis

Carbamate

Clonidine

Daffodil

Diltiazem

Fentanyl

Glyphosate

Hypertonic saline

Ivermectin

Lignocaine

Loperamide

Medetomidine

Mexiletine

Organophosphates

Paraquat

Phenoxy acid herbicides

Propranolol

Pyridostigmine

Rhododendron

Sotalol

Theobromine

Timolol maleate

Verapamil

Vitamin D rodenticides

Xylazine

Yew

Increased vagal tone*, e.g.

Gastrointestinal disease* q.v. Respiratory disease* q.v.

Metabolic disease

Hyperkalaemia *q.v.* Hypoadrenocorticism Hypoglycaemia *q.v.* Hypothyroidism* Uraemia*

TACHYCARDIA

Drugs/toxins

Adder bites

Adrenaline

Atropine

Baclofen

Blue-green algae

Cannabis

Dinoprost tromethamine

Dobutamine

Dopamine

Doxapram

Doxorubicin

Ethylene glycol

Glyceryl trinitrate

Glycopyrronium bromide

Glyphosate

Hydralazine

Ibuprofen

Isosorbide dinitrate

Ketamine

Levothyroxine

Metaldehyde

Paracetamol

Paraquat

Petroleum distillates

Phenoxy acid herbicides

Phenoxybenzamine

Propantheline bromide

Pyrethrins/pyrethroids

Salbutamol

Selective serotonin reuptake inhibitors

Terbutaline

Terfenadine

Theobromine

Theophylline

Tricyclic antidepressants

Verapamil

Vitamin D rodenticides

Sinus tachycardia

Physiological

Excitement*

Exercise*

Fear*

Pain*

Pathological

Heart failure*

Respiratory disease*

Shock*

Systemic disease

- Anaemia* q.v.
- Fever* *q.v.*
- Hyperthyroidism (C)*
- Hypoxia*
- Sepsis*

Other types of supraventricular tachycardia* q.v. Ventricular tachycardia* q.v.

2.3.9 Jugular distension/hepatojugular reflux

Cardiac disease resulting in right-sided heart failure* Fluid volume overload, e.g.

Iatrogenic*

Pericardial disease

2.3.10 Alterations in arterial pulse

Hyperkinetic (bounding) pulse

Anaemia* q.v.

Arteriovenous fistula

Bradycardia* q.v.

Decreased diastolic blood pressure

- Aortic insufficiency
- Shunting lesions, e.g.
 - Increased stroke volume
 - Increased systolic blood pressure
 - Patent ductus arteriosus

Fever* q.v.

Hyperthyroidism* (c)

Hypokinetic (weak) pulse

Aortic stenosis

Increased peripheral resistance

Regional loss of pulse (see succeeding text

Small stroke volume, e.g.

- Hypovolaemia* q.v.
- Left-sided heart failure*

Tachycardia q.v.

Toxins

- Alphachloralose
- Anticoagulant rodenticides

Pulsus alternans

Myocardial failure Tachyarrhythmias *q.v.*

Pulsus bigeminus

Ventricular bigeminy

Pulse deficits

Tachyarrhythmias q.v.

Pulsus paradoxus

Exaggerated in pericardial effusion (with cardiac tamponade) Physiological

Regional loss of pulse

Infectious embolus Neoplastic embolus Thromboembolism*

2.4 Dermatological signs

2.4.1 Scaling

Exfoliative dermatoses

Contact dermatitis*

Drug eruption

Epitheliotrophic lymphoma

Feline immunodeficiency virus* (C)

Feline leukaemia virus* (C)

Parapsoriasis

Pemphigus foliaceus

Systemic lupus erythematosus

Thymoma

Toxic epidermal necrolysis

Primary/inherited disorders of keratinisation

Acne*

Canine primary idiopathic seborrhoea (D)

Ear margin dermatosis

Epidermal dysplasia (Armadillo Westie syndrome) (D)

Feline idiopathic facial dermatitis (C)

Feline primary idiopathic seborrhoea (C)

Follicular dysplasia
Follicular hyperkeratosis
Follicular parakeratosis
Footpad hyperkeratosis
Ichthyosis
Lethal acrodermatitis
Lichenoid psoriasiform dermatosis
Nasal hyperkeratosis*
Nasodigital hyperkeratosis
Schnauzer comedo syndrome (D)
Sebaceous adenitis
Tail gland hyperplasia*
Vitamin-A-responsive dermatosis
Zinc-responsive dermatosis

Secondary scaling

Allergic/immune-mediated

Atopy*

Contact hypersensitivity

Drug hypersensitivity

Food hypersensitivity*

Hormonal hypersensitivity

Pemphigus foliaceus

Environmental

Low humidity

Physical/chemical damage

Infectious/parasitic

Bacterial pyoderma

Cheyletiellosis*

Cowpox virus (C)

Demodecosis*

Dermatophytosis*

Endoparasites*

Fleas*

Leishmaniasis

Malassezia spp*

Pediculosis*

Pyoderma*

Scabies* (D)

Metabolic/endocrine

Diabetic dermatopathy

Growth hormone-responsive dermatosis

Hepatic disease

Hyperadrenocorticism

Hyperandrogenism

Hyperthyroidism* (C)

Hypopituitarism

Hypothyroidism* (D)

Idiopathic male feminising syndrome

Intestinal disease

Necrolytic migratory erythema

Oestrogen-responsive dermatosis

Pancreatic disease

Renal disease

Sertoli cell tumour

Sex hormone abnormalities

Superficial necrolytic dermatitis

- Glucagonoma
- Hepatocutaneous syndrome

Testosterone-responsive dermatosis

Neoplastic

Epitheliotrophic lymphoma

Nutritional

Dietary deficiency of essential fatty acids Malabsorption/malnutrition of essential fatty acids

2.4.2 Pustules and papules (including miliary dermatitis)

Primary immune-mediated

Bullous pemphigoid Pemphigus erythematosus Pemphigus foliaceus Pemphigus vegetans

Pemphigus vulgaris

Systemic lupus erythematosus

Immune-mediated diseases causing secondary pyoderma

Atopy*
Contact allergy*
Food hypersensitivity*
Hypereosinophilic syndrome

Infectious/parasitic diseases causing secondary pyoderma

Cheyletiellosis Demodecosis* Dermatophilosis Dermatophytosis* External parasite bites*, e.g.

- Fleas
- Mosquitoes

Feline immunodeficiency virus*
Feline leukaemia virus*
Lynxacarus radovskyi
Malassazia spp. *

Malassezia spp. *
Notoedres cati
Pediculosis*
Sarcoptic mange*
Superficial pustular dermatitis*

Trombiculiasis* Miscellaneous

Canine linear IgA pustular dermatosis (D)
Contact irritation*
Drug eruptions
Juvenile cellulitis
Sterile eosinophilic pustular dermatosis
Subcorneal pustular dermatosis

Neoplastic

Epitheliotrophic lymphoma Mast cell tumour*

Nutritional

Biotin deficiency Essential fatty acid deficiency

2.4.3 Nodules

Inflammation

Angiogenic oedema Calcinosis circumscripta Calcinosis cutis

Infectious

- Bacterial*
- Fungal
- Parasitic

Granuloma, e.g.

- Eosinophilic*
- Insect bite*

Histiocytosis

Nodular cutaneous amyloidosis Nodular dermatofibrosis Panniculitis

Sterile nodular granuloma

Urticaria* Xanthoma

Neoplasia

Epithelial

Apocrine adenoma/carcinoma*

Basal cell tumour*

Ceruminous adenoma/carcinoma*

Keratoacanthoma*

Papilloma*

Perianal gland adenoma/carcinoma*

Pilomatrixoma*

Sebaceous adenoma/carcinoma*

Squamous cell carcinoma*

Sweat gland tumours*

Trichoepithelioma*

Melanocyte

Melanoma

Round cell

Lymphoma

- Epitheliotrophic
- · Lymphomatoid granulomatosis
- Non-epitheliotrophic

Histiocytic sarcoma

Histiocytoma*

Mast cell tumour*

Plasmacytoma*

Transmissible venereal tumour

Mesenchymal

Benign fibrous histiocytoma

Dermatofibroma

Fibrolipoma

Fibroma

Fibropapilloma

Fibrosarcoma

Haemangioma/sarcoma

Haemangiopericytoma

Leiomyoma/sarcoma

Lipoma/sarcoma*

Lymphangioma/sarcoma

Myxosarcoma

Schwannoma

Metastatic

Non-neoplastic, non-inflammatory

Benign nodular sebaceous hyperplasia

Cysts*

- Dermoid
- Epidermoid
- Follicular

Fibroadnexal dysplasia

Haematoma*

Naevi/hamartoma

- Collagenous
- Follicular
- Sebaceous
- Vascular

Seroma* Skin polyp* Urticaria pigmentosa

2.4.4 Pigmentation disorders (coat or skin)

HYPOPIGMENTATION

Generalised

Age-related greying*

Albinism

Canine cyclic haematopoiesis (D)

Chediak-Higashi syndrome (C)

Mucocutaneous hypopigmentation

Nutritional deficiencies

- Copper
- Lysine
- Pantothenic acid
- Protein
- Pyridoxine
- Zinc

Oculocutaneous albinism

Piebaldism

Tyrosinase deficiency

Waardenburg syndrome

Drugs

Localised

Idiopathic

Periocular leukotrichia/Aguirre syndrome Seasonal nasal hypopigmentation*

Immune-mediated

Sutton's halo

Uveodermatological syndrome

Vitiligo

Infectious

Aspergillosis

Leishmaniasis

Neoplastic

Basal cell tumour

Epitheliotrophic lymphoma

Gastric carcinoma

Mammary adenocarcinoma*

Melanoma

Squamous cell carcinoma

Post-inflammatory

Bullous pemphigoid

Inflammatory dermatitis* q.v.

Lupus erythematosus

Trauma

Burns

Chemical

Physical*

Radiation

Surgical*

HYPERPIGMENTATION

Drugs

- Minocycline
- Mitotane

Focal

Acanthosis nigrans

Demodecosis*

Dermatophytosis*

Lentigo

Naevus

Neoplasia*

Post-inflammatory

Pyoderma*

Trauma*

Generalised/diffuse

Alopecia X

Demodecosis*

Endocrine disease

• Adrenal sex-hormone dermatosis

- Growth hormone-responsive dermatosis
- Hyperadrenocorticism
- Hyperoestrogenism
- Hypothyroidism* (D)

Iatrogenic

• Prolonged glucocorticoid administration

Malassezia spp. *

Recurrent flank alopecia

Ultraviolet irradiation of alopecic regions

Multifocal

Bowen's disease (C)

Demodecosis*

Dermatophytosis*

Lentigines

Melanoderma

Naevus

Post-inflammatory

Pyoderma*

Tumours*

Urticaria pigmentosa

2.4.5 Alopecia

Failure of hair growth

Paraneoplastic alopecia

Endocrine disease

Diabetes mellitus*

Hyperadrenocorticism

Hypothyroidism* (D)

Follicular diseases

Anagen defluvium

- Cancer chemotherapy
- Endocrine disease*
- Infection
- Metabolic disease*

Colour-dilution alopecia

Congenital follicular dysplasias

Congenital hypotrichosis

Dark hair follicular dystrophy

Hair cycle arrest alopecia

Endocrine disease

- Alopecia X
 - Adrenal sex hormone-responsive dermatosis
 - Castration-responsive dermatosis
 - Growth hormone-responsive dermatosis
 - Oestrogen responsive dermatosis
- Testosterone-responsive dermatosis
 - Hyperadrenocorticism
 - Hyperoestrogenism
 - Hypothyroidism* (D)

Idiopathic cyclic flank alopecia

Pattern baldness

Post-clipping

Telogen defluvium*

- Stress, e.g.
 - Anaesthesia
 - Pregnancy
 - Shock q.v.
 - Surgery
 - Systemic illness

Systemic diseases

Chronic hepatic disease *q.v.*End-stage renal disease *q.v.*Feline immunodeficiency virus (C)
Feline leukaemia virus (C)

Damage to hair follicle

Secondary to pruritus* q.v.

Drugs

Carbimazole

Follicular infections
Bacterial folliculitis*
Demodecosis*
Dermatophytosis*

Immune-mediated disease

Alopecia areata

Idiopathic lymphocytic mural folliculitis

Pseudopelade

Sebaceous adenitis

Miscellaneous

Alopecia mucinosis

Feline-acquired symmetric alopecia (C)

Feline pinnal alopecia* (C)

Feline pre-auricular alopecia (normal)

Follicular lipidosis of Rottweilers (D)

Medullary trichomalacia

Psychogenic alopecia*

Short hair syndrome of Silky breeds (D)

Neoplasia*

Nutritional

Zinc deficiency

Zinc-responsive dermatosis

Trauma/physical

Injection site reaction

Over-grooming

Sensory neuropathy

Traction alopecia

Trichoptilosis

Tricorrhexis nodosa

2.4.6 Erosive/ulcerative skin disease

Drugs/toxins

ACE inhibitors

Diuretics

Fenbendazole

Imodium

Itraconazole

Ivermectin

Metoclopramide

Metronidazole Phenobarbitone Phenylbutazone Thallium

Idiopathic

Feline idiopathic ulcerative dermatosis

Immune-mediated

Bullous pemphigoid
Discoid lupus erythematosus
Epidermolysis bullosa acquisita
Erythema multiforme
Mucous membrane pemphigoid
Perianal fistulae
Plasma cell pododermatitis
Systemic lupus erythematosus
Toxic epidermal necrolysis
Ulcerative disease of Shetland Sheepdog
and Rough Collie (D)

Infection

Antibiotic responsive ulcerative dermatoses Cowpox virus (C)

Neoplasia*

Physical

Burns Frostbite Radiation Trauma

Vasculitis

Idiopathic Immune-mediated Infectious

2.4.7 Otitis externa

Primary causes

Disorders of keratinisation

Primary seborrhoea Sebaceous adenitis Vitamin-A-responsive dermatosis

Endocrine, e.g.

Hyperadrenocorticism Hypothyroidism* (D)

Hypersensitivity

Atopy*
Contact allergy*
Drug reactions
Food hypersensitivity*

Immune-mediated

Bullous pemphigoid Cold agglutinin disease Drug eruption Erythema multiforme Lupus erythematosus Pemphigus erythematosus Pemphigus foliaceus Vasculitis

Infection

Fungal

- Dermatophytosis*
- Sporothrix schenckii

Parasites

- Demodecosis*
- Fleas*
- Otodectes cyanotis*
- Pediculosis*
- Sarcoptic mange* (D)
- Trombiculosis*

Pyoderma

Miscellaneous

Abnormal cerumen production Juvenile cellulitis

Neoplasia

Adenocarcinoma

Adenoma

Papilloma

Squamous cell carcinoma

Physical

Foreign body*

Predisposing factors

Ear conformation/structure

Ear canal stenosis

- Acquired*
- Inherited

Hypertrichosis*

Neoplasia

Pendulous pinnae* (D)

Polyps*

Excessive moisture

Humidity Swimming

latrogenic

Irritant ear cleaning products

Overuse of cleaning products

Trauma

Systemic immunosuppression

Perpetuating factors

Acquired changes secondary to chronic ear disease

- Fibrosis*
- Hyperplasia*
- Mineralisation*
- Oedema*
- Ulceration*

Bacterial infection*

- Enterobacter spp.
- Proteus spp.
- Pseudomonas spp
- Staphylococcus intermedius
- Streptococcus spp.

Candidiasis*

Otitis media

2.4.8 Pododermatitis

Asymmetric pododermatitis

Infection

Bacterial*

- Actinomyces spp.
- Nocardia spp.
- Proteus spp.
- Pseudomonas spp
- Staphylococcus intermedius

Fungal

- Blastomycosis
- Candidiasis
- Cryptococcosis
- Dermatophytosis*
- Eumycotic mycetoma
- Malassezia* spp.

Parasitic, e.g.

Demodecosis*

Miscellaneous

Acral lick dermatitis*

Arteriovenous fistula

Calcinosis circumscripta

Foreign body*

Irritant*

Osteomyelitis

Sensory neuropathy

Neoplasia

Trauma

Symmetric pododermatitis

Congenital

Acrodermatitis of Bull Terriers (D)

Familial hyperkeratosis in Irish Terriers (D)

Familial vasculopathy of German Shepherd (D)

Idiopathic footpad hyperkeratosis

Tyrosinaemia

Vasculitis of Jack Russell Terriers (D)

Immunodeficiencies

Acquired

Congenital

Immune-mediated/allergic

Atopy*

Bullous pemphigoid

Cold agglutinins

Contact allergy*

Dermatomyositis (D)

Drug eruption

Food allergy*

Pemphigus foliaceus

Pemphigus vulgaris

Plasma cell pododermatitis (C)

Sterile granuloma/pyogranuloma

Systemic lupus erythematosus

Vasculitis

Infection

Bacterial, e.g.

• Staphylococcus intermedius

Fungal, e.g.

Malassezia spp.

Parasitic, e.g.

- Demodecosis
- Hookworm
- Leishmaniasis
- Pelodera

Viral

• Distemper* (D)

Irritant

Metabolic

Calcinosis circumscripta Superficial necrolytic dermatitis

Miscellaneous

Dermatofibrosis

Neoplasia

Nutritional

Zinc responsive dermatosis

Psychogenic/neurogenic

Acral mutilation of German Short-Haired Pointers (D)

Sensory neuropathy

2.4.9 Disorders of the claws

Drugs/toxins

Thallotoxicosis

Idiopathic conditions

Idiopathic onychodystrophy Idiopathic onychogryphosis

Idiopathic onychomadesis

Immune-mediated disease

Bullous pemphigoid

Cryoglobulinaemia

Discoid lupus erythematosus/symmetric

lupoid onychodystrophy

Drug eruption

Eosinophilic granuloma complex

Pemphigus complex

Systemic lupus erythematosus

Vasculitis

Infection

Bacterial

Secondary to trauma or virus*

Fungal

- Blastomycosis
- Candidiasis
- Cryptococcosis
- Dermatophytosis
- Geotrichosis
- Malassezia spp.
- Sporothricosis

Parasitic

- Ascarids
- Demodecosis
- Hookworm dermatitis

Protozoal

Leishmaniasis

Viral

- Canine distemper virus* (D)
- Feline immunodeficiency virus* (C)
- Feline leukaemia virus* (C)

Inherited/primary disease

Anonychia (loss of nails)

Dermatomyositis

Epidermolysis bullosa

Naevus

Primary seborrhoea

Supernumerary claws

Metabolic/endocrine disease

Acromegaly

Diabetes mellitus*

Hyperadrenocorticism

Hyperthyroidism* (C)

Hypothyroidism* (D)

Necrolytic migratory erythema

Neoplasia, e.g.

Metastatic lung carcinoma Squamous cell carcinoma

Nutrition

Lethal acrodermatitis
Zinc responsive dermatosis

Trauma

Irritant chemical* Physical injury*

Vascular

Disseminated intravascular coagulation Raynaud-like disease

2.4.10 Anal sac/perianal disease

Perianal/caudal pruritus

Anal sac impaction*
Anal sacculitis*
Atopy*
Flea bite hypersensitivity*
Food hypersensitivity*
Intertrigo*

- Perineal
- Tail fold
- Vulval fold

Parasitism*, e.g.

- Cheyletiellosis
- Sarcoptic mange

Perianal fistula

Anal furunculosis* Ruptured anal sac abscess*

Perianal swelling

Anal sac abscess*
Anal sac neoplasia*
Perianal adenoma*
Other perianal neoplasia
Perineal hernia*
Rectal prolapse*

2.5 Neurological signs

2.5.1 Abnormal cranial nerve (CN) responses

The anatomical localisation of lesions associated with the abnormal test are listed, together with other disorders that can produce alterations in the cranial nerve tests.

Anisocoria

Abnormal pupil constricted Corneal ulcers/lacerations Drugs, e.g.

• Pilocarpine
Horner syndrome
Posterior synechiae
Previous inflammation
Uveitis*

Abnormal pupil dilated

Iris, retina, CN II, CN III

- Chorioretinitis
- Glaucoma
- Iris atrophy/hypoplasia
- Iris trauma
- · Posterior synechiae
- Unilateral blindness
- Drugs, e.g.
 - Atropine
 - Phenylephrine

Auditory response reduced

CN VIII
External auditory canal*
Middle* or inner ear

Corneal reflex reduced

Brainstem CN V CN VII

Facial asymmetry

Facial paralysis

- CN VII
- Idiopathic neuritis
- Neoplasia of the middle ear
- Otitis media*

Masticatory muscle wastage

- CN V
 - Idiopathic trigeminal neuritis
 - Malignant trigeminal nerve sheath tumour
- Masticatory myositis

Gag reflex reduced

Brainstem

CN IX

CN X

Jaw tone reduced/inability to close jaw

CN V

- · Idiopathic trigeminal neuritis
- Lymphoma*
- Neosporosis

Orthopaedic or muscular disease

Lack of response to non-irritant smell

CN I

Nasal disease

Menace response reduced

Brainstem

Cerebellum

CN II

CN VII

Forebrain

Immature animal

Retina

Palpebral reflex reduced

Brainstem

CN V

CN VII

Pupillary light reflex reduced

Brainstem

CN II

CN III

Retina

Response to stimulation of nasal mucosa reduced

Brainstem

CN V

Forebrain

Response to vagal manoeuvres reduced

CN X

Spontaneous nystagmus

Brainstem

CN VIII

Toxic, e.g.

- Cannabis
- Metaldehyde

Vestibular disease q.v., e.g.

- Canine idiopathic geriatric vestibular disease*
- Congenital vestibular disease
- Middle ear disease

Strabismus

Ventrolateral

CN III

Dorsolateral

CN IV

Medial

CN VI

Vestibulo-ocular reflex reduced

Brainstem

CN III

CN IV

CN VI

CN VIII

Diseases of CN V

Idiopathic trigeminal neuritis Infiltrating neoplasia, e.g.

- Lymphoma
- Nerve sheath tumours

Diseases of CN VII

Idiopathic Insulinoma Otitis media/interna Trauma of middle ear Tumour of middle ear

2.5.2 Vestibular disease

(Signs include head tilt, nystagmus, circling, leaning, falling and rolling)

PERIPHERAL VESTIBULAR SYSTEM Congenital vestibular disease Drugs/toxins

Antibiotics

Aminoglycosides

Amphotericin B

Ampicillin

Bacitracin

Chloramphenicol

Colistin

Erythromycin

Griseofulvin

Hygromycin B

Metronidazole

Minocycline

Polymixin B

Tetracyclines

Vancomycin

Antiseptics

Benzalkonium chloride

Benzethonium chloride

Cetrimide

Chlorhexidine

Ethanol

Iodine

Iodophores

Cancer chemotherapeutics

Actinomycin

Cisplatin

Cyclophosphamide

Vinblastine

Vincristine

Diuretics

Bumetanide

Ethacrynic acid

Frusemide

Metals/heavy metals

Arsenic

Gold salts

Lead

Mercury

Triethyl/trimethyl tin

Miscellaneous

Ceruminolytic agents

Danazol

Detergents

Digoxin

Dimethylsulphoxide

Diphenylhydrazine

Insulin

Mexiletine

Potassium bromide

Prednisolone

Propylene glycol

Quinidine

Salicylates

Idiopathic conditions

Idiopathic geriatric vestibular disease*

Infection

Extension of otitis externa* *q.v.* Foreign bodies* Haematogenous spread of infection Otitis media/interna* Polyps*

Metabolic disease

Hypothyroidism* (D)

Neoplasia

Ceruminous gland adenocarcinoma Chondrosarcoma Fibrosarcoma Osteosarcoma Schwannoma Squamous cell carcinoma

Trauma

CENTRAL VESTIBULAR SYSTEM

Congenital conditions

Chiari-like malformation Hydrocephalus

Degeneration

Lysosomal storage disorders

Drugs/toxins

Metronidazole

Idiopathic conditions

Arachnoid cysts

Immune-mediated/Infection

Feline spongiform encephalopathy (C) Meningoencephalitis

Metabolic disease

Electrolyte abnormalities* q.v. Hepatic encephalopathy* q.v. Uraemic encephalopathy* q.v.

Neoplasia

Choroid plexus tumours
Dermoid cyst
Epidermoid cyst
Glioma
Lymphoma
Medulloblastoma
Meningioma
Metastatic tumour

Nutrition

Thiamine deficiency Trauma

Vascular disorders

Cerebrovascular accident

2.5.3 Horner's syndrome

First order (hypothalamus, rostral midbrain, spinal cord to T3)

Intracranial disease, e.g.

Neoplasia

Spinal disease q.v.

Thoracic disease, e.g.

Cranial mediastinal mass

Second order (pre-ganglionic) (T1-T3, vagosympathetic trunk, caudal and cranial cervical ganglia)

Brachial plexus avulsion

Cervical soft tissue disease, e.g.

- Mass
- Neoplasia
- Trauma

Cervical surgery, e.g.

Thyroidectomy

Third order (post-ganglionic) (middle ear, cranial cavity, eye)

Feline immunodeficiency virus* (C)

Iatrogenic, e.g.

• Bulla osteotomy

Idiopathic*

Middle ear

- Mass
- Neoplasia

Otitis media/interna*

Retrobulbar

- Injury
- Mass*
- Neoplasia

2.5.4 Hemineglect syndrome (Forebrain dysfunction q.v.)

2.5.5 Spinal disorders

C1-C5

Acute

Atlantoaxial subluxation

Cervical spondylomyelopathy (D)

Degenerative disc disease* (D)

Discospondylitis

Fibrocartilaginous embolism*

Fracture*

Granulomatous meningoencephalomyelitis

Haematoma

Ischaemic myelopathy

Luxation

Neoplasia

Chronic

Atlanto-occipital dysplasia

Atlantoaxial subluxation

Calcinosis circumscripta

Cervical fibrotic stenosis

Cervical spondylomyelopathy* (D)

Feline infectious peritonitis (C)

Hypervitaminosis A Neoplasia Spinal arachnoid cysts Synovial cysts Syringohydromyelia*

C6-T2

Acute

Brachial plexus avulsion

Cervical spondylomyelopathy* (D)

Degenerative disc disease* (D)

Discospondylitis

Fibrocartilaginous embolism*

Fracture*

Granulomatous meningoencephalomyelitis

Haematoma

Luxation

Neoplasia

Chronic

Cervical spondylomyelopathy* (D)

Dermoid sinus

Neoplasia

Spinal arachnoid cysts

Synovial cysts

T3-L3

Acute

Ascending myelomalacia

Degenerative disc disease* (D)

Discospondylitis

Fibrocartilaginous embolism

Fracture*

Granulomatous meningoencephalomyelitis

Luxation

Neoplasia

Chronic

Calcinosis circumscripta

Degenerative disc disease* (D)

Degenerative myelopathy* Neoplasia Spinal arachnoid cyst Synovial cysts

L4-S3

Acute

Ascending myelomalacia Cauda equina neuritis* (D) Degenerative disc disease* (D) Discospondylitis

Fibrocartilaginous embolism

Fracture*

Granulomatous meningoencephalomyelitis

Ischaemic neuromyopathy

Luxation

Neoplasia

Psoas muscle injury

Chronic

Degenerative myelopathy*

Dermoid sinus

Lumbosacral disc disease* (D)

Neoplasia

Sacral osteochondritis dissecans

Sacrocaudal dysgenesis

Spina bifida

Tethered cord syndrome

2.6 Ocular signs

2.6.1 Red eye

CONJUNCTIVITIS

Chemical

Acid Alkali

Antiseptics Shampoos

Immune-mediated

Allergic
Arthropod bites*
Atopy*
Drug reaction
Food hypersensitivity*
Idiopathic
Keratoconjunctivitis sicca*

Infectious

Bacterial* Fungal, e.g.

Blastomycosis

Mycoplasmal

Parasitic, e.g.

• Thelazia spp.

Rickettsial

Viral, e.g.

• Canine distemper virus* (D)

Neurological

Lack of blink reflex

- Lesions of facial nerve q.v.
- Lesions of trigeminal nerve q.v.

Lack of tear production

Neurogenic keratoconjunctivitis sicca

Physical

Cilia*

Dust*

Foreign body*

Masses*

Poor eyelid anatomy*

- Ectropion
- Entropion

Radiation therapy

Neoplastic, e.g.

Mast cell tumour Melanoma Squamous cell carcinoma

Systemic diseases

Hepatozoonosis Leishmaniasis Listeriosis Multiple myeloma Systemic histiocytosis Tyrosinaemia (D)

ANTERIOR UVEITIS

Idiopathic

Ionising radiation

Algae

Protothecosis

Bacteria

Bartonella

Borreliosis

Brucellosis (D)

Leptospirosis

Septicaemia

- Abscesses*
- Bacterial endocarditis
- Dental infections*
- Neonatal umbilical infections
- Prostatitis*
- · Pyelonephritis
- Pyometra*
- Pyothorax

Fungal

Blastomycosis Candidiasis

Coccidioidomycosis Cryptococcosis Histoplasmosis

Parasitic

Angiostrongylosis Baylisascaris procyonis Diptera Dirofilariasis **Toxocariasis**

Protozoa

Leishmaniasis Neosporosis (D) Toxoplasmosis

Rickettsia

Ehrlichiosis Rocky Mountain Spotted Fever

Viruses

Canine adenovirus-1 (D) Canine distemper virus Canine herpes virus (D) Feline immunodeficiency virus (C)* Feline infectious peritonitis (C)* Feline leukaemia virus (C)* Rabies

Neoplasia

Adenocarcinomas Ciliary body Ciliary body adenoma Medulloepitheliomas Melanoma Metastatic neoplasia, especially

Haemangiosarcoma

Lymphoma

Sarcoma

Systemic histiocytosis

Non-infectious inflammatory

Lens-associated anterior uveitis

- Cataract*
- Luxation*
- Penetrating trauma*

Granulomatous meningoencephalomyelitis

Idiopathic

Immune-mediated vasculitis

Pigmentary uveitis

Uveodermatological syndrome

Systemic, e.g.

Coagulopathy Hyperlipidaemia *q.v.* Systemic hypertension* *q.v.* Toxaemia

Trauma

Blunt trauma*
Penetrating trauma*/intraocular
foreign bodies
Drugs, e.g.

Miotics

BULBAR HYPERAEMIA/VASCULAR CONGESTION

Anterior scleritis
Trauma*

Episcleritis

Nodular Simple

Glaucoma

Primary

Goniodysgenesis Primary open angle glaucoma

Secondary

Cataract* q.v.

Drugs

- Atropine
- Sildenafil

Intraocular haemorrhage* q.v.

Lens luxation*

Neoplasia

Neovascular tissue overlying pectinate ligament

Pigmentary glaucoma

Trauma

Uveitis* q.v.

Vitreous prolapse post-lentectomy

Cornea Red

Haemorrhage

Granulation tissue

Neovascularisation

Intraocular Red Eye

Anterior uveitis

Hyphaema

Iris mass

Retinal detachment

Vitreal haemorrhage

2.6.2 Corneal opacification

Corneal oedema

Anterior uveitis* q.v.

Canine adenovirus-1 (D)

Corneal ulceration* q.v.

Drugs/toxins

Tocainide

Endophthalmitis

Endothelial dystrophy

Glaucoma q.v.

Historic use of canine adenovirus-1 live vaccine

Intraocular neoplasia

Mechanical trauma*/iatrogenic

Neovascularisation Persistent pupillary membranes

Corneal vascularisation

Endophthalmitis Glaucoma q.v. Intraocular neoplasia Keratitis* Pannus* Uveitis* q.v.

Miscellaneous

Calcium deposition Cellular infiltration Degenerative changes Foreign bodies* Lipid deposition Neoplastic infiltration Scarring* Xerosis

Pigmentation

Anterior synechiae Chronic corneal insult* Congenital endothelial pigmentation Corneal sequestrum Limbal melanoma Persistent pupillary membranes Pigmentary glaucoma

2.6.3 Corneal ulceration/erosion

Degeneration

Corneal calcific degeneration Lipid keratopathy

Dystrophic

Bullous keratopathy Corneal endothelial dystrophy

Corneal sequestrum (C) Epithelial basement membrane dystrophy (indolent ulcer)

Infection

Bacterial (secondary invaders)

Bacillus spp.

Corynebacterium spp.

Escherichia coli

Pseudomonas spp.

Staphylococcus spp.

Streptococcus spp.

Fungal

Acremonium spp.

Alternaria spp.

Aspergillosis

Candidiasis

Cephalosporium spp.

Curvalia spp.

Pseudallescheria spp.

Scedosporium spp.

Protozoal

Viral

Feline herpes virus* (C)

Inflammation/immune-mediated

Feline eosinophilic keratitis Keratoconjunctivitis sicca*

Punctate keratopathy (D)

Mechanical/irritant trauma

Aberrant hairs*

Distichiasis*

Ectopic cilia*

Eyelid abnormalities*

- Ectropion
- Entropion

Heat

Irritant chemicals

Self-trauma* Shampoos Smoke* Trichiasis* Ultraviolet light*

Neurological conditions

Ionising radiation

Lack of blink reflex

- Lesions of facial nerve q.v.
- Lesions of trigeminal nerve q.v.

Lack of tear production

• Neurogenic keratoconjunctivitis sicca

2.6.4 Lens lesions

Cataract

Age-related*

Electrocution

Glaucoma q.v.

Lens luxation (see succeeding text)

Non-hereditary developmental

Post-inflammation

Radiation

Retinal degeneration

Drugs/toxins

Diazoxide

Dimethyl sulfoxide

Dinitrophenol

Hydroxymethylglutaryl-coenzyme A reductase inhibitors

Ketoconazole

Pefloxacin

Phenylpiperazine

Progesterone-based contraceptives

Sulfonylurea glimepiride

Topical dexamethasone

Hereditary, e.g.

Congenital with microphthalmos and rotatory nystagmus

Physical Signs 201

Early onset and progressive Posterior polar subcapsular cataract

Metabolic

Diabetes mellitus*

Hypocalcaemia (primary hypoparathyroidism)

Nutritional secondary hyperparathyroidism

Nutritional

Hand rearing on milk substitutes

Traumatic*

Blunt

Penetrating

Luxation/subluxation

Primary

Secondary

Chronic uveitis q.v.

Glaucoma q.v.

Lens shape/size abnormalities

Trauma

2.6.5 Retinal lesions

Retinal detachment

Congenital, e.g.

Collie eye anomaly

Persistent hyperplastic primary vitreous and retinal dysplasia

latrogenic

Complication of lens surgery

Space-occupying lesions

Extraocular

Intraocular

Systemic disease

Hypertension* q.v.

Severe systemic inflammatory disease

Uveodermatological syndrome

Trauma*

Swollen optic disc

Disc oedema

Glaucoma *q.v.*Post-operative hypotony Uveitis *q.v.*

Neoplasia

Metastatic Primary

Optic neuritis

Inflammatory

Granulomatous meningoencephalomyelitis

Infectious

- Blastomycosis
- Canine distemper virus* (D)
- Cryptococcosis
- Histoplasmosis
- Toxoplasmosis

Idiopathic

Local disease

- Orbital abscess*
- Orbital cellulitis*
- Neoplasia

Trauma*

Toxins

Papilloedema, e.g.

Acute glaucoma Hypertension *q.v.*

Neoplasia of optic nerve

Orbital space-occupying lesion

Raised intracranial pressure

- Brain tumours
- Intracranial haemorrhage

Pseudopapilloedema

Congenital defects

Physical Signs 203

Retinal haemorrhage*, e.g.

Coagulopathy
Hypertensive retinopathy
Hyperviscosity
Inflammatory/infectious chorioretinitis
Neoplastic chorioretinitis

2.6.6 Intraocular haemorrhage/hyphaema

Chronic glaucoma

Coagulopathy

Congenital disease

Collie eye anomaly Persistent hyaloid artery Persistent hyperplastic primary vitreous Vitreoretinal dysplasia

Hyperviscosity syndrome

Hyperglobulinaemia Polycythaemia *q.v.*

latrogenic

Post-surgery

Inflammation, e.g.

Uveitis

Neoplasia

Neovascularisation

Retinal Uveal

Retinal detachment q.v. Systemic hypertension* q.v.

Trauma*

2.6.7 Abnormal appearance of anterior chamber

Anterior synechia

Anterior uveitis q.v. Congenital lesions

Coloboma Iris cysts Persistent pupillary membranes

Hyphaema q.v. Hypopyon

Deep corneal ulceration Uveitis *q.v.*

Infiltration by neoplastic cells Lipaemic aqueous

Masses

Foreign body*
Iris cysts
Luxated lens
Organised fibrin post inflammation*
Uveal tumours

- Adenocarcinoma
- Adenoma
- Medulloepithelioma
- Melanoma
- Metastatic

2.7 Musculoskeletal signs

2.7.1 Muscular atrophy or hypertrophy

ATROPHY

Disuse atrophy*

Orthopaedic disease* q.v. Restricted exercise*

Physical Signs 205

Metabolic/endocrine/systemic disease

Cachexia*

- Cardiac disease*
- Neoplasia*

Glycogen storage diseases

Hyperadrenocorticism

Hyperthyroidism* (C)

Hypothyroid myopathy (D)

Lipid storage myopathy

Mitochondrial myopathy

Poor nutritional states

- Gastrointestinal disease *q.v.*
- Inadequate protein-calorie intake

Myopathies

Degenerative/inherited

Distal myopathy of Rottweilers (D)

Fibrotic myopathy

Labrador Retriever myopathy (D)

Merosin-deficient myopathy

Muscular dystrophy

Nemaline myopathy

Inflammatory/infectious

Bacterial

Dermatomyositis

Extra-ocular myositis

Leptospirosis

Masticatory myositis

Polymyositis

Protozoal

- Neosporosis (D)
- Toxoplasmosis

Tetanus

Neurogenic

Neoplasia, e.g.

Malignant nerve sheath tumour

Peripheral neuropathies q.v.

Spinal cord disease *q.v.*

HYPERTROPHY/MUSCULAR SWELLING

Athletic training*

Breed related*

Myositis ossificans

Myotonia (D)

Muscular dystrophy

Traumatic ischaemic neuromyopathy associated with bottom-hung pivot windows and garage doors (C)

2.7.2 Trismus ('lockjaw')

Drugs/toxins, e.g.

Cocaine

Inflammatory

Dermatomyositis

Granulomatous meningoencephalomyelitis

Infectious

- Neosporosis
- Tetanus
- Toxoplasmosis

Masticatory myositis

Trigeminal neuritis

Mechanical

Foreign body

Malicious, e.g. placement of rubber band

Neoplasia

- Mandibular
- Maxillary
- Oral
- Orbital
- Retrobulbar

Pain on opening jaw

Foreign body*

Mvositis

Retrobulbar cellulitis or abscess*

Temporomandibular joint arthritis*

Physical Signs 207

Tooth root abscess*
Trauma to buccal cavity or temporomandibular joint*

Temporomandibular joint ankylosis

Infection
Systemic arthropathies
Trauma*
Tumours

2.7.3 Weakness (see Section 1.1.8 for full listings)

Cardiovascular disease*
Endocrine disease*
Haematological disease*
Immune-mediated disease
Infectious disease*
Metabolic disease
Neuromuscular disease
Nutritional disorders
Physiological
Respiratory disease
Systemic disorders*
Drugs/toxins

2.8 Urogenital physical signs

2.8.1 Kidneys abnormal on palpation

Enlarged kidneys

Irregular surface
Feline infectious peritonitis (C)
Infarcts
Neoplasia*
Pericapsular abscess
Pericapsular haematoma
Polycystic kidney disease
Renal cyst

Smooth surface

Acute kidney injury q.v.

Amyloidosis

Compensatory hypertrophy

Hydronephrosis

Neoplasia*

Perinephric pseudocyst

Polycystic kidney disease

Pyelonephritis

Pyogranulomatous nephritis

Renal cyst

Normal-sized kidneys - irregular surface

Infarcts

Neoplasia*

Pericapsular haematoma

Polycystic kidney disease

Renal cyst

Subcapsular haematoma

Small kidneys

Irregular surface

Chronic generalised glomerulo- or tubulo-interstitial disease* q.v.

Hypoplastic kidneys

Multiple infarcts

Smooth surface

Hypoplasia

Absent kidneys

Aplasia

Nephrectomy

2.8.2 Bladder abnormalities

Palpable mass

Neoplasia*
Urolith*

Physical Signs 209

Large bladder, difficult to express

Functional obstruction

Drugs/toxins, e.g.

- Atropine
- Glycopyrronium bromide
- Propantheline bromide
- Tricyclic antidepressants

Neurological disease

- Upper motor neurone bladder*
 - Spinal disorders cranial to L7 q.v.

Psychogenic*

- Pain
- Stress

Reflex dyssynergia

Mechanical obstruction

Matrix-crystalline plugs*

Neoplasia*

- Bladder
- Urethra

Prostatomegaly*
Urethral stricture

Uroliths*

- Bladder neck
- Urethra

Large bladder, easy to express

Normal

Neurological disease, e.g.

Dysautonomia

Lower motor neurone bladder*

- Cauda equina syndrome
- Lesion of sacral spinal cord
- Lesions of pelvic/lumbosacral plexus

Small/difficult to palpate bladder

Congenital hypoplasia Ectopic ureters Non-distensible bladder

- Diffuse bladder-wall neoplasia
- Severe cystitis, e.g.
 - Calculi
 - Infection
 - Trauma

Oliguric/anuric kidney injury q.v.

Recent voiding*

Ruptured bladder

Ruptured ureters

2.8.3 Prostate abnormal on palpation

Enlargement

Diffuse

Bacterial prostatitis Benign prostatic hyperplasia* Neoplasia

Focal lesions

Abscess

Cysts

- Paraprostatic
- Prostatic

Neoplasia

2.8.4 Uterus abnormal on palpation

Enlargement on palpation

Haemometra

Hydrometra

Mucometra

Neoplasia*

- Adenocarcinoma
- Adenoma
- Leiomyoma
- Leiomyosarcoma

Post partum*

Pregnancy*

Pyometra*

Physical Signs 211

2.8.5 Testicular abnormalities

Single palpable testis

Castration of single descended testis with subsequent descent of unilateral cryptorchid testis Unilateral cryptorchid* Unilateral testicular agenesis

No palpable testis

Bilateral cryptorchid* Bilateral testicular agenesis Intersex abnormalities Previous castration*

Large testis

Acute infection Inguinoscrotal hernia Neoplasia Sperm granuloma Testicular torsion

Small testis

Chronic inflammation
Cryptorchidism
Degeneration
Hypoplasia
Intersex
Sertoli cell tumour in contralateral testis

2.8.6 Penis abnormalities

Paraphimosis

Chronic balanoposthitis
Foreign bodies in prepuce
Fracture of the os penis
Idiopathic
Obstruction of the preputial opening by long hair*

Small preputial opening

- Congenital
- · Post-surgical
- Traumatic

Soft tissue trauma* Spinal lesions

Penile bleeding

Haematuria* q.v.
Herpes virus
Transmissible venereal tumour
Other tumours (benign polypoid to variety malignant)
Trauma

Prostatic disease, e.g. Benign hyperplasia

*Urethral disease, e.g.*Urethral prolapse

PART 3

RADIOGRAPHIC AND ULTRASONOGRAPHIC SIGNS

3.1 Thoracic radiography

3.1.1 Artefactual causes of increased lung opacity

Chemical stains/dirty cassettes Dirty or wet fur

Forelimbs not pulled sufficiently forwards

Movement blur

Obesity

Poorly inflated lungs

- Abdominal distension
- Expiratory film
- Upper airway obstruction

Underdevelopment

Underexposure

3.1.2 Increased bronchial pattern

Normal variation*

Chondrodystrophic breeds Older dogs

Bronchial wall oedema, e.g.

Congestive heart failure*

Bronchiectasis

Chronic bronchitis*

Primary ciliary dyskinesia (D)

Endocrine

Hyperadrenocorticism

Infection

Bacterial*

Fungal, e.g.

• Pneumocystis carinii

Parasitic, e.g.

• Crenosoma vulpis (D)

Protozoal, e.g.

Toxoplasmosis

Viral

Inflammation, e.g.

Eosinophilic bronchopneumopathy (pulmonary infiltrate with eosinophilia) (D)

Feline asthma (C)

Idiopathic

Neoplasia

Bronchogenic carcinoma

Lymphoma

3.1.3 Increased alveolar pattern

Atelectasis

Airway obstruction

Chronic pleural or pulmonary disease*

Collapse of the lung lobes under general anaesthesia*

Extra-pulmonary thoracic mass

Feline asthma* (C)

Lack of surfactant (newborn, acute respiratory

distress syndrome)

Lung lobe torsion Pleural effusion* q.v. Pneumothorax* q.v. Recumbency

Inflammation/immune mediated

Eosinophilic bronchopneumopathy (pulmonary infiltrate with eosinophilia)

Neoplasia

Malignant histiocytosis Primary lung tumour, e.g.

Bronchoalveolar carcinoma
 Pulmonary lymphomatoid granulomatosis

Pneumonia

Aspiration pneumonia

Aspirated foreign body*
Aspirated secretions

Cleft palate

Gastrobronchial fistula

Generalised weakness

Iatrogenic, e.g.

- Anaesthetic complication
- Force feeding
- Incorrectly placed stomach tube

Oesophagotracheal/bronchial fistula

Regurgitation, e.g.

Megaoesophagus

Swallowing disorders

Vomiting

Bronchopneumonia, e.g.

Canine distemper virus with secondary

bacterial infection* (D)

Tracheobronchitis*

Bacterial, e.g.

Tuberculosis

Tularaemia

Fungal, e.g.

Pneumocystis carinii

Parasitic, e.g.

Aelurostrongylus abstrusus (C)

Angiostrongylus vasorum (D)

Dirofilaria immitis

Oslerus osleri (D)

Miscellaneous

Kartagener's syndrome Primary ciliary dyskinesia

Radiation therapy

Pulmonary haemorrhage

Coagulopathy q.v.

Exercise induced

Idiopathic

Neoplasia*

Trauma*

Pulmonary oedema

Acute dyspnoea in Swedish hunting dogs

Acute pancreatitis*

Airway obstruction

Brain trauma

Congestive heart failure*

Electrocution

Hypoalbuminaemia

Hypostatic congestion*

Iatrogenic

- Aspirated hypertonic contrast media
- IV contrast media
- Over-hydration

Inhalation of irritant gases/smoke

Lung lobe torsion

Near drowning

Obstruction of pulmonary drainage

mechanisms, e.g.

Hilar mass

Post-ictal

Re-expansion, e.g.

• Post pneumothorax

Seizures

Other CNS disease

Uraemia q.v.

Acute respiratory distress syndrome

Iatrogenic, e.g.

- Over-hydration
- Oxygen therapy

Infection

Inhalation pneumonia

Pancreatitis

Trauma

Toxins

Alpha-napthylthiourea Endotoxin

Ethylene glycol

Paracetamol

Snake venom

Pulmonary thromboembolism

3.1.4 Increased interstitial pattern

Nodular

Artefact

End-on view of blood vessels

Nipples

Objects adhering to coat

Ossification of costochondral junctions

Thoracic wall nodules

Infection

Abscesses

Feline infectious peritonitis* (C)

Granulomata

- Bacterial
- Foreign body*
- Fungal

Hydatid cysts

Parasitic

- Aelurostrongylus abstrusus (C)
- Crenosoma vulpis (D)
- Oslerus osleri (D)
- Paragonimus kellicotti (D)
- Tularaemia
- Visceral larva migrans

Pneumonia

- Fungal pneumonia
- Haematogenous bacterial pneumonia
- Mycobacterial pneumonia

Protozoal, e.g.

Toxoplasmosis

Neoplasia

Lymphoma*

Metastatic tumours*

Primary lung tumours

Miscellaneous

Calcified pleural plaques*
Disseminated intravascular coagulation
Haematomata
Idiopathic mineralisation
Pulmonary osteomata
(heterotopic bone)*

Diffuse/unstructured

Artefact, e.g. Expiratory film Neoplasia Oedema (early) *q.v.*

Drugs/toxins

Chronic glucocorticoid administration Paraquat

Endocrine

Hyperadrenocorticism

Infection

Bacterial

Fungal, e.g.

- Blastomycosis
- Coccidioidomycosis
- Cryptococcosis
- Histoplasmosis
- Pneumocystis carinii (D)

Mycoplasmosis

Parasitic

- Aelurostrongylus abstrusus (C)
- Angiostrongylus vasorum (D)
- Babesiosis
- Dirofilariasis

Protozoal, e.g.

Rickettsial, e.g.

• Rocky Mountain spotted fever (D)

Toxoplasmosis

Viral, e.g.

- Canine distemper virus* (D)
- Feline infectious peritonitis* (C)

Inhalation

Dust

Irritant gases

Miscellaneous

Acute respiratory distress syndrome

Pancreatitis

Pulmonary thromboembolism

Radiation therapy

Uraemia* q.v.

Very old animals

Very young animals

Pulmonary fibrosis

Idiopathic

Secondary to chronic respiratory disease

Pulmonary haemorrhage

Coagulopathy q.v. Exercise induced Idiopathic Neoplasia Trauma

Reticular pattern

Normal ageing* Chronic fibrosis Fungal pneumonia Lymphoma* Metastatic neoplasia*

3.1.5 Increased vascular pattern

Increased size of pulmonary arteries

Aelurostrongylus abstrusus (C) Angiostrongylus vasorum (D) Dirofilariasis

Large left-to-right shunts, e.g.

- Atrial septal defect
- · Endocardial cushion defects
- Patent ductus arteriosus
- Ventricular septal defect

Pulmonary hypertension Pulmonary thromboembolism

Increased size of pulmonary veins

Left-sided heart failure* Left-to-right shunts, in some cases

Increased size of pulmonary arteries and veins

Left-to-right shunts, e.g.

- Atrial septal defect
 - Endocardial cushion defects
 - Patent ductus arteriosus
 - Ventricular septal defect

3.1.6 Decreased vascular pattern

Generalised

Pericardial disease, e.g.

Pericardial effusion* q.v.

Restrictive pericarditis

Pulmonary hypoperfusion

Hypoadrenocorticism (D)

Localised hypoperfusion due to pulmonary thromboembolism

Pulmonic stenosis

Severe dehydration*

Shock*

Tetralogy of Fallot

Pulmonary overinflation

Air trapping

- Chronic bronchitis* (D)
- Feline asthma* (C)
- Upper respiratory tract obstruction, e.g.
 - Foreign body*
 - Nasopharyngeal polyp* (C)

Compensatory

- Following lobectomy
- · Secondary to atelectasis of another lobe
- Secondary to congenital lobar atresia/agenesis

Emphysema

Iatrogenic

Anaesthesia

Right-to-left cardiac shunts, e.g.

Atrial septal defect

Reverse-shunting patent ductus arteriosus

Tetralogy of Fallot

Ventricular septal defect

Localised

Emphysema

Pulmonary thromboembolism

3.1.7 Cardiac diseases that may be associated with a normal cardiac silhouette

Bacterial endocarditis

Congestive heart failure overzealously treated with diuretics

Constrictive pericarditis

Functional murmurs*

Hypertrophic cardiomyopathy* (C)

Neoplasia

Small atrial septal defect

Small ventricular septal defect

3.1.8 Increased size of cardiac silhouette

Generalised cardiomegaly

Normal variation, e.g.

Greyhound*

Artefact

Bacterial endocarditis

Bradycardia* q.v.

Chronic anaemia* q.v.

Concurrent mitral and tricuspid valve deficiency

Dysplasia

Intrapericardial fat

Mediastinal fat

Myxomatous degeneration* (D)

Congenital cardiac disease, e.g.

• Peritoneopericardial diaphragmatic hernia

Enlargement of specific chamber sizes q.v.

Pericardial effusion* q.v.

Myocardial disease

Inflammatory

- · Immune mediated, e.g. rheumatoid arthritis
- Infectious, e.g.
 - Bacterial
 - Fungal
 - Parvovirus
 - Protozoal

Ischaemic

Arteriosclerosis

Noninflammatory

- Dilated cardiomyopathy*
- Hypertrophic cardiomyopathy (C)*
- Restrictive cardiomyopathy (C)

Secondary

- Acromegaly
- Amyloidosis
- End-stage mitral valve insufficiency* (D)
- Glycogen storage disease
- Hypertension* q.v.
- Hyperthyroidism* (C)
- Mucopolysaccharidosis
- Neoplasia
- Neuromuscular disease
- Nutrition
 - I-Carnitine deficiency
 - Taurine deficiency
- Trauma
- Drugs/toxins
 - Doxorubicin
 - Heavy metals

Volume overload

Iatrogenic

Left-sided heart failure

- Bacterial endocarditis
- Dilated cardiomyopathy*
- Mitral valve dysplasia
- Myxomatous degeneration of the mitral valve* (D)

3.1.9 Decreased size of cardiac silhouette

Atrophic myopathies Constrictive pericarditis Hypoadrenocorticism (D) Post thoracotomy

Artefact

Deep-chested dogs

Deep inspiration

Heart displaced from sternum, e.g.

- Mediastinal shift
- Pneumothorax

Pulmonary overinflation, e.g.

- Emphysema
- Hyperventilation

Decrease in muscle mass

Chronic systemic disease

Malnutrition

Myopathies

Shock* q.v., e.g.

Hypovolaemia, e.g.

- Blood loss
- Severe dehydration

3.1.10 Abnormalities of the ribs

Congenital disorders

Absence of the xiphisternum Agenesis/hypoplasia of the 13th rib* Pectus excavatum Supernumerary ribs

New bone

Cartilaginous exostoses
Healed fractures
Mineralisation of the costal cartilages*
Neoplasia
Non-union fractures
Periosteal reaction to soft tissue mass

Osteolysis

Metastatic tumours Osteomyelitis Primary tumours

- Chondrosarcoma
- Fibrosarcoma
- Haemangiosarcoma
- Multiple myeloma
- Osteoma
- Osteosarcoma

Thoracic wall trauma*

3.1.11 Abnormalities of the oesophagus

OESOPHAGEAL DILATATION

Generalised

Acquired megaoesophagus

Idiopathic

Immune-mediated neuromuscular disease

- · Myasthenia gravis
- Polymyositis
- Polyradiculoneuritis
- Systemic lupus erythematosus

Metabolic/endocrine

- Hypoadrenocorticism (D)
- Hypothyroidism* (D)

Miscellaneous

- Dysautonomia
- Gastric dilatation/volvulus*
- Hypertrophic muscular dystrophy
- Oesophageal foreign body
- Reflux oesophagitis
- Thiamine deficiency

Toxic

- Botulinum toxin
- Chlorinated hydrocarbons
- Heavy metals
- Herbicides
- Organophosphates
- Snake venom
- Tetanus

Congenital megaoesophagus

Canine giant axonal neuropathy (D)

Glycogen storage disease

Hereditary megaoesophagus

Hereditary myopathy

Vascular ring anomaly, e.g.

- Double aortic arch
- Normal aorta with aberrant right subclavian artery
- · Persistent right aortic arch
- · Persistent right ductus arteriosus
- Right aortic arch with aberrant right subclavian artery

Transient megaoesophagus

Hiatal hernia

Respiratory infection

Sedation/anaesthesia*

Localised

Redundant oesophagus

Acquired

Dilatation cranial to a gastro-oesophageal intussusception Dilatation cranial to acquired stricture, e.g.

- Extraluminal compression
- Granuloma
- Mucosal adhesion
- Neoplasia
- Post general anaesthesia

Dilatation cranial to an oesophageal foreign body*

Oesophagitis

Scar tissue post trauma

Congenital

Dilatation cranial to a congenital stenosis

Dilatation cranial to oesophageal hiatal hernia

Segmental oesophageal hypomotility

Vascular ring anomaly, e.g.

- Double aortic arch
- · Normal aorta with aberrant right subclavian artery

- · Persistent right aortic arch
- Persistent right ductus arteriosus
- Right aortic arch with aberrant right subclavian artery
- · Oesophageal diverticulum

Transient

Aerophagia* Dyspnoea* Swallowing*

INCREASED OESOPHAGEAL OPACITY

Bony density

Foreign body*
Megaoesophagus with collection of food
Osteosarcoma, e.g.
• Secondary to Spirocerca lupi (D)

, , ,

Soft tissue density

Megaoesophagus with collection of food/water Normal variation, e.g.

- Fluid in the oesophagus*
- Superimposition of the trachea*

Soft tissue mass

Intraluminal

- · Food-containing oesophageal diverticulum
- Foreign body*
- Gastro-oesophageal intussusception
- Oesophageal hiatal hernia

Intramural

- Abscess
- Foreign body
- Granuloma, e.g.
 - Spirocerca lupi (D)
- Neoplasia
 - Metastatic
 - Primary oesophageal, e.g. Leiomyoma/sarcoma

Squamous cell carcinoma

• Secondary to Spirocerca lupi (D)

Extraluminal

- Abscess
- Neoplasia
- · Paraoesophageal hiatal hernia

3.1.12 Abnormalities of the trachea

Dorsal displacement

Artefact

- Expiration
- Rotation
- Ventroflexion

Breed variation*

Cardiomegaly*

Cranioventral mediastinal mass

Heart base tumour

Tracheobronchial lymphadenopathy*

Ventral displacement

Craniodorsal mediastinal mass Megaoesophagus Oesophageal foreign body* Post-stenotic aortic dilatation Vertebral spondylosis

Lateral displacement

Artefact

- Expiration
- Rotation
- Ventroflexion

Breed variation*

Cranial mediastinal mass

Heart base tumour

Mediastinal shift *q.v.*

Megaoesophagus

Vascular ring anomaly

Narrowing

Congenital hypoplasia

Artefact

Hyperextension of the neck Superimposition of the muscle/oesophagus

External compression

Cranial mediastinal mass Megaoesophagus Oesophageal foreign body* Vascular ring anomaly

Mucosal thickening

Feline infectious peritonitis* (C)

Inflammation, e.g.

- Allergy*
- Infection*
- Irritant gases

Submucosal haemorrhage, e.g.

Coagulopathy

Stricture/stenosis

Congenital

Excessive pressure from the cuff of endotracheal tube Focal intramural mass Post-traumatic injury

Tracheal collapse*

Acquired, e.g.

 Secondary to chronic bronchitis Congenital

Opacification of the lumen

Abscess

Aspiration of positive contrast agents Foreign body* Granuloma Oslerus osleri Polyp

Neoplasia

Adenocarcinoma

Chondrosarcoma

Leiomyoma

Lymphoma

Mast cell tumour

Osteochondroma

Osteosarcoma

3.1.13 Pleural effusion

Bile pleuritis

Ruptured biliary tree with diaphragmatic hernia

Blood

Autoimmune disorders, e.g.

• Immune-mediated thrombocytopenia

Angiostrongylus vasorum infection

Coagulopathy

Neoplasia, e.g.

• Haemangiosarcoma

Trauma

Chyle

Congenital duct malformation (D)

Constrictive pleuritis

Cranial mediastinal mass

Diaphragmatic rupture*

Feline dirofilariasis (C)

Idiopathic*

Lung lobe torsion

Neoplasia

Peritoneopericardial diaphragmatic hernia

Post pacemaker implantation (C)

Rupture of the thoracic duct

Heart disease*

Dilated cardiomyopathy (C)

Hypertrophic cardiomyopathy (C)*

Pericardial disease Right-sided heart failure (C)

Obstruction of the thoracic duct

Intraluminal

- Granuloma
- Neoplasia

Extraluminal

Increased intrathoracic pressure

Exudate

Actinomycosis

Autoimmune disorders, e.g.

- Rheumatoid arthritis
- Systemic lupus erythematosus

Feline infectious peritonitis* (C)

Fungal infection

Neoplasia*

Nocardiosis

Pneumonia*

Pyothorax*

 Extension from pulmonary parenchymal lesion

Foreign body

- · Haematogenous spread
- Penetrating thoracic wound
- Penetration of the trachea/oesophagus

Tuberculosis

Transudate/modified transudate

Congestive heart failure*

Diaphragmatic rupture*

Foreign body

Hyperthyroidism* (C)

Hypoproteinaemia q.v.*

- Liver disease*
- Protein-losing enteropathy*
- Protein-losing nephropathy*

Idiopathic

Lung lobe torsion

Neoplasia, e.g.

Lymphoma*

Pancreatitis

Pneumonia*

Thromboembolism

3.1.14 Pneumothorax

Artefact

Overdevelopment Overexposure* Overinflation of the lungs Skin folds* Undercirculation

latrogenic

Cardiopulmonary resuscitation Leaking chest drain Lung aspiration/biopsy Thoracocentesis Thoracotomy

Spontaneous

Bacterial pneumonia

Parasites

- Dirofilariasis
- Oslerus osleri
- Paragonimus

Pleural adhesions

Rupture of congenital or acquired bullae, cysts or blebs

Tumours*

Trauma

Perforation of the lung* Perforation of the oesophagus Perforation of the thoracic wall* Perforation of the trachea/bronchi*

3.1.15 Abnormalities of the diaphragm

Cranial displacement

Diaphragmatic rupture/hernia*

Abdominal causes

Abdominal neoplasia*

Ascites*

Gastric dilatation*

Obesity*

Organomegaly*, e.g.

- Liver
- Spleen

Pneumoperitoneum

Pregnancy*

Pyometra*

Thoracic causes

Atelectasis

Diaphragmatic paralysis

Diaphragmatic tumour

Expiratory film*

Lung lobectomy

Pleural adhesions

Pulmonary fibrosis

Caudal displacement

Abdominal causes

Abdominal body wall rupture/hernia leading to abdominal organ displacement

Poor body condition

Thoracic causes

Chronic dyspnoea*

Deep inspiration*

Intrathoracic mass*

Pleural effusion*

Pneumothorax*

Irregular diaphragmatic contour

Diaphragmatic rupture/hernia* Hypertrophic muscular dystrophy Pleural masses, e.g.

- Granuloma
- Neoplasia

Severe lung hyperinflation

Lack of visualisation of diaphragmatic border

Artefact, e.g.

Expiratory film

Diaphragmatic hernia*

Increased lung density, e.g.

Alveolar pattern*

Neoplasia adjacent to diaphragm*

Peritoneopericardial diaphragmatic hernia

Pleural effusion*

3.1.16 Mediastinal abnormalities

Mediastinal masses

Aortic aneurysm

Cyst

Granuloma

- Actinomycosis
- Nocardiosis

Haematoma

Hiatal hernia

Oesophageal dilatation

Oesophageal foreign body*

Oesophageal granuloma

• Spirocerca lupi (D)

Thymus

Artefact

Left or right atrial enlargement Lung lobe tip

Pleural fluid

Post-stenotic dilatation of the aorta or pulmonary artery

Lymphadenopathy

Bacterial

- Actinomycosis
- Nocardiosis
- Tuberculosis

Eosinophilic pulmonary granulomatosis

Fungal

- Blastomycosis
- Coccidioidomycosis
- Cryptococcosis
- Histoplasmosis

Neoplasia

- Lymphoma*
- Malignant histiocytosis
- Metastatic neoplasia*

Neoplasia

Ectopic parathyroid tumour

Ectopic thyroid tumour

Fibrosarcoma

Heart base tumours

Lipoma*

Lymphoma*

Malignant histiocytosis

Rib tumour

Thymoma

Mediastinal shift

Away from affected hemithorax

Diaphragmatic rupture/hernia*

Lobar emphysema

Lung mass*

Oblique view

Pleural mass*

Unilateral pleural effusion*

Unilateral pneumothorax*

Towards affected hemithorax

Atelectasis

- Feline asthma* (C)
- Foreign body*
- Mass*
- Radiation

Hypostatic congestion*, e.g.

- General anaesthesia
- Illness resulting in prolonged lateral recumbency

Lobar agenesis/hypoplasia

Lobectomy

Lung lobe torsion

Oblique view

Radiation-induced fibrosis

Unilateral phrenic nerve paralysis

Pneumomediastinum

Emphysematous mediastinitis Iatrogenic Secondary to severe dyspnoea*

Air from neck

Gas-forming bacteria

Trauma*, e.g.

- Jugular venepuncture
- Oesophagus
- Pharynx
- Soft tissue
- Trachea

Air from bronchi/lungs, e.g.

Lung lobe torsion

Spontaneous

Trauma*

Widened mediastinum

Normal variation*

Bulldogs

Abscess

Foreign body

Masses (see succeeding text) Megaoesophagus *q.v.* Obesity*

Mediastinal effusions, e.g.

Chylomediastinum

Haemorrhage

- Coagulopathy
- Neoplasia
- Trauma*

Mediastinitis/mediastinal abscess

Feline infectious peritonitis (C) Lymphadenitis Oesophageal/tracheal perforation Penetrating neck wound* Pleuritis* Pneumonia*

Oedema*

Congestive heart failure* Hypoproteinaemia* *q.v.* Neoplasia* Trauma*

3.2 Abdominal radiography

3.2.1 Liver

Focal enlargement

Infection/inflammation Abscess Granuloma

Miscellaneous

Biliary pseudocyst Cyst Haematoma Hepatic arteriovenous fistula Hyperplastic/regenerative nodule* Liver lobe torsion

Neoplasia*

Biliary cystadenoma
Haemangiosarcoma
Hepatocellular carcinoma*
Hepatoma
Lymphoma*
Malignant histiocytosis
Metastatic*

Generalised enlargement

Endocrine disease

Acromegaly Diabetes mellitus* Hyperadrenocorticism

Infection/inflammation

Abscess
Feline infectious peritonitis* (C)
Fungal infection
Granuloma
Hepatitis*
Lymphocytic cholangitis*

Neoplasia, e.g.

Haemangiosarcoma Lymphoma* Malignant histiocytosis Mast cell infiltration (mastocytosis/mast cell tumour) Metastatic tumours*

Venous congestion

Caudal vena cava occlusion (post caval syndrome)

- Adhesions
- · Cardiac neoplasia
- Congenital cardiac disease

- Diaphragmatic rupture/hernia*
- Dirofilariasis
- · Pericardial disease
- Thoracic mass
- Thrombosis
- Trauma*

Right-sided congestive heart failure, e.g.

- Dilated cardiomyopathy*
- Pericardial disease, e.g. pericardial effusion *q.v.*
- Tricuspid regurgitation

Miscellaneous

Amyloidosis

Cholestasis q.v.*

Cirrhosis (early)*

Hepatic lipidosis (C)

Nodular hyperplasia* Storage diseases

Drugs

Glucocorticoids

Reduced liver size

Breed variation (e.g. apparent microhepatica

in deep-chested dogs)

Cirrhosis

Diaphragmatic rupture/hernia*

Hypoadrenocorticism (D)

Idiopathic hepatic fibrosis

Portosystemic shunt

- Acquired
- Congenital

3.2.2 Spleen

Enlargement

Normal, e.g.

Breed related*

Congestion

Gastric dilatation/volvulus*

Portal hypertension

Right-sided congestive heart failure

Sedation and general anaesthesia*

Splenic thrombosis

Splenic torsion

Haematoma*

Idiopathic

Secondary to neoplasia

Trauma

Hyperplasia*

Chronic anaemia q.v.

Chronic infection

Lymphoid

Inflammation/immune mediated

Hypereosinophilic syndrome

Immune-mediated haemolytic anaemia

Systemic lupus erythematosus

Infection

Abscess

Babesiosis

Bacteraemia

Ehrlichiosis

Feline infectious peritonitis* (C)

Fungal infections

Infectious canine hepatitis (D)

Leishmaniasis

Mycobacteria

Mycoplasma

Toxoplasmosis

Salmonellosis

Septicaemia*

Neoplasia

Fibrosarcoma

Haemangioma

Haemangiosarcoma* Leiomyosarcoma Leukaemia Lymphoma* Malignant histiocytosis Multiple myeloma Systemic mastocytosis

Miscellaneous

Amyloidosis Extramedullary haematopoiesis* Infarction Splenic myeloid metaplasia

Trauma

Foreign body Penetrating wound

Reduction in size

Dehydration* Shock* *q.v.*

Absence

Artefact Displacement through hernia/rupture Splenectomy

3.2.3 Stomach

Abnormal contents

Gas

Aerophagia*
Gastric dilatation/volvulus*

Mineral opacity Foreign body* Gravel sign (outflow obstruction)*

Iatrogenic

- Barium
- Bismuth
- Kaolin

Soft tissue opacity

Blood clot

Food/ingested liquid*

Foreign body*

Intussusception

Neoplasia

Polyp

Caudal displacement

Enlargement of the thoracic cavity, e.g.

- Overinflation of the lungs
- Pleural effusion* q.v.

Hepatomegaly* q.v.

Cranial displacement

Diaphragmatic hernia/rupture*

Hiatal hernia

Late pregnancy*

Microhepatica

Neoplasia/mass, e.g.

- Colonic
- Mesenteric
- Pancreatic

Peritoneopericardial diaphragmatic hernia

Delayed gastric emptying

Gastritis*

General anaesthesia/sedation*

Functional disorders

Adynamic ileus*

Dysautonomia

Pancreatitis*

Primary dysmotilities

Uraemia* q.v.

Pyloric outflow obstruction

Chronic hyperplastic gastropathy

Fibrosis/scar tissue

Foreign body*

Granuloma

Neoplasia

- Biliary
- Duodenal
- Gastric
- Pancreatic

Pyloric hypertrophy

- Mucosal
- Muscular

Ulceration

Pylorospasm

Anxiety

Stress

Ulceration

Duodenal

Gastric

Distended

Acute gastritis*

Gastric dilatation volvulus*

Pancreatitis*

Aerophagia*

Bolting food

Dyspnoea

Pain

latrogenic

Anticholinergic drugs

Endoscopic inflation

Misplaced endotracheal tube

Stomach tube

Outflow obstruction

Fibrosis/scarring

Foreign body*

Granuloma

Muscular or mucosal hypertrophy

Neoplasia

Pylorospasm

Ulceration

Increased wall thickness (contrast radiography)

Diffuse

Inflammation

- · Chronic gastritis*
- Eosinophilic gastritis*

Neoplasia

- Lymphoma
- Pancreatic tumour

Chronic hyperplastic gastropathy

Focal

Artefact

• Empty stomach

Hypertrophy

- Mucosal
- Muscular

Inflammation

- Eosinophilic
- Fungal infection
- Granulomatous

Neoplasia

- Adenocarcinoma
- Leiomyoma
- · Leiomyosarcoma
- Lymphoma

3.2.4 Intestines

SMALL INTESTINE

Bunching

Adhesions* Linear foreign body*

Obesity*

Displacement

Caudal displacement

Distended stomach*

Empty urinary bladder*

Hepatomegaly* q.v.

Hernias*

- Inguinal*
- Perineal*

Cranial displacement

Empty stomach*

Enlarged urinary bladder* q.v.

Enlarged uterus*

- Pregnancy*
- Pyometra*

Microhepatica

Diaphragmatic disorders

Peritoneopericardial diaphragmatic hernia Rupture/hernia*

Lateral displacement

Hepatomegaly* q.v.

Prolonged lateral recumbency*

Renomegaly* q.v.

Splenomegaly* q.v.

Increased width of small intestinal loops

Artefact

Mistaking colon for small intestine

Functional obstruction

Dysautonomia

Electrolyte imbalances* q.v.

Pancreatitis*

Peritonitis*

Recent abdominal surgery*

Secondary to chronic mechanical obstruction*

Severe gastroenteritis*

Mechanical obstruction

Abscess

Adhesions*

Caecal impaction

Constipation*

Foreign body*

Granuloma

Intestinal volvulus

Intussusception

Neoplasia, e.g.

- Adenocarcinoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma

Polyps

Strangulation in hernia/mesenteric tear

Stricture

Variation in small intestinal contents

Bony/mineral density

Food*

Foreign body*

Iatrogenic

- · Contrast media
- Medications

Fluid/soft tissue density

Normal*

Diffuse infiltrative neoplasia

Functional obstruction

- Dysautonomia
- Electrolyte imbalances* q.v.
- Pancreatitis*
- Peritonitis*
- · Recent abdominal surgery*
- Secondary to chronic mechanical obstruction*
- Severe gastroenteritis*

Mechanical obstruction

- Abscess
- Adhesions*

- Caecal impaction
- Constipation*
- Foreign body*
- Granuloma
- Intestinal volvulus
- Intussusception
- Neoplasia, e.g.
 - Adenocarcinoma
 - Leiomyoma
 - Leiomyosarcoma
 - Lymphoma
- Polyps
- Strangulation in hernia/mesenteric tear

Mistaking colon or enlarged uterus for small intestine

Gas density

Normal*

Adhesions*

Aerophagia*

Enteritis*

Functional obstruction

- Dysautonomia
- Electrolyte imbalances* q.v.
- Pancreatitis*
- Peritonitis*
- Recent abdominal surgery*
- Secondary to chronic mechanical obstruction*
- Severe gastroenteritis*

Mechanical obstruction

- Abscess
- Adhesions
- Caecal impaction
- Constipation*
- Foreign body*
- Granuloma
- Intestinal volvulus
- Intussusception
- Neoplasia, e.g.
 - Adenocarcinoma
 - Leiomyoma

- Leiomyosarcoma
- Lymphoma
- Polyps
- Strangulation in hernia/mesenteric tear

Partial obstruction*

Prolonged recumbency*

Delayed intestinal transit time

Diffuse neoplasia

Enteritis*

Inflammatory bowel disease*

Sedation/general anaesthesia*

Functional obstruction

Dysautonomia

Electrolyte imbalances* q.v.

Pancreatitis*

Peritonitis*

Recent abdominal surgery*

Secondary to chronic mechanical obstruction*

Severe gastroenteritis*

Mechanical obstruction (partial)

Abscess

Adhesions*

Caecal impaction

Constipation*

Foreign body*

Granuloma

Intussusception

Neoplasia, e.g.

- Adenocarcinoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma

Polyps

Strangulation in hernia/mesenteric tear

Luminal filling defects on contrast radiography

Foreign body*

Intussusception

Neoplasia Parasitism* Polyp Ulcer

Increased wall thickness (contrast radiography)

Inflammatory bowel disease* Fungal infections Lymphangiectasia Neoplasia, e.g.

- Adenocarcinoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma

LARGE INTESTINE

Dilatation

Constipation/obstipation* q.v.

Displacement

Ascending colon
Adrenal mass
Duodenal dilatation*
Hepatomegaly* q.v.
Lymphadenopathy* q.v.
Pancreatic mass
Renomegaly q.v.

Transverse colon

Diaphragmatic rupture/hernia*
Dilatation of the stomach*
Enlarged bladder* q.v.
Enlarged uterus*
Hepatomegaly* q.v.
Lymphadenopathy* q.v.
Microhepatica q.v.
Mid-abdominal mass*
Pancreatic mass

Descending colon

Adrenal mass

Enlarged bladder* q.v.

Enlarged uterus* q.v.

Hepatomegaly* q.v.

Lymphadenopathy* q.v.

Prostatomegaly*

Renomegaly* q.v.

Retroperitoneal fluid

Splenomegaly* q.v.

Rectum

Paraprostatic cyst

Perineal hernia*

Prostatomegaly*

Sacral or vertebral mass

Urethral mass

Vaginal mass

Other pelvic/intrapelvic mass

Variation in contents

Empty

Normal

Caecal inversion

Enema

Gastric/small intestinal obstruction* q.v.

Large intestinal diarrhoea* q.v.

Intussusception

Neoplasia

Typhlitis

Soft tissue/mineral density

Caecal impaction

Constipation/obstipation* q.v.

Undigested dietary material*

Increased wall thickness (contrast radiography)

Colitis*

Fibrosis from previous trauma/surgery

Neoplasia

Luminal filling defects on contrast radiography

Caecal inversion

Faeces*

Foreign body*

Intussusception

Masses

- Neoplasia
- Polyps

3.2.5 Ureters

Dilated

Ascending infection

Ectopic ureter

- Congenital
- Ureteral obstruction, e.g. ligation

External compression, e.g.

Abdominal mass*

Hydroureter

- Iatrogenic
- Neoplasia
- Stricture following ureterolith or other trauma
- Ureterolith

Ureteral diverticula

Ureterocoele

3.2.6 Bladder

Abnormal bladder contents (contrast cystography)

Filling defects

Artefact

Air bubbles*

Blood clots*

Calculi*

Neoplasia

Polyps

Severe cystitis*

Increased opacity

Blood clots*

Neoplasia

Polyps

Uroliths*

Abnormal shape

Diverticula

Herniation

Neoplasia

Patent urachus

Positioning errors

Rupture

Displacement

Abdominal hernia/rupture*

Constipation/obstipation* q.v.

Enlarged uterus* q.v.

Lymphadenopathy* q.v.

Obesity*

Perineal hernia*

Prepubic tendon rupture

Prostatomegaly*

Short urethra

Traumatic urethral injury

Failure of the bladder to distend (contrast radiography)

Congenital defects, e.g.

Ectopic ureters

Hypoplasia

Cystitis*

Neoplasia

Rupture

Enlarged bladder

Normal*

Functional obstruction

Neurological

- Cauda equina syndrome
- Dysautonomia

- Upper motor neurone spinal cord lesion q.v., e.g.
 - Intervertebral disc disease* (D)
 - Trauma
 - Tumour

Psychogenic*

- Lack of outside/litter access
- Pain
- Stress

Mechanical obstruction

Crystalline-matrix plugs*

Neoplasia

- Bladder
- Urethra

Prostatomegaly*

Urethral stricture

Uroliths*

- Bladder neck
- Urethra

Small bladder

Anuria

Congenital hypoplasia

Ectopic ureters

Feline lower urinary tract disease

Non-distensible bladder

- Diffuse bladder wall neoplasia
 - Severe cystitis, e.g.
 - Calculi*
 - Infection*
 - Trauma*

Recent voiding*

Ruptured bladder

Ruptured ureters

Decreased opacity

Emphysematous cystitis Iatrogenic

Increased opacity

Chronic cystitis*

Foreign body

Neoplasia

Radiopaque calculi*

- Oxalate
- Silica
- Struvite

Superimposition of other organs

Thickening of the bladder wall (contrast cystography)

Chronic cystitis*

Chronic outflow obstruction

Polyps

Small bladder*

Neoplasia

Adenocarcinoma

Leiomyoma

Leiomyosarcoma

Metastatic neoplasia

Rhabdomyosarcoma

Squamous cell carcinoma

Transitional cell carcinoma

Non-visualisation

Ascites

Bladder hypoplasia

Bladder rupture

Empty bladder

- Bilateral ectopic ureters
- Cystitis*
- Post voiding*

Lack of abdominal fat

Positioning fault

3.2.7 Urethra

Contrast medium leakage

Hypospadia

Normal

Previous urethrotomy/urethrostomy

Prostatic disease*

Urethral rupture

- Iatrogenic
- Trauma

Displacement

Adjacent neoplasia Bladder displacement Prostatic disease*

Filling defects (contrast urethrography)

Air bubbles* Blood clots Neoplasia Uroliths*

Strictures/irregular surface

Neoplasia Previous surgery Previous uroliths Prostatic disease* Urethritis*

3.2.8 Kidneys

Dilatation of the renal pelvis (contrast radiography)

Chronic pyelonephritis Diuresis

Ectopic ureter Nephrolithiasis or ureterolithiasis

Renal neoplasia

Hydronephrosis

Extrinsic mass

Neoplasia

- Bladder
- Prostate
- Trigone

Paraureteral pseudocyst Ureteral blood clot Ureteral inflammation Ureteral stricture Ureterolith

Renal pelvic blood clot

Coagulopathy Iatrogenic (post biopsy) Idiopathic renal haemorrhage Neoplasia Trauma

Enlargement

Irregular outline

Abscess

Cyst

Granuloma

Haematoma

Infarction

Neoplasia

- Adenoma
- Anaplastic sarcoma
- Cystadenocarcinoma
- Haemangioma/haemangiosarcoma
- Metastatic neoplasia
- Nephroblastoma
- Papilloma
- Renal cell carcinoma
- Transitional cell carcinoma

Polycystic kidney disease

Smooth outline

Acute pyelonephritis Acute kidney injury *q.v.*

Amyloidosis

Compensatory renal hypertrophy

Congenital conditions

- Ectopic ureter
- Ureterocoele

Feline infectious peritonitis* (C)

Hydronephrosis

Extrinsic mass

- Neoplasia, e.g.
 - Bladder
 - Prostate
 - Trigone
- · Paraureteral pseudocyst
- Ureteral blood clot
- Ureteral inflammation
- Ureterolith
- Ureteral stricture

Neoplasia, e.g.

• Lymphoma*

Nephritis*

Perirenal pseudocysts

Portosystemic shunts

Subcapsular abscess

Subcapsular haematoma

Increased radiopacity

Nephroliths

Artefact

Superimposition

Dystrophic mineralisation

Abscess

Granuloma

Haematoma

Neoplasia

Osseous metaplasia

Nephrocalcinosis

Chronic kidney disease* q.v.

Ethylene glycol toxicity

Hyperadrenocorticism

Hypercalcaemia q.v.

Nephrotoxic drugs

Renal telangiectasia

Non-visualisation

Artefact/technical factors Nephrectomy Obscured by gastrointestinal tract contents* Reduced intra-abdominal contrast* q.v.

Retroperitoneal effusion

- Haemorrhage
- Urine

Unilateral renal agenesis Very small kidneys

Small kidneys

Chronic glomerulonephritis Chronic interstitial nephritis* Chronic pyelonephritis

3.2.9 Loss of intra-abdominal contrast

Artefact

Ultrasound gel on coat*
Wet hair coat*

Ascites/peritoneal fluid

Bile

Ruptured biliary tract

- Cholelithiasis
- Neoplasia
- · Post surgery, e.g.
 - Cholecystectomy
- Severe cholecystitis
- Trauma

Blood

Angiostrongylus vasorum Coagulopathy q.v. Neoplasia*, e.g.

Haemangiosarcoma

Trauma

Chyle

Lymphangiectasia

Ruptured cisterna chyli

- Neoplasia
- Trauma

Fxudate

Feline infectious peritonitis* (C)

Septic peritonitis, e.g.

- Iatrogenic/nosocomial
- Neoplasia*
- Pancreatitis*
- Penetrating wound
- Ruptured viscus
 - Neoplasia*
 - Post surgery, e.g.
 - Enterotomy wound dehiscence*
 - Trauma*

Transudate/modified transudate, e.g.

Cardiac tamponade

Caudal vena caval obstruction

Hepatic disease

- Cholangiohepatitis*
- Chronic hepatitis*
- Cirrhosis*
- Fibrosis*

Hypoalbuminaemia* q.v.

Neoplasia

Portal hypertension

Right-sided heart failure*

Urine

Lower urinary tract rupture

- Bladder
- Ureter
- Urethra

Diffuse peritoneal neoplasia Lack of abdominal fat

Emaciation*

Immaturity*

Peritonitis

Irritant

Bile

Urine

Miscellaneous

Neoplasia

Pancreatitis*

Septic

Bile leakage

Gastrointestinal tract leakage

- Devitalisation
 - Foreign body*
 - Gastric dilatation/volvulus*
 - Intestinal volvulus
 - Intussusception
- Perforation
 - Enterotomy wound dehiscence*
 - Gastroduodenal ulceration
 - Penetrating wound

Hepatic abscess

Ruptured prostatic abscess

Ruptured uterus

Septicaemia*

Splenic abscesses

Urinary tract disruption

Viral

Feline infectious peritonitis* (C)

3.2.10 Prostate

Displacement

Abdominal weakness

Full bladder*

Perineal hernia*

Prostatomegaly*

Enlargement

Benign prostatic hyperplasia*

Paraprostatic cysts

Prostatic cysts Prostatic neoplasia Prostatitis* Testicular neoplasia*

3.2.11 Uterus

Enlargement

Haemometra Hydrometra Mucometra Neoplasia Post partum* Pregnancy*

Pyometra* Torsion

3.2.12 Abdominal masses

Cranial abdomen

Adrenal mass Hepatomegaly/hepatic mass* q.v. Pancreatic mass Stomach distension/mass*

Mid abdomen

Cryptorchidism*
Mesenteric lymphadenopathy*
Ovarian masses*
Pancreatic enlargement
Renomegaly/renal mass* q.v.
Small intestine

- Foreign body*
- Neoplasia*
- Obstruction*

Splenomegaly/splenic mass* q.v.

Caudal abdomen

Distended urinary bladder* q.v.

Enlarged uterus* q.v.

Large intestine

- Foreign body*
- Neoplasia
- Obstruction*

Lymphadenopathy Prostatomegaly*

3.2.13 Abdominal calcification/mineral density

Abdominal fat

Idiopathic Pansteatitis

Adrenal glands

Idiopathic Neoplasia

Arteries

Arteriosclerosis

Gastrointestinal tract

Foreign bodies and ingesta* Iatrogenic

- Contrast media
- Medication

Uraemic gastritis* q.v.

Genital tract

Chronic prostatitis*
Cryptorchidism*
Neoplasia
Ovarian neoplasia
Ovarian or prostatic cyst*
Pregnancy*

Liver

Abscess Cholelithiasis Chronic cholecystitis*
Chronic hepatopathy*
Cyst
Granuloma
Haematoma
Neoplasia
Nodular hyperplasia*

Lymph nodes

Inflammation*
Neoplasia*

Miscellaneous

Calcinosis cutis Chronic hygroma Foreign body* Mammary gland neoplasia* Myositis ossificans

Pancreas

Chronic pancreatitis* Fat necrosis Neoplasia Pancreatic pseudocyst

Spleen

Abscess Haematoma* Histoplasmosis

Urinary tract

Chronic inflammation* Neoplasia Nephrocalcinosis

- Chronic kidney disease* q.v.
- Hyperadrenocorticism
- Hypercalcaemia* q.v.
- Nephrotoxic drugs q.v.

Urolithiasis*

3.3 Skeletal radiography

3.3.1 Fractures

Congenital/inherited weakness, e.g.

Incomplete ossification of the humeral condyle

latrogenic

Bone biopsy

Complication of orthopaedic surgery

Pathological

Bone cyst

Osteopenia q.v.

Neoplasia

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Metastatic neoplasia

Multilobular osteochondrosarcoma

Multiple myeloma

Osteosarcoma*

Osteomyelitis

Bacterial*

Fungal

Protozoal, e.g.

Leishmaniasis

Traumatic*

3.3.2 Altered shape of the long bones

Abnormally straight

Premature closure of growth plate

Angulation

Fractures*

Bowing

Asymmetric growth plate bridging

Iatrogenic, e.g.

Plating

Metaphyseal osteopathy

Chondrodysplasia

Chondrodystrophy

• May be normal breed variation*

Congenital hypothyroidism

Rickets

Tension

- Quadriceps contracture
- Shortening of the ulna

Irregular margination

Calcifying tendinopathy

Bone cyst

Enchondromatosis
 Metaphyseal osteopathy

Neoplasia

- Chondrosarcoma
- · Multiple cartilaginous exostoses
- Osteosarcoma*

Periosteal remodelling q.v.

3.3.3 Dwarfism

Disproportionate

Chondrodysplasia Hypervitaminosis A Hypothyroidism Mucolipidosis type II Mucopolysaccharidosis Rickets

Proportionate

Hypothyroidism Pituitary dwarfism

3.3.4 Delayed ossification/growth plate closure

Chondrodysplasia Copper deficiency Early neutering Hypervitaminosis D Hypothyroidism (D) Mucopolysaccharidosis Pituitary dwarfism

3.3.5 Increased radiopacity

Artefact
Bone infarcts
Folding fractures*
Growth arrest lines
Lead poisoning
Metaphyseal osteopathy
Neoplasia
Panosteitis
Skeletal immaturity* (metaphyseal condensation)

Osteomyelitis

Bacterial*
Fungal

Protozoal, e.g.

Leishmaniasis

Osteopetrosis

Acquired

- Chronic excess dietary intake of calcium
- Chronic hypervitaminosis D
- Feline leukaemia virus* (C)
- Idiopathic
- Myelofibrosis

Congenital

3.3.6 Periosteal reactions

Craniomandibular osteopathy

Hip dysplasia*

Hypertrophic osteopathy

Hypervitaminosis A

Metaphyseal osteopathy

Mucopolysaccharidosis

Neoplasia

Panosteitis

Trauma*

Infection

Bacterial*

Fungal

Protozoal

- Hepatozoonosis
- Leishmaniasis

Tuberculosis

3.3.7 Bony masses

Neoplasia

Benign

Chondroma

Endochondroma

Monostotic osteochondroma

Multiple osteochondroma (C)

Osteoma

Polyostotic osteochondroma/multiple cartilaginous exostoses

Malignant

Locally invasive soft tissue

Malignant melanoma of the digit

Soft tissue sarcomas

Squamous cell carcinoma of the digit

Primary bone

- Chondrosarcoma
- Fibrosarcoma

- Giant cell tumour
- · Haemangiosarcoma
- Liposarcoma
- Lymphoma
- Multiple myeloma
- Multilobular osteochondrosarcoma
- Osteosarcoma
- Parosteal osteosarcoma
- Plasma cell tumour
- Undifferentiated sarcoma

Tumours which metastasise to bone

- Mammary carcinoma
- Prostatic carcinoma
- Pulmonary carcinoma
- Sarcomas of the rib/chest wall

Miscellaneous

Craniomandibular osteopathy Enthesopathies

Proliferative joint disease

Disseminated skeletal hyperostosis
Feline periosteal proliferative polyarthropathy (C)
Hypervitaminosis A
Osteoarthritis*

Trauma

Callus* Hypertrophic non-union Periosteal reaction

3.3.8 Osteopenia

Artefact

Disuse

Fracture* Lameness* Paralysis

latrogenic

Chronic anticonvulsant therapy, e.g.

Phenobarbitone

Phenytoin

Primidone

Chronic glucocorticoid administration

Stress protection from plating/casting

Metabolic/endocrine/systemic

Diabetes mellitus*

Hyperadrenocorticism

Hyperthyroidism* (C)

Lactation*

Mucopolysaccharidosis

Pregnancy*

Primary hyperparathyroidism

Renal secondary hyperparathyroidism*

Miscellaneous

Ageing changes

Osteogenesis imperfecta

Panosteitis

Neoplasia

Multiple myeloma

Pseudohyperparathyroidism (see succeeding text)

Nutrition

Chronic protein malnutrition

Hypervitaminosis A

Hyper-/hypovitaminosis D

Nutritional secondary hyperparathyroidism

Pseudohyperparathyroidism

- Adenocarcinoma of the apocrine glands of anal sacs
- Gastric squamous cell carcinoma
- Lymphoma*
- Mammary adenocarcinoma
- Multiple myeloma

- Testicular interstitial cell tumour
- Thyroid adenocarcinoma

Rickets

Toxins

Lead poisoning

3.3.9 Osteolysis

Avascular necrosis of the femoral head* (D)

Bone cysts

Feline femoral metaphyseal osteopathy (C)

Fibro-osseous dysplasia

Fibrous dysplasia

Infarct

Intraosseous epidermoid cysts

Metaphyseal osteopathy

Pressure atrophy

Retained cartilaginous core

Trauma*

Infection

Bacterial

- Bone abscess
- Iatrogenic, e.g. around surgical implants*
- Osteomyelitis*
- Sequestrum

Fungal

Protozoal

Leishmaniasis

Neoplasia

Enchondroma

Malignant soft tissue tumour

Metastatic tumour

Multiple myeloma

Osteochondroma/multiple cartilaginous exostoses

Osteoclastoma

3.3.10 Mixed osteolytic/osteogenic lesions

Infection

Bacterial

Osteomyelitis* Sequestrum

Fungal

Aspergillosis Blastomycosis Coccidioidomycosis Cryptococcosis Histoplasmosis

Protozoal

Leishmaniasis

Neoplasia

Chondrosarcoma
Fibrosarcoma
Haemangiosarcoma
Liposarcoma
Malignant soft tissue tumour*
Metastatic*
Osteosarcoma*

3.3.11 Joint changes

Joint space - increased size

Degenerative joint disease Intra-articular soft tissue mass Joint effusion* Juvenile animal Positioning artefact/traction Subluxation

Epiphyseal dysplasia Chondrodysplasia Congenital hypothyroidism

Mucopolysaccharidosis Pituitary dwarfism

Subchondral osteolysis

Neoplasia Osteochondrosis Rheumatoid arthritis Septic arthritis*

Joint space - reduced size

Degenerative joint disease* Erosive rheumatoid arthritis Erosive septic arthritis Periarticular fibrosis Positioning artefact*

Mixed osteolytic/proliferative joint disease

Avascular necrosis of the femoral head* (D)
Feline periosteal proliferative
polyarthropathy (C)
Feline tuberculosis (C)
Leishmaniasis
Neoplasia
Non-infectious erosive polyarthritis
Osteochondromatosis
Periosteal proliferative polyarthritis
Repeated haemarthroses
Rheumatoid arthritis
Septic arthritis*
Villonodular synovitis

Osteolytic joint disease

Avascular necrosis of the femoral head* (D) Chronic haemarthrosis Epiphyseal dysplasia causing apparent osteolysis Incomplete ossification in juveniles Osteochondrosis Osteopenia *q.v.*

Rheumatoid arthritis Subchondral cysts Villous nodular synovitis

Infection

Feline tuberculosis (C) Leishmaniasis Mycoplasmosis Septic arthritis*

Neoplasia

Metastatic digital carcinoma Synovial sarcoma Other soft tissue neoplasia

Proliferative joint disease

Disseminated idiopathic skeletal hyperostosis Enthesopathies Hypervitaminosis A Mucopolysaccharidosis Systemic lupus erythematosus

Neoplasia

Osteoma Osteosarcoma* Synovial osteochondroma

Osteoarthritis

Ageing*
Angular limb deformities
Chondrodysplasia
Elbow dysplasia*
Hip dysplasia*
Post articular fractures*
Post surgery*
Other chronic joint stresses
Repeated haemarthroses
Soft tissue damage, e.g.

Ruptured cranial cruciate ligament*

Soft tissue swelling - joint effusion

Haemarthrosis

Ligament injury

Osteoarthrosis

Osteochondrosis

Shar Pei fever (D)

Soft tissue callus

Synovial cyst

Trauma*

Villonodular synovitis

Arthritis

Iatrogenic

- Drugs, e.g.
 - Sulphonamides
- Vaccine reactions

Idiopathic polyarthritis

Immune-mediated disease

- Arthritis of the Akita (D)
- Gastrointestinal disease associated
- Idiopathic
- Neoplasia associated
- Polyarteritis nodosa
- Polyarthritis/meningitis
- Polyarthritis/polymyositis
- · Systemic lupus erythematosus
- Vaccine reaction

Infection

- Borreliosis
- Ehrlichiosis
- Sepsis (bacterial)*

Periarticular swelling

Abscess*

Cellulitis*

Haematoma

Neoplasia

Oedema*

3.4 Radiography of the head and neck

3.4.1 Increased radiopacity/bony proliferation of the maxilla

Acromegaly Healing/healed fracture* Neoplasia Osteomyelitis*

3.4.2 Decreased radiopacity of the maxilla

Granuloma Nasolacrimal duct cysts

Hyperparathyroidism

Nutritional secondary Primary Renal secondary*

Neoplasia

Fibrosarcoma
Local extension of tumour, e.g.
• From nasal cavity*
Malignant melanoma
Osteosarcoma*
Squamous cell carcinoma

Odontogenic cysts

Adamantinoma Ameloblastoma Complex odontoma Dentigerous cyst

Periodontal disease*

3.4.3 Increased radiopacity/bony proliferation of the mandible

Acromegaly
Canine leukocyte adhesion deficiency (D)
Craniomandibular osteopathy
Healing/healed fracture*
Neoplasia
Osteomyelitis*

3.4.4 Decreased radiopacity of the mandible

Granuloma Periodontal disease

Hyperparathyroidism

Nutritional secondary Primary Renal secondary*

Neoplasia

Fibrosarcoma Malignant melanoma Osteosarcoma* Squamous cell carcinoma

Odontogenic cysts

Adamantinoma Ameloblastoma Complex odontoma Dentigerous cyst

3.4.5 Increased radiopacity of the tympanic bulla

Abnormal contents

Cholesteatoma Granuloma Neoplasia Otitis media* Polyp*

Artefact

Positioning

Thickening of the bulla wall

Canine leukocyte adhesion deficiency (D) Craniomandibular osteopathy Neoplasia Otitis media* Polyp*

3.4.6 Decreased radiopacity of the nasal cavity

Artefact

Turbinate destruction

Aspergillosis
Congenital defect of the hard palate
Chronic rhinitis, e.g. viral
Destruction of the palatine or maxillary bone, e.g.

• Neoplasia*

Neoplasia*
 Foreign body*
 Previous rhinotomy

3.4.7 Increased radiopacity of the nasal cavity

Artefact Epistaxis *q.v.*

Miscellaneous

Foreign body Hyperparathyroidism Kartagener's syndrome Polyp Primary ciliary dyskinesia

Neoplasia

Nasal cavity*

Adenocarcinoma*

Chondrosarcoma

Esthesioneuroblastoma

Fibrosarcoma

Haemangiosarcoma

Histiocytoma

Leiomyosarcoma

Liposarcoma

Lymphoma*

Malignant fibrous histiocytoma

Malignant melanoma

Malignant nerve sheath tumour

Mast cell tumour

Myxosarcoma

Neuroendocrine tumours

Osteosarcoma

Paranasal meningioma

Rhabdomyosarcoma

Squamous cell carcinoma*

Transitional cell carcinoma

Transmissible venereal tumour

Undifferentiated carcinomas*

Undifferentiated sarcoma

Nasal planum

Cutaneous lymphoma

Fibroma

Fibrosarcoma

Haemangioma

Mast cell tumour*

Melanoma

Squamous cell carcinoma

Rhinitis* q.v.

3.4.8 Increased radiopacity of the frontal sinuses

Miscellaneous

Canine leukocyte adhesion deficiency (D) Craniomandibular osteopathy

Neoplasia

Carcinoma*

Local extension, e.g.
• Nasal tumour*

Osteoma

Osteosarcoma

Obstruction of drainage

Neoplasia*

Sinusitis

Allergic*

Bacterial*

Fungal

Kartagener's syndrome

Viral*

3.4.9 Increased radiopacity of the pharynx

Foreign body* Mineralisation of laryngeal cartilages Nasopharyngeal stenosis Obesity* Pharyngeal paralysis Salivary calculi

Pharyngeal soft tissue mass

Abscess* Granuloma Nasopharyngeal polyp* Neoplasia

- Carcinoma
- Lymphoma

Retropharyngeal mass

Abscess*

Enlarged lymph nodes*

Neoplasia, e.g.

• Lymphoma*

Soft palate thickening

Brachycephalic obstructive airway syndrome* (D)

Mass

- Cvst
- Granuloma
- Neoplasia

3.4.10 Thickening of the soft tissues of the head and neck

Diffuse

Acromegaly

Cellulitis*

Cranial vena cava syndrome

Neoplasia*

Obesity*

Oedema*

Focal

Abscess*

Cyst*

Foreign body*

Granuloma

Haematoma*

Iatrogenic, e.g.

• Subcutaneous fluid administration*

Neoplasia*

3.4.11 Decreased radiopacity of the soft tissues of the head and neck

Fat

Lipoma* Obesity*

Gas

Abscess*

Perforation

- Oesophagus
- Pharynx
- Skin
- Trachea

Pneumomediastinum

3.4.12 Increased radiopacity of the soft tissues of the head and neck

Artefact

Calcification

Calcinosis circumscripta Calcinosis cutis

Calcification of

Abscess

Granuloma

Haematoma

Tumour

Foreign body*

latrogenic

Barium Microchip

Neoplasia

3.5 Radiography of the spine

3.5.1 Normal and congenital variation in vertebral shape and size

Congenital variation

Abnormal dorsal angulation of the

dens of C2

Agenesis/incomplete development

of the dens of C2

Anomalous development of a transverse process

of a lumbar vertebra

Block vertebrae

Butterfly vertebrae

Cervical vertebral malformation-malarticulation syndrome

(wobbler syndrome)* (D)

Chondrodystrophic dwarfism

Congenital metabolic disease

- Congenital hypothyroidism
- Pituitary dwarfism

Fused dorsal spinal processes

Hemivertebrae

Mucopolysaccharidosis

Narrowed vertebral canal

- Cervical vertebral malformation–malarticulation syndrome (wobbler syndrome) (D)
- Congenital lumbosacral stenosis
- Secondary to hemivertebrae or block vertebrae
- Thoracic stenosis

Occipital dysplasia

Perocormus

Sacrococcygeal dysgenesis

Scoliosis

Shortened dens of C2

Spina bifida

Spinal stenosis

Transitional vertebrae

Normal variation

C7 may be shorter than adjacent vertebrae. L7 may be shorter than adjacent vertebrae. Ventral L3 and L4 may be poorly defined.

3.5.2 Acquired variation in vertebral shape and size

Altered vertebral shape

Hyperparathyroidism

- Nutritional secondary
- Primary
- Renal secondary*

Hypervitaminosis A

Mucopolysaccharidosis

Spondylosis deformans

Trauma

Fracture*

Neoplasia

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Metastatic neoplasia*

- Haemangiosarcoma
- Lymphosarcoma
- Prostatic carcinoma

Multiple cartilaginous exostoses

Multiple myeloma

Osteochondroma

Osteosarcoma*

Decreased vertebral size

Discospondylitis

Fracture*

Intervertebral disc herniation* (D)

Mucopolysaccharidosis

Nutritional secondary hyperparathyroidism

Increased vertebral size

Baastrup's disease

Bone cyst

Callus formation secondary to trauma/pathological fracture

Disseminated idiopathic skeletal hyperostosis

Hypervitaminosis A

Mucopolysaccharidosis

Neoplasia

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Metastatic neoplasia*, e.g.

- Haemangiosarcoma
- Lymphosarcoma
- Prostatic carcinoma

Multiple cartilaginous exostoses

Osteochondroma

Osteosarcoma*

Spondylitis

Bacterial, e.g.

- Foreign body*
- Haematogenous
- Puncture wound

Fungal, e.g.

- Actinomycosis
- Aspergillosis
- Coccidioidomycosis

Parasitic, e.g.

• Spirocerca lupi

Protozoal, e.g.

Hepatozoonosis

Spondylosis deformans

Cervical vertebral malformation-malarticulation syndrome

(wobbler syndrome)* (D)

Chronic disc disease* (D)

Degeneration of annulus fibrosis

Discospondylitis

Hemivertebrae

Post surgery

Trauma*

Vertebral canal changes

Widened

Arachnoid cyst

Syringohydromyelia

Tumour

Narrowed

Adjacent bone pathology, e.g.

Callus

Cervical vertebral malformation-malarticulation syndrome

(wobbler syndrome)* (D)

Lumbosacral stenosis

3.5.3 Changes in vertebral radiopacity

Focal or multifocal decrease in radiopacity

Discospondylitis

Osteomyelitis*

Vertebral physitis

Neoplasia

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Metastatic neoplasia

Multiple myeloma

Osteochondroma

Osteosarcoma*

Focal or multifocal increase in radiopacity

Neoplasia

Chondrosarcoma

Fibrosarcoma

Haemangiosarcoma

Metastatic neoplasia*, e.g.

- Haemangiosarcoma
- Lymphoma
- Prostatic carcinoma

Osteochondroma

Osteosarcoma*

Generalised decrease in radiopacity

Disuse atrophy

Hyperadrenocorticism

Hyperparathyroidism

- Nutritional secondary
- Primary
- Pseudohyperparathyroidism*
- Renal secondary*

Hyperthyroidism* (C)

Hypothyroidism* (D)

Osteogenesis imperfecta

Senile osteoporosis

Generalised increase in radiopacity

Osteopetrosis

3.5.4 Abnormalities in the intervertebral space

Disc space - decreased size

Adjacent hemivertebra

Adjacent neoplasia

Artefact

- Divergence of X-ray beam at periphery of radiograph
- Positioning artefact

Cervical vertebral malformation-malarticulation syndrome

(wobbler syndrome)* (D)

Degenerative canine lumbosacral stenosis

Discospondylitis

Hansen type I disc extrusion* (D)

Hansen type II disc protrusion* (D)

Post surgery

Spondylosis deformans*

Subluxation

Within block vertebra

Disc space - widened

Normal variation Adjacent to hemivertebra Artefact (traction) End-plate erosion

- Discospondylitis
- Neoplasia

Mucopolysaccharidosis

Trauma

- Luxation
- Subluxation

Increased radiopacity of disc space

Artefact Superimposition of normal bone/soft tissue Incidental mineralisation Intervertebral disc disease* (D)

Irregular margination of disc space

Ageing in cats
Degenerative intervertebral disc disease
Discospondylitis
Mucopolysaccharidosis
Nutritional secondary hyperparathyroidism
Spondylosis deformans*

3.5.5 Contrast radiography of the spine (myelography)

Artefact/technical factors

Contrast medium in soft tissues outside the vertebral canal Contrast medium in the spinal parenchyma Epidural leakage Injection of contrast into the central canal Injection of gas into the subarachnoid space Subdural injection

Extradural lesions

Congenital abnormalities Foreign body Neoplasia

Degenerative

Hansen type I disc extrusion* (D)
Hansen type II disc protrusion* (D)
Hansen type III disc high-velocity low-volume extrusion
Hypertrophied ligamentum flavum
Arachnoid cysts

Inflammatory

Abscess Granuloma

Trauma

Fracture*
Luxation*

Vascular

Haematoma Haemorrhage

Intradural/extramedullary

Degenerative

Disc disease

Idiopathic

Intra-arachnoid cyst

Inflammatory

Subdural granuloma

Neoplasia

Lymphoma Meningioma

Nerve root tumour

Nerve sheath tumour

Vascular

Subarachnoid haematoma Subarachnoid haemorrhage

Intramedullary

Congenital

Syringohydromyelia* (D)

Degenerative

Disc disease* (D)

Inflammatory

Granulomatous meningoencephalomyelitis

Neoplastic

Ependymoma

Glioma

Lymphoma

Metastatic tumours

Traumatic

Cord swelling

- Concussion
- Disc extrusion

Vascular

Ischaemic myelopathy*
Myelomalacia secondary to infarction

Contrast column splitting

Lateralised extradural compression(s) Midline extradural compression

3.6 Thoracic ultrasonography

3.6.1 Pleural effusion

(See Section 3.1.13 for full listings)

Bile pleuritis

Blood

Chyle

Exudate

Transudate/modified transudate

3.6.2 Mediastinal masses

Granuloma

Idiopathic mediastinal cysts

Neoplasia

- Lymphoma*
- Mast cell tumour
- Melanoma
- Thymoma*
- Thyroid carcinoma

Reactive lymphadenopathy*

Thymic branchial cysts

3.6.3 Pericardial effusion

Secondary to cardiomyopathy (C)*

Haemorrhagic

Coagulopathy *q.v.* Left atrial rupture

Idiopathic*(D)

Neoplastic*

Haemangiosarcoma

Heart base tumours

- Chemodectoma
- Metastatic parathyroid tumour
- · Metastatic thyroid tumour
- Other metastatic tumours*
- Nonchromaffin paraganglioma

Lymphoma

Mesothelioma

Pericarditis

Bacterial

Bite wounds

Extension of pulmonary infection

Foreign bodies Oesophageal perforation Fungal Uraemic

Viral

• Feline infectious peritonitis* (C)

3.6.4 Altered chamber dimensions

LEFT HEART

Left atrial enlargement

Chronic bradycardia
Dilated cardiomyopathy*
Hyperthyroidism* (C)

Hypertrophic cardiomyopathy* (C)

Left-to-right shunt Mitral dysplasia

Myxomatous degeneration of the mitral valve* (D)

Primary atrial disease

Restrictive cardiomyopathy (C)

Left ventricle

Dilatation

Anaemia

Arteriovenous fistula

Chronic bradycardia q.v.

Chronic tachyarrhythmia q.v.

Dilated cardiomyopathy

- Drugs/toxins, e.g.
 - Doxorubicin
- Idiopathic*
- Parvovirus
- Taurine deficiency

High-output states

- Anaemia* q.v.
- Hyperthyroidism* (C)

Myocarditis

Volume overload

- Aortic insufficiency
- · Left-to-right shunts
 - Arteriovenous fistulas
 - Atrial septal defects
 - Patent ductus arteriosus
 - Ventricular septal defects
- Mitral regurgitation, e.g.
 - Mitral dysplasia
 - Myxomatous degeneration of the mitral valve* (D)

Hypertrophy

Cardiomyopathy

Hypertrophic* (C)

Coarctation of the aorta

Endomyocardial fibrosis

Hyperthyroidism* (C)

Infiltrative cardiac disease, e.g.

Lymphoma

Pressure overload

- Aortic/subaortic stenosis
- Systemic arterial hypertension*

Pseudohypertrophy from volume depletion*

Reduction

Hypovolaemia q.v.*

Wall thinning

Aneurysm

Dilated cardiomyopathy*

Infarction

Prior myocarditis

RIGHT HEART

Right atrial enlargement

Anaemia q.v.

Arteriovenous fistula

Atrial septal defect

Chronic bradycardia

Cor pulmonale

Dilated cardiomyopathy*

Heartworm disease

Hyperthyroidism* (C)

Hypertrophic cardiomyopathy* (C)

Myxomatous degeneration of the tricuspid valve* (D)

Primary atrial myocardial diseases

Pulmonary hypertension

Restrictive cardiomyopathy (C)

Right-to-left shunts

Tricuspid dysplasia

Tricuspid stenosis/atresia

Right ventricle

Dilatation

Right ventricular volume overload

- Atrial septal defects
- Cardiomyopathy
 - Dilated cardiomyopathy* (D)
 - Hypertrophic cardiomyopathy* (C)
 - Restrictive cardiomyopathy (C)
- Pulmonic insufficiency
- Tricuspid insufficiency
 - Myxomatous degeneration of the tricuspid valve* (D)
 - Tricuspid dysplasia

Hypertrophy

Hypertrophic cardiomyopathy* (C)

Pressure overload

- Cor pulmonale
- Heartworm disease
- Large ventricular septal defect
- Pulmonary hypertension
- Pulmonary thromboembolism
- Pulmonic stenosis
- Tetralogy of Fallot

Restrictive cardiomyopathy (C)

Reduction

Cardiac tamponade

Hypovolaemia* q.v.

3.6.5 Changes in ejection phase indices of left ventricular performance (fractional shortening, FS%; ejection fraction, EF)

Apparently reduced performance (decreased FS%, decreased EF)

Decreased preload, e.g. Hypovolaemia* q.v.

Increased afterload, e.a.

Aortic stenosis

Systemic arterial hypertension* q.v.

Reduced systolic function

Canine X-linked muscular dystrophy Chronic valvular heart disease* (D)

Dilated cardiomyopathy*

Apparently increased performance (increased FS%, increased EF)

Decreased afterload, e.g.

Hypotension

Mitral valve regurgitation*

Increased preload, e.g.

Iatrogenic fluid overload*

Myocardial disease, e.g.

Hypertrophic cardiomyopathy* (C)

3.7 Abdominal ultrasonography

3.7.1 Renal disease

Diffuse abnormalities

Renomegaly *q.v.* Small kidneys *q.v.*

Increased cortical echogenicity with normal or enhanced corticomedullary definition

End-stage renal disease* q.v.

Ethylene glycol toxicity
Fat in the cortex*
Feline infectious peritonitis* (C)
Glomerulonephritis
Interstitial nephritis*
Nephrocalcinosis
Lymphoma
Squamous cell carcinoma

Medullary rim sign

May be normal* Chronic interstitial nephritis* Ethylene glycol toxicity Feline infectious peritonitis* (C) Hypercalcaemic nephropathy Idiopathic acute tubular necrosis Leptospirosis*

Increased cortical echogenicity with reduced corticomedullary definition
Chronic inflammatory disease*
Congenital renal dysplasia
End-stage kidneys*

Reduced cortical echogenicity Lymphoma

Focal abnormalities

Anechoic/hypoechoic lesions

Abscess

Acquired cysts secondary to nephropathies

Congenital cysts

Cystadenocarcinoma

Haematoma

Lymphoma

Perirenal pseudocyst

Polycystic kidney disease*

Tumour necrosis

Hyperechoic lesions

Calcified abscess

Calcified cyst wall

Calcified haematoma

Calculi

Chronic renal infarcts

Fibrosis

Gas

Granuloma

Neoplasia

- Chondrosarcoma
- Haemangioma
- Haemangiosarcoma
- · Metastatic thyroid adenocarcinoma
- Osteosarcoma

Mixed echogenicity lesions

Abscess

Acute infarct

Granuloma

Haematoma

Neoplasia

- Adenocarcinoma
- Haemangioma
- Lymphoma

Pelvic dilatation

Contralateral renal disease/absence

(mild dilatation)

Polyuria/diuresis

Pyelonephritis

Renal neoplasia

Congenital conditions

Ectopic ureter

Ureterocoele

Hydronephrosis

Extrinsic mass

Neoplasia

- Bladder
- Prostate
- Trigone

Paraureteral pseudocyst

Ureteral blood clot

Ureteral inflammation Ureteral stricture Ureterolith

3.7.2 Hepatobiliary disease

Biliary obstruction (see also Jaundice)

Abscess

Biliary calculi

Gastrointestinal disease* q.v.

Granuloma

Hepatobiliary disease* q.v.

Lymphadenopathy* q.v.

Neoplasia*

Pancreatic disease, e.g. pancreatitis*

Diffuse hepatic disease

Hepatomegaly *q.v.** Microhepatica *q.v.*

Decreased echogenicity

Amyloidosis

Congestion*

Hepatitis*

Leukaemia

Lymphoma*

Increased echogenicity

Chronic hepatitis*

Cirrhosis*

Fatty infiltration

- Diabetes mellitus*
- Obesity*

Lymphoma*

Steroid hepatopathy*

Mixed echogenicity

Cirrhosis*

Diffuse neoplasia*

Hepatocutaneous syndrome

Dilatation of the caudal vena cava and hepatic veins

Haematological disorders

Systemic infection*

Obstruction of the caudal vena cava/hepatic veins

Budd-Chiari syndrome

Liver disease* q.v.

Neoplasia*

Strictures

Thrombosis

Trauma*

Right-sided heart failure*

Cardiac tamponade

Dirofilariasis

Myocardial disease

Pulmonary hypertension

Pulmonic stenosis

Tricuspid insufficiency

Focal or multifocal hepatic parenchymal abnormalities

Nodular hyperplasia (D)*

Abscess

Biliary disease*

Chronic glucocorticoid administration

Diabetes mellitus*

Liver lobe torsion

Neoplasia*

Pancreatitis*

Penetrating foreign body

Cysts

Acquired cysts

- Biloma
- Polycystic renal disease*

Congenital cysts

Cyst-like masses

Biliary pseudocyst

Inflammation

Necrosis

Neoplasia*

Trauma

Haematoma

Coagulopathy q.v.

Trauma*

Hepatic necrosis

Chemical insult

Immune mediated*

Infection*

Toxin

Neoplasia

Biliary cystadenoma

Cholangiocellular adenocarcinoma

Cholangiocellular adenoma

Hepatocellular adenocarcinoma*

Hepatocellular adenoma*

Lymphoma*

Metastatic tumours*

Focal/multifocal increased echogenicity of the gall bladder

Biliary calculi

Gall bladder mucocoele

Gall bladder sludge*

Neoplasia

Polyps

Gall bladder wall thickening

Acute hepatitis* q.v.

Cholangiohepatitis*

Cholecystitis* q.v.

Chronic hepatitis* q.v.

Gall bladder mucocoeles

Hypoalbuminaemia* q.v.

Neoplasia*

Right-sided congestive heart failure*

Sepsis*

3.7.3 Splenic disease

Diffuse splenic disease - splenomegaly

Amyloidosis

Extramedullary haematopoiesis

Immune-mediated disease*

Infarction

Parenchymal necrosis

Portal hypertension

Splenic vein thrombosis

Congestion

Anaesthetic agents*

Haemolytic anaemia*

Portal vein obstruction

Right-sided heart failure*

Torsion of the splenic pedicle

- Gastric dilatation/volvulus
- Isolated

Toxaemia*

Tranquillizers*

Infection

Bacterial*

Fungal

Neoplasia

Lymphoma*

Lymphoproliferative disease

Malignant histiocytosis

Mastocytosis

Myeloproliferative disease

Parasites

Babesiosis

Ehrlichiosis

Haemotropic Mycoplasma spp.

Focal or multifocal splenic disease

Abscess

Fat deposits

Nodular hyperplasia

Haematoma

Abdominal trauma Coagulopathy

Infarcts

Cardiovascular disease* Hyperadrenocorticism Hypercoagulability Inflammatory diseases

- Endocarditis
- Pancreatitis*
- Septicaemia*

Liver disease* q.v.

Neoplasia*

- Fibrosarcoma
- Haemangioma
- Haemangiosarcoma
- Leiomyosarcoma
- Lymphoma

Renal disease* q.v.

Neoplasia

Chondrosarcoma

Fibrosarcoma

Fibrous histiocytoma

Haemangioma*

Haemangiosarcoma*

Leiomyosarcoma

Liposarcoma

Lymphoma*

Metastatic tumours*

Myxosarcoma

. Osteosarcoma

Rhabdomyosarcoma

Undifferentiated sarcoma

3.7.4 Pancreatic disease

Focal pancreatic lesions

Abscess (D)

Cyst-like structures

- · Congenital cysts
- Pseudocysts
- Retention cysts

Neoplasia

Nodular changes

Diffuse enlargement

Pancreatic neoplasia Pancreatic oedema Pancreatitis*

3.7.5 Adrenal disease

Adrenomegaly

Unilateral

Adrenal tumour

- Adrenocortical adenocarcinoma*
- Adrenocortical adenoma*
- Blastoma
- Metastatic tumours
- Pheochromocytoma

Bilateral

Adrenal tumours

- Adrenocortical adenocarcinoma*
- Adrenocortical adenoma*
- Metastatic tumours

Drugs

Trilostane

Hyperplasia

Pituitary-dependent hyperadrenocorticism*

Stressful non-adrenal illness*

3.7.6 Urinary bladder disease

Increased wall thickness

Diffuse

Chronic cystitis*

Emphysematous cystitis

- Clostridial infection
- Diabetes mellitus

Empty bladder*

Fibrosis/calcification of the bladder wall

Focal or multifocal

Mural haematomas

- Coagulopathy q.v.
- Iatrogenic
- Infection
- Neoplasia
- Trauma

Neoplasia

- Adenocarcinoma
- Chemodectoma
- Fibroma
- Fibrosarcoma
- Haemangioma
- Haemangiosarcoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma
- Myxoma
- Rhabdomyosarcoma
- · Squamous cell carcinoma
- Transitional cell carcinoma
- Undifferentiated carcinoma

Focal wall defects

Acquired diverticulum

Patent urachus

Urachal diverticulum

Ureterocoele

Intraluminal lesions, e.g.

Blood clots*

Foreign bodies

Gas bubbles

Sediment*

Uroliths*

3.7.7 Gastrointestinal disease

Increased wall thickness

Diffuse

Acute haemorrhagic gastroenteritis* Colitis* q.v.

- Gastritis*
 - Dietary*
 - Infectious*
 - Parvovirus*
 - Inflammatory*
 - Uraemic* q.v.

Inflammatory bowel disease*

Neoplasia

Lymphoma*

Focal/multifocal

Benign adenomatous polyps

Chronic hypertrophic gastropathy

Congenital hypertrophic pyloric stenosis

Inflammatory bowel disease*

Intussusception (apparent)

Neoplasia

- Adenocarcinoma
- Adenoma
- Carcinoid tumours
- Carcinoma
- Leiomyoma
- Leiomyosarcoma
- Lymphoma
- Neurilemmoma

Decreased intestinal motility (ileus)

Functional

Abdominal pain*

Acute gastroenteritis*

Amyloidosis

Neurogenic disease

Oedema

Post-operative abdomen*

Vascular disease

Drugs

Mechanical

Adhesions*

Foreign body*

Intussusception

Localised inflammation*

Neoplasia

3.7.8 Ovarian and uterine disease

Ovarian masses

Ovarian stump granuloma

Cysts*

Follicular

Luteinising

Neoplasia

Adenoma

Adenocarcinoma

Dysgerminoma

Granulosa cell tumour

Luteoma

Teratoma

Thecoma

Uterine enlargement

Haemometra

Hydrometra

Mucometra

Post partum*

Pregnancy*

Pyometra*

Uterine wall thickening

Neoplasia

Adenocarcinoma

Adenoma

Fibroma Fibrosarcoma Leiomyoma Leiomyosarcoma Lymphoma

3.7.9 Prostatic disease

Prostatic enlargement

Diffuse

Bacterial prostatitis* Benign prostatic hyperplasia* Neoplasia Squamous metaplasia

Focal lesions

Abscessation

Cysts

- Paraprostatic
- Prostatic

Neoplasia

- Adenocarcinoma
- Fibroma
- Leiomyoma
- Leiomyosarcoma
- · Squamous cell carcinoma
- Transitional cell carcinoma
- Undifferentiated carcinoma

3.7.10 Ascites

Bile - ruptured biliary tract

Neoplasia

Post surgery, e.g.

Cholecystectomy
 Severe cholecystitis*

Trauma

Blood

Coagulopathy

Neoplasia, e.g.

Haemangiosarcoma*

Organ or major blood vessel rupture

Thrombosis

Trauma

Vasculitis

Chyle

Congestive heart failure

Feline infectious peritonitis (C)

Lymphangiectasia

Lymphangiosarcoma

Lymphoma

Mesenteric root strangulation

Ruptured cisterna chyli

- Neoplasia
- Trauma

Steatitis

Exudate

Diaphragmatic hernia

Feline infectious peritonitis* (C)

Hepatitis

Neoplasia

Organ torsion

Pancreatitis

Pericardiodiaphragmatic hernia

Septic peritonitis

Abscess

Haematogenous spread

Iatrogenic/nosocomial

Local extension of infection from elsewhere

Migrating foreign body

Neoplasia*

Pancreatitis*

Penetrating wound

Primary

Ruptured viscus, e.g.

- Neoplasia
- · Post surgery, e.g.
 - Enterotomy wound dehiscence*
- Pyometra
- Trauma

Steatitis

Transudate/modified transudate

Cardiac tamponade q.v.

Caudal vena caval obstruction

Hepatic disease

- Cholangiohepatitis* q.v.
- Chronic hepatitis* q.v.
- Cirrhosis*
- Fibrosis*
- · Portal hypertension

Hypoalbuminaemia* q.v.

Inflammation

• Feline infectious peritonitis

Neoplasia*

Portal hypertension

Right-sided heart failure*

Ruptured cyst

Splenic disease

Urine - lower urinary tract rupture

Bladder

Ureter

Urethra

3.8 Ultrasonography of other regions

3.8.1 Testes

Enlargement

Neoplasia*

Orchitis

Torsion

Focal lesions - neoplasia

Interstitial cell tumour* Seminoma* Sertoli cell tumour*

3.8.2 Eyes

Intraocular masses

Foreign body*
Inflammation*

Infection*

Bacteria

Fungi

- Blastomycosis
- Coccidioidomycosis
- Cryptococcosis
- Histoplasmosis

Viral

• Feline infectious peritonitis* (C)

Neoplasia

Ciliary body adenocarcinoma

Ciliary body adenoma

Lymphoma

Medulloepithelioma

Melanoma

Metastatic cancer

Squamous cell carcinoma

Organised haemorrhage*

Chronic glaucoma

Coagulopathy q.v.

Diabetes mellitus*

Hypertension* q.v.

Neoplasia

Neovascularisation

Persistent hyaloid artery

Trauma*

Vitreoretinal disease

Point-like and membranous lesions of the vitreous chamber

Asteroid hyalosis

Endophthalmitis

Foreign body

Haemorrhage (see preceding text)

Persistent hyperplastic primary vitreous

Posterior vitreal detachment

Vitreous floaters

Vitreous membrane formation

Retinal detachment *q.v.*Retrobulbar masses

Abscess/cellulitis*

Extension from nasal cavity

Extension from paranasal sinuses

Extension from tooth root infection*

Extension from zygomatic salivary gland

Foreign body

Haematogenous spread

Oral inflammatory disease

Penetrating wound

Neoplasia

Metastatic tumours

Chondrosarcoma

Haemangiosarcoma

Lacrimal gland tumour

Lymphoma

Meningioma

Nasal adenocarcinoma

Neurofibrosarcoma

Osteosarcoma

Rhabdomyosarcoma

Squamous cell carcinoma

Zygomatic gland tumour

Primary epithelial and mesenchymal tumours

3.8.3 Neck

Enlarged parathyroid gland(s)

Neoplasia

Adenocarcinoma

Adenoma

Hyperplasia

Nutritional secondary hyperparathyroidism Renal secondary hyperparathyroidism

Enlarged thyroid gland(s)

Miscellaneous

Thyroid cyst

Thyroiditis

Neoplasia

Adenocarcinoma*

Adenoma*

Lymph node enlargement

Inflammation/infection

Abscess*

Inflammation*

Neoplasia

Lymphoma*

Metastatic neoplasia*

Salivary gland enlargement

Salivary cysts

Retention cyst

True cyst

Salivary gland abscess*

Salivary gland neoplasia

Sialadenitis/sialadenosis

Sialocoele*

Sialolithiasis

Neck masses at other sites

Inflammation/infection

Abscess*

Cellulitis

Granuloma

Neoplasia

Lipoma*

Metastatic neoplasia

Primary neoplasia

Miscellaneous

Arteriovenous malformation

Cyst*

Haematoma*

PART 4 LABORATORY FINDINGS

In order to avoid repetition, 'laboratory error' has been omitted from the differential diagnoses in this chapter. However, it should always be borne in mind that factors such as mislabelling or misidentification of samples, errors introduced by the laboratory machinery (especially certain in-house laboratories where quality control is inadequate) and errors due to ageing samples or incorrect collection techniques can all cause apparent abnormalities. Where a test result is unexpectedly abnormal, it should be repeated, preferably by a different method. It is also important to remember that reference intervals are usually based on the values into which 95% of the healthy population would fall, so small changes outside these values may not be significant. Finally, each laboratory establishes its own reference intervals, due to differences in testing methodology and local factors, and thus when comparing results over a course of time, it is best to use the same laboratory.

4.1 Biochemical findings

4.1.1 Albumin

Decreased

Relative (dilutional)

Decreased production
Chronic inflammatory disease*
Hepatic failure* *q.v.*

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Decreased protein intake

Malabsorption*
Maldigestion
Malnutrition

Increased loss

Cutaneous lesions, e.g.

Burns

External haemorrhage*, e.g.

- Coagulopathy q.v.
- Gastrointestinal neoplasia
- · Gastrointestinal ulceration
- External parasites
- Trauma

Protein-losing enteropathy*

- · Acute gastrointestinal infection, e.g. viral
- Cardiac disease
- Inflammatory bowel disease
- Gastrointestinal neoplasia
- Gastrointestinal parasitism
- Gastrointestinal ulceration
- Lymphangiectasia
 - Intestinal inflammation
 - Intestinal neoplasia
 - Lymphangitis
 - Primary/congenital
 - · Venous hypertension
 - Protein-losing nephropathy q.v.

Sequestration

Body cavity effusion* q.v.

Increased

Artefact

Lipaemia

Haemoconcentration*

Dehydration

4.1.2 Alanine transferase

Decreased (minimal clinical significance)

Chronic liver disease Normal variation*

Nutritional deficiency

- Vitamin B6
- Zinc

Increased

Artefact

Haemolysis Lipaemia

Drugs/toxins

Barbiturates

Cimetidine

Colchicine

Cyclophosphamide

Danazol

Diazepam (C)

Glucocorticoids

Griseofulvin

Itraconazole

Ketoconazole

Methimazole Methotrexate

Metronidazole

Mexiletine

Nandrolone

NSAIDs, e.g.

- Ibuprofen
- Paracetamol
- Phenylbutazone

Oxytetracycline

Phenobarbitone

Phenylbutazone

Phenytoin

Primidone

Procainamide

Salicylates

Tetracycline

Trimethoprim/sulphonamide

Extrahepatic disease

Anoxia

Endocrine disease, e.g.

- Hyperadrenocorticism
- Hyperthyroidism (C)
- Diabetes mellitus

Inflammatory disease, e.g.

- Pancreatitis
- Muscle disease, e.g. muscular dystrophy
 (D), trauma

Hepatic disease

Cholangiohepatitis* q.v.

Cholangitis* q.v.

Chronic hepatitis* q.v.

Cirrhosis*

Copper storage disease (D)

Feline infectious peritonitis* (C)

Hepatotoxin

Lipidosis

Neoplasia, e.g.

- Hepatocellular adenocarcinoma*
- Lymphoma*

Trauma*

4.1.3 Alkaline phosphatase

Increased

Normal in young growing animals*

Artefact

Haemolysis

Hyperbilirubinaemia

Lipaemia

Drugs/toxins

Aflatoxin

Barbiturates

Cimetidine

Colchicine

Cyclophosphamide

Danazol

Diazepam (C)

Glucocorticoids

Griseofulvin

Itraconazole

Ketoconazole

Methimazole

Methotrexate

Metronidazole

Mexiletine

Nandrolone

NSAIDs, e.g.

- Ibuprofen
- Paracetamol
- Phenylbutazone

Oxytetracycline

Phenobarbitone

Phenoxy acid herbicides

Phenylbutazone

Phenytoin

Primidone

Procainamide

Salicylates

Trimethoprim/sulphonamide

Extrahepatic disease

Bile duct neoplasia

Bone disease, e.g.

- Fracture
- Osteomyelitis

Cholecystitis*

Cholelithiasis

Diabetes mellitus*

Diaphragmatic hernia*

Ehrlichiosis
Gall bladder mucocoele
Hyperadrenocorticism
Hyperthyroidism (C)*
Pancreatic neoplasia
Pancreatitis*
Right-sided congestive heart failure*
Septicaemia*

Hepatic disease

Cholangiohepatitis* q.v. Chronic hepatitis* q.v.

Cirrhosis* q.v.

Copper storage disease (D)

Feline infectious peritonitis* (C)

Hepatic lipidosis (C)

Hepatic neoplasia*, e.g.

- Haemangiosarcoma
- Hepatocellular carcinoma
- Lymphoma
- Metastatic carcinoma

4.1.4 Ammonia

Decreased (minimal clinical significance)

Drugs

Diphenhydramine

Enemas

Lactulose

Oral antibiotics, e.g.

- Aminoglycosides
- Probiotics

Increased

Artefact

Delay in sample analysis Fluoride/oxalate anticoagulants Strenuous exercise

Drugs

Ammonium salts Asparaginase Diuretics

Hepatic insufficiency

Decreased functional hepatic mass, e.g.

• Diffuse chronic hepatic disease

Decreased portal blood flow to the liver, e.g.

- Acquired portosystemic shunt
- Congenital portosystemic shunt

Miscellaneous

High-protein diet* Intestinal haemorrhage Urea cycle disorders Selective cobalamin deficiency, e.g. border collie

4.1.5 Amylase

Increased

Drugs/toxins

Azathioprine

Carbamate

Diazoxide

Frusemide

Glucocorticoids

L-Asparaginase

Metronidazole

Oestrogens

Potassium bromide

Sulphonamides

Tetracyclines

Thiazide diuretics

Intestinal disease*

Pancreatic disease*

Necrosis

Neoplasia

Pancreatic duct obstruction Pancreatitis*

Reduced glomerular filtration q.v.

Pre-renal disease* Renal disease* Post-renal disease*

4.1.6 Aspartate aminotransferase

Increased

Artefact

Haemolysis Lipaemia

Drugs/toxins

Barbiturates

Carbamate

Glucocorticoids

Griseofulvin

Ketoconazole

NSAIDs, e.g.

- Ibuprofen
- Paracetamol
- Phenobarbitone
- Phenylbutazone
- Primidone
- Salicylates

Haemolysis*

Hepatic disease* q.v.

Muscle damage*

Exercise

Inflammation

Intramuscular injection

Ischaemia

Necrosis

Neoplasia

Trauma

4.1.7 Bilirubin

Decreased (minimal clinical significance)

Artefact

Prolonged exposure to sunlight or fluorescent light

Increased (see also Jaundice)

Artefact

Haemolysis Lipaemia

Drugs/toxins

Barbiturates

Blue-green algae

Glucocorticoids

Glyphosphate

Griseofulvin

Ketoconazole

Metronidazole

Phenobarbitone

Plastic explosives

Primidone

NSAIDs, e.g.

- Ibuprofen
- Paracetamol
- Phenylbutazone

Salicylates

Pre-hepatic

Haemolysis*

Hepatic, e.g.

Diffuse hepatocellular disease Cholestatic liver disease* q.v.

Post-hepatic, e.g.

Biliary obstruction* q.v.

Miscellaneous

Bile sludging with dehydration and anorexia (C) Decreased rate of excretion (functional cholestasis) in sepsis

4.1.8 Bile acids/dynamic bile acid test

Failure to stimulate

Cholestyramine

Delayed gastric emptying

Failure to feed a sufficiently high-fat meal for bile

acid stimulation test

Malabsorption

Rapid intestinal transit time

Normal

Increased

Artefact

Haemolysis

Lipaemia

Decreased bile acid removal from portal blood

Portosystemic shunt

- Acquired
- Congenital

Decreased excretion bile acids

Hepatic disease

Cholestatic disease* q.v.

Hepatic parenchymal disease* q.v.

Secondary hepatic disease*

Drugs

Ursodeoxycholic acid

4.1.9 C-reactive protein (D)

Decreased

Severe obesity

Increased

Extreme exercise Inflammation*, e.g.

Arthritis (including IMPA)

Haemolytic anaemia, pancreatitis, SRMA

Infection, e.g.

Bordetella

E. coli

Ehrlichia

Leishmania

Parvovirus

Pyometra

Neoplasia*, e.g.

Haemangiosarcoma

Leukaemia

Lymphoma

Parturition*

Pregnancy (period of time)

Tissue trauma*

4.1.10 Cholesterol

Decreased

Artefact

Intravenous dipyrone

Drugs

Azathioprine

Oral aminoglycosides

Gastrointestinal

Hepatic insufficiency* q.v.

Maldigestion/malabsorption* q.v.

Protein-losing enteropathy* q.v.

Increased

Idiopathic hyperlipidaemia Postprandial hyperlipidaemia

Artefact

Hyperbilirubinaemia

Lipaemia

Drugs

Corticosteroids

Phenytoin

Thiazide diuretics

Breed related

Hypercholesterolaemia of the briard, rough collie and Shetland sheepdog (D)

Secondary hyperlipidaemia

Cholestatic disease* q.v.

Diabetes mellitus*

Hyperadrenocorticism

Hypothyroidism* (D)

Nephrotic syndrome

Pancreatic disease

Protein-losing nephropathy

4.1.11 Creatinine

Decreased

Poor body condition

Increased

Increased protein catabolism, e.g. heavily muscled dogs Pre-renal azotaemia*

Renal azotaemia*

- Acute kidney injury
- Chronic kidney disease

Post-renal azotaemia*

• (See Urea *q.v.*)

4.1.12 Creatine kinase

Mild increase (e.g. 2-3x upper reference interval)

Intramuscular injections*

Muscle biopsy

Muscle damage

Physical activity*

Prolonged recumbency*
Restraint*

Moderate to marked increase

Anorexia

Convulsions*

Endocrine, e.g.

Hyperadrenocorticism

Hypothyroidism (D)

Hyperthyroidism (C)

Feline lower urinary tract disease

Masticatory myopathy

Muscle damage

Myopathies

- Inherited, e.g.
 Hereditary Labrador retriever myopathy
 Muscular dystrophy
 Myotonia
- Inflammatory/infectious, e.g. Immune-mediated polymyositis Neosporosis Toxoplasmosis
- Nutritional, e.g.
 Selenium deficiency
 Vitamin E deficiency

Neuropathies

Toxins, e.g.

- Carbamate
- Lily poisoning
- Monensin
- Phenoxy acid herbicides

Thromboembolic disease

Trauma*

Tremors/shivering *q.v.*

4.1.13 Ferritin

Decreased

Iron deficiency disorders *q.v.* Acute/chronic inflammation

Portosystemic shunts Young animals

Increased

Cortisol excess (D)

Haemolysis*

Iatrogenic, e.g.

Injections, diet

Inflammation*

Liver disease*

Neoplasia*

Lymphoma

Repeated blood transfusions

4.1.14 Fibrinogen

Decreased

Artefact

- Clot
- · Incorrect anticoagulant

Disseminated intravascular coagulation*

Excessive blood loss*

Hereditary fibrinogen deficiency/abnormality

Severe hepatic insufficiency

Increased

Breed related

• Cavalier King Charles spaniels

Haemoconcentration

Inflammation*

Parturition*

Pregnancy*

Renal disease*

4.1.15 Folate

Decreased

Dietary deficiency

Proximal small intestinal disease*

Increased

Dietary/parenteral supplementation Exocrine pancreatic insufficiency Small intestinal bacterial overgrowth*

4.1.16 Fructosamine

Decreased

Hyperthyroidism (C) Insulin overdosage Persistent hypoglycaemia *q.v.*, e.g.

Insulinoma

Increased

Hypothyroidism (D)* Persistent hyperglycaemia, e.g.

Diabetes mellitus*

4.1.17 Gamma-glutamyl transferase

Increased

Artefact

Lipaemia

Drugs

Barbiturates

Glucocorticoids

Griseofulvin

Ketoconazole

NSAIDs, e.g.

- Ibuprofen
- Paracetamol
- Phenylbutazone

Phenobarbitone

Primidone

Salicylates

Extrahepatic disease

Bile duct neoplasia

Cholecystitis*

Cholelithiasis

Diabetes mellitus*

Diaphragmatic hernia*

Gall bladder mucocoele

Hyperadrenocorticism

Hyperthyroidism (C)*

Pancreatic neoplasia

Pancreatitis*

Right-sided congestive heart failure*

Septicaemia*

Hepatic disease

Cholangiohepatitis* q.v.

Chronic hepatitis* q.v.

Cirrhosis* q.v.

Copper storage disease (D)

Feline infectious peritonitis* (C)

Hepatic lipidosis (C)

Hepatic neoplasia*, e.g.

- Haemangiosarcoma
- Hepatocellular carcinoma
- Lymphoma
- Metastatic carcinoma

4.1.18 Gastrin

Increased

Antral G-cell hyperplasia

Atrophic gastritis

Chronic omeprazole administration

Gastric outlet obstruction

Gastrinoma

Hyperparathyroidism

Renal disease* q.v.

Short bowel syndrome

4.1.19 Globulins

Decreased

Normal in greyhounds

External haemorrhage, e.g.

- Coagulopathy q.v.
- Gastrointestinal neoplasia
- Gastrointestinal ulceration
- Trauma*

Hepatic insufficiency* q.v.

Neonate*

Protein-losing enteropathies* q.v.

Increased

Polyclonal

Dehydration

Infectious disease

Bacterial disease*, e.g.

- Bacterial endocarditis
 - Brucellosis
 - Pyoderma*

Fungal disease, e.g.

- Blastomycosis
 - Coccidioidomycosis
 - Histoplasmosis

Parasitic disease*, e.g.

- Demodicosis*
 - Dirofilariasis
 - Scabies*

Protozoal disease

Rickettsial disease, e.g.

- Ehrlichiosis
 - Viral disease*, e.g.
 - Feline immunodeficiency virus* (C)
 - Feline infectious peritonitis* (C)
 - Feline leukaemia virus* (C)

Immune mediated/inflammatory

Acute inflammatory response, e.g.

Hepatitis*

- Nephritis*
- Suppurative diseases*

Allergies*

Autoimmune polyarthritis

Bullous pemphigoid

Immune-mediated haemolytic anaemia

Immune-mediated thrombocytopenia

Pemphigus complex

Systemic lupus erythematosus

Neoplasia

Lymphoma

Monoclonal/oligoclonal

Cutaneous amyloidosis

Idiopathic

Macroglobulinaemia

Plasmacytic gastroenterocolitis

Infectious

Ehrlichiosis

Leishmaniasis

Neoplastic

Extramedullary plasmacytoma

Lymphoma*

Multiple myeloma

4.1.20 Glucose

Decreased

Polycythaemia q.v.

Renal disease* q.v.

Sepsis*

Artefact

Prolonged contact of serum/plasma with erythrocytes

Drugs/toxins

Anabolic steroids

Beta blockers, e.g.

Propranolol

Ethanol Ethylene glycol Insulin Salicylates Sulphonylurea Xylitol

Endocrine

Growth hormone deficiency Hypoadrenocorticism (D) Hypopituitarism Insulinoma

Hepatic

Hepatic failure

- Cirrhosis*
- Hepatic necrosis, e.g.
 - Infection
 - Toxin
 - Trauma
- Portosystemic shunts (acquired or congenital)

Idiopathic

Juvenile

Neonatal

Neoplastic*

Hepatic leiomyoma/leiomyosarcoma Hepatic/splenic haemangiosarcoma Hepatocellular carcinoma Pancreatic

Substrate deficiency

Glycogen storage disease Hunting dog hypoglycaemia Juvenile hypoglycaemia Neonatal hypoglycaemia Pregnancy hypoglycaemia Reduced dietary intake of glyc

Reduced dietary intake of glucose or its precursors, e.g.

Severe malnutrition

Sepsis

Increased

Excitement

Pancreatitis* (and other pancreatic diseases)

Parenteral nutrition

Postprandial

Renal insufficiency* q.v.

Stress hyperglycaemia*

Supplementation, e.g. IV fluids

Artefact

Azotaemia

Drugs/toxins

Daffodil

Ethylene glycol

Glucagon

Glucocorticoids

Hydrochlorothiazide

Ketamine

Megestrol acetate

Oestrogens

Phenytoin

Progestagens

Snake venom

Thiazide diuretics

Xylazine (and other alpha-2 agents)

Endocrine

Acromegaly

Diabetes mellitus*

Hyperadrenocorticism

Hyperpituitarism

Hyperthyroidism

Pheochromocytoma

Progesterone induced*, e.g.

Dioestrus

Lactation

Pregnancy

4.1.21 Iron

Decreased

Acute phase inflammatory reactions* Chronic inflammatory disease* Hypothyroidism (D) Portosystemic shunt Renal disease* *q.v.*

Chronic external blood loss*, e.g.

Chronically bleeding external masses*

External parasites, e.g.

Heavy flea burden*

Gastrointestinal*, e.g.

- Clotting disorder q.v.
- Neoplasia
- Parasitism
- Ulceration

Decreased intake

Milk-only diet in immature animals

Neoplasia

Lymphoma

Osteosarcoma

Increased

Haemolysis* *q.v.*Ingestion of iron supplements/parenteral overdose Liver disease* *q.v.*Refractory anaemia

4.1.22 Lactate dehydrogenase

Increased

Artefact

Haemolysis Sample ageing

Cardiac muscle disorders

Degeneration

Ischaemia

- Aortic thromboembolism*
- · Bacterial endocarditis
- Dirofilariasis
- Myocardial infarction

Neoplasia

Trauma

Miscellaneous

Hepatocellular damage* *q.v.* Hyperthyroidism* (C)

Respiratory disease*

Necrosis

Pulmonary thromboembolism

Skeletal muscle disorders

Exertional rhabdomyolysis

Neoplasia*

Seizures*

Trauma*

Endocrine

Hyperadrenocorticism* Hypothyroidism* (D)

Inflammatory/infectious

Bacterial*

Protozoal*

Idiopathic

Idiopathic polymyositis Masticatory myopathy

Inherited myopathies

Hereditary Labrador retriever myopathy Muscular dystrophy Myotonia

Metabolic

Glycogen storage diseases Mitochondrial myopathy

Nutritional

Vitamin E deficiency

Vascular

Aortic thromboembolism* (C)

4.1.23 Lipase

Decreased

Artefact

Haemolysis Hyperbilirubinaemia Lipaemia

Increased

Drugs

Azathioprine

Diazoxide

Frusemide

Glucocorticoids

L-Asparaginase

Metronidazole

Oestrogens

Potassium bromide

Sulphonamides

Tetracyclines

Thiazide diuretics

Pancreatic disease

Necrosis

Neoplasia

Pancreatic duct obstruction

Pancreatitis*

Reduced glomerular filtration

Pre-renal disease* q.v.

Renal disease* q.v.

Post-renal disease* q.v.

4.1.24 Triglycerides

Decreased

Artefact

• Intravenous dipyrone Hyperthyroidism* (C)

Protein-losing enteropathy*

Drugs

Ascorbic acid therapy

Increased

Artefact

Hyperbilirubinaemia

Postprandial*

Drugs

Glucocorticoids

Megestrol acetate

Primary/idiopathic hyperlipidaemia

Familial hyperchylomicronaemia in the cat

Idiopathic hypertriglyceridaemia of the miniature schnauzer

Idiopathic hypertriglyceridaemia

Lipoprotein lipase deficiency (C)

Transient hyperlipidaemia and anaemia in kittens (C)

Secondary hyperlipidaemia

Acute pancreatitis*

Cholestasis*

Diabetes mellitus*

Hepatic insufficiency* q.v.

Hyperadrenocorticism

Hypothyroidism* (D)

Nephrotic syndrome

4.1.25 Troponin

Increased

Cardiac disease, e.g.

Aortic stenosis

Arrhythmogenic right ventricular cardiomyopathy

Bradyarrhythmias

Dilated cardiomyopathy

Mitral valve disease

Pericardial effusion

Pulmonary hypertension

Pulmonic stenosis

Drugs/toxins

Albuterol

Anaesthesia/sedation

Benfluorex

Doxorubicin

Oleander

Phenazopyridine

Phenylpropanolamine

Ractopamine

Viper envenomation

Infections

Babesiosis

Dirofilariasis

Ehrlichiosis

Leishmaniasis

Pyometra

Miscellaneous

Anaemia

Azotaemia/renal disease

Brachycephalic obstructive airway syndrome

Gastric dilatation and volvulus

Heat stroke

Hyperadrenocorticism

Hypoadrenocorticism

Neoplasia, e.g. lymphoma Pancreatitis Steroid-responsive meningitis-arteritis

Physiological

Breed variation (greyhounds) High-intensity exercise Old age

4.1.26 Trypsin-like immunoreactivity

Decreased

Exocrine pancreatic insufficiency Very-low-protein diet

Increased

High-protein diet Pancreatitis* Post-pancreatic obstruction Reduced glomerular filtration rate

4.1.27 Urea

Increased

Pre-renal

Dehydration*
Gastrointestinal bleeding
Heart failure*
High-protein diet*
Hypoadrenocorticism (D)
Increased catabolic state, e.g.
• Fever*
Shock* q.v.
Tetracyclines

Renal

Acute kidney injury
Diabetes mellitus*

Drugs/toxins

- ACE inhibitors
- Anaesthetics
- · Antibiotics, e.g.
 - Aminoglycosides
 - Amphotericin B
 - Cephalosporins
 - Tetracyclines
- Borax
- Calcium edetate
- Chemotherapeutics, e.g.
 - Cisplatin
- Cimetidine
- Corticosteroids
- Dipyrone (metamizole)
- Heavy metals, e.g.
 - Arsenic
 - Lead
 - Mercury
- Hymenoptera stings
- Intravenous radiographic contrast agents
- Iron/iron salts

Lily ingestion (C)

Melamine toxicity

Methylene blue

- NSAIDs
- Organic compounds, e.g.
 - Ethylene glycol
 - Herbicides
 - Pesticides
- Pigments, e.g.
 - Myoglobin/haemoglobin
 - Paraquat
 - Plastic explosives
 - Salt
 - Snake venom

Hypercalcaemia

Immune-mediated diseases, e.g.

- Glomerulonephritis
- Systemic lupus erythematosus

Infection e.g.

- Leptospirosis
- Pyelonephritis

Ischaemia

- Decreased cardiac output*
- Extensive burns
- Hyper-/hypothermia* *q.v.*
- Prolonged anaesthesia*
- Renal vessel thrombosis
- Shock, e.g.
 - Hypovolaemia
 - Sepsis*
- Transfusion reactions
- Trauma*

Urinary tract obstruction*

Chronic kidney disease, e.g.

Subsequent to acute kidney injury Glomerulonephritis* Interstitial nephritis* Nephrotoxins

Post-renal

Bladder obstruction*, e.g.

- Blood clot
- Neoplasia
- Polyp*
- Urolith*

Bladder trauma

Ureteral obstruction (may need to be bilateral

to cause azotaemia)

Urethral obstruction, e.g.

- Neoplasia
- Urolith

Urethral trauma

Uroabdomen

Decreased

Normal in neonates*

Dialysis/over-hydration

Diuresis, e.g.

• Fluid and drug therapy*

Liver insufficiency, e.g.

- Cirrhosis
- Portosystemic shunt*

Low-protein diet/malnutrition*

Polyuria q.v., e.g.

- Diabetes insipidus
- Hyperadrenocorticism

Pregnancy*

Urea cycle enzyme deficiency

4.1.28 Vitamin B12 (cobalamin)

Decreased

Exocrine pancreatic insufficiency Hepatic lipidosis (C) Inflammatory biliary tract disorders Inherited defect of absorption, e.g. border collie Intestinal mucosal disease*

Increased

Vitamin B12 supplementation

4.1.29 Zinc

Decreased

Decreased dietary intake Zinc-responsive dermatosis

Increased

Ingestion of zinc-containing objects, e.g.

Coins

4.2 Haematological findings

4.2.1 Regenerative anaemia

HAEMORRHAGE

Internal

Bleeding tumour* Coagulopathy *q.v.* Traumatic injury*

External

Bleeding tumour*
Coagulopathy q.v.
Epistaxis q.v.
Haematemesis q.v.
Haematuria q.v.
Intestinal blood loss q.v.
Traumatic injury*

Parasitism*

Ancylostoma spp. Fleas

Lice

Ticks

Uncinaria spp.

HAEMOLYSIS

Acquired defects of red cells

Hypophosphataemia

Chemical damage

Copper Cyclic hydrocarbons Heavy metals Propylene glycol

Oxidative damage (Heinz body anaemia)

Benzocaine toxicity
DL-methionine toxicity

Garlic toxicity

Glycol toxicity

High doses of vitamin K

Lymphoma

Metabolic disease

- Diabetes mellitus*
- Hyperthyroidism* (C)
- Renal disease*

Methylene blue

Onion toxicity

Paracetamol toxicity

Phenazopyridine (C)

Phenolic compound toxicity, e.g.

Mothballs

Propylene toxicity

Vitamin K3 toxicity

Zinc toxicity

Genetic defects of red cells

Feline porphyria

Hereditary elliptocytosis

Hereditary haemolysis in Abyssinian and Somali cats (C)

Hereditary stomatocytosis

Methaemoglobin reductase deficiency

Non-spherocytic haemolytic anaemia of beagles (D)

Phosphofructokinase deficiency (D)

Pyruvate kinase deficiency

Immune mediated

Primary (autoimmune haemolytic anaemia)*

Drugs/toxins

Anti-arrhythmics

Anticonvulsants

Bee envenomation

Cephalosporins

Chlorpromazine

Copper

Dipyrone

Levamisole

Methimazole

Methylene blue

NSAIDs, e.g.

Paracetamol

Penicillins

Propylthiouracil

Quinidine

Trimethoprim/sulphonamide

Immunological

Anti-lymphocyte globulin therapy Neonatal isoerythrolysis Systemic lupus erythematosus Transfusion reactions

Infectious

Ancylostoma spp.
Babesiosis
Cytauxzoonosis
Dirofilariasis
Ehrlichiosis
Feline leukaemia virus* (C)
Haemobartonellosis
Leishmaniasis
Leptospirosis*
Trypanosomiasis (D)

Neoplastic

Haemangiosarcoma

Lymphoproliferative disease, e.g.

Leukaemia

Uncinaria spp.

Lymphoma*

Mechanical injury of red cells

Dirofilariasis
Disseminated intravascular coagulation*
Enlarged spleen
Glomerulonephritis
Haemolytic–uraemic syndrome

Neoplasia causing microangiopathic haemolytic anaemia, e.g.

• Splenic haemangiosarcoma*

Patent ductus arteriosus

Vasculitis

4.2.2 Poorly/non-regenerative anaemia

Normal

Young animals

Acute, pre-regenerative anaemia

Anaemia of chronic disease/associated with systemic disease

Chronic inflammatory disease*

Chronic kidney disease* q.v.

Cytauxzoonosis

Feline immunodeficiency virus* (C)

Feline infectious peritonitis* (C)

Feline leukaemia virus* (C)

Hepatic disease* q.v.

Histoplasmosis

Hypoadrenocorticism (D)

Hypothyroidism* (D)

Leishmaniasis

Malignant neoplasia

Trypanosomiasis (D)

Bone marrow disorders - reduced red cell production

Aplastic anaemia

Drugs/toxins

- Albendazole
- Anti-cancer chemotherapeutics
- Chloramphenicol
- Cyclic hydrocarbons
- DDT
- Diazoxide
- Oestrogens
- Phenylbutazone
- Sulpha drugs

- Trichloroethylene
- Trimethoprim/sulphadiazine

Hyperoestrogenism, e.g.

- Iatrogenic
- Sertoli cell tumour

Infection

- Ehrlichiosis
- Viruses, e.g.
 - Feline leukaemia virus* (C)
 - Parvovirus*

Irradiation

Haematopoietic neoplasia

Lymphoproliferative

- Lymphoid leukaemia
 - Acute lymphoblastic leukaemia
 - Chronic lymphocytic leukaemia
- Granular lymphocytic leukaemia
- Lymphoma
- Multiple myeloma

Myeloproliferative

- Acute monocytic leukaemia
- Acute myeloid leukaemia
- Acute myelomonocytic leukaemia
- Chronic myeloid/granulocytic leukaemia

Myelodysplasia

Primary

Secondary

- Cobalamin or folate deficiencies
- Drug-induced toxicosis
- Immune-mediated diseases
- Neoplastic diseases

Myelophthisis

Granulomatous inflammation

- Fungi
- Histoplasmosis
- Tuberculosis

Myelofibrosis

- Idiopathic
- Lymphoproliferative
- Myeloproliferative
- · Other types of neoplasia
- Prolonged marrow stimulation, e.g.
 - Chronic haemolytic anaemia
- Radiation

Neoplasia

- Leukaemia
- Metastatic neoplasia, e.g.
 - Carcinoma
 - Melanoma

Pure red cell aplasia

Feline leukaemia virus* (C)

Immune mediated

Defects in haemoglobin synthesis

Copper deficiency Erythropoietic porphyria Hereditary porphyria Iron deficiency anaemia *q.v.* Lead poisoning Vitamin B6 deficiency

Defects in nucleotide synthesis

Nutrient deficiencies

Cobalt

Folic acid

Vitamin B12

Erythropoietin deficiency

Chronic kidney disease* q.v.

Iron deficiency

Inadequate intake

Dietary deficiency, e.g.

• Milk diet

Inadequate stores

Neonates*

Chronic external haemorrhage

Bleeding tumour*

Coagulopathy q.v.

Epistaxis q.v.

Haematemesis q.v.

Haematuria q.v.

Intestinal blood loss q.v.

Parasitism*

- Ancylostoma spp.
- Fleas
- Lice
- Ticks
- · Uncinaria spp.

Rapid erythropoiesis

Erythropoietin therapy of anaemia

Neonates

Repeat phlebotomy

Blood donors*

Frequent blood sampling of small patients*

Therapeutic phlebotomy, e.g.

Polycythaemia

Traumatic injury

Sideroblastic anaemia

4.2.3 Polycythaemia

Relative polycythaemia

Dehydration*

Burns

Diarrhoea

Heat stroke

Polyuria without matching polydipsia

Vomiting Water deprivation

Splenic contraction*

Excitement

Exercise

Stress

Primary polycythaemia

Myeloproliferative disease (polycythaemia vera/primary erythrocytosis)

Secondary polycythaemia

Physiologically appropriate

Altitude

Chronic respiratory disease, e.g.

- Feline asthma*
- Interstitial fibrosis
- Neoplasia*

Haemoglobinopathies

Right-to-left congenital cardiac shunt, e.g.

- Atrial septal defect with pulmonic stenosis
- Pulmonary arteriovenous fistula
- Reverse-shunting patent ductus arteriosus
- Reverse-shunting ventricular septal defect
- · Tetralogy of Fallot

Physiologically inappropriate

Extra-renal neoplasia

- Caecal leiomyosarcoma
- · Hepatic carcinoma
- Hepatoblastoma
- Nasal fibrosarcoma

Hyperadrenocorticism

Hyperthyroidism* (C)

Non-neoplastic renal diseases

- Fatty infiltration of the kidney
- Hydronephrosis
- Renal capsular effusion
- Renal cysts

Renal neoplasia

- Adenocarcinoma
- Fibrosarcoma
- Lymphoma
- Nephroblastoma

Toxins, e.g.

Carbamate

4.2.4 Thrombocytopenia

Decreased production

Bone marrow neoplasia, e.g. Lymphoproliferative disease

Metastatic disease

Myeloproliferative disease

Drugs

Albendazole

Antibiotics, e.g.

- Chloramphenicol
- Trimethoprim/sulphonamide

Chemotherapeutic/cytotoxic drugs

Chloramphenicol

Diazoxide

Griseofulvin

Methimazole Oestrogens

Phenylbutazone

Phenytoin

Propylthiouracil

Ribavirin

Thiazide diuretics

Infection

Bacterial

Endotoxaemia*

Fungal

- Blastomycosis
- Coccidioidomycosis

- Cryptococcosis
- Histoplasmosis

Parasitic

- Cytauxzoonosis
- Hepatozoonosis

Rickettsial

- Ehrlichiosis
- Rocky Mountain spotted fever

Viral

- Canine distemper virus* (D)
- Canine parvovirus* (D)
- Feline immunodeficiency virus* (C)
- Feline infectious enteritis* (C)
- Feline leukaemia virus* (C)

Miscellaneous

Haemophagocytic syndrome

Myelofibrosis

- Idiopathic
- Neoplasia, e.g.
 - Myeloproliferative disease
- Prolonged marrow stimulation
- Secondary to sepsis

Immune-mediated destruction

Primary immune-mediated thrombocytopenia Concurrent immune-mediated thrombocytopenia and immune-mediated haemolytic anaemia (Evans syndrome)

Drugs/toxins

Cephalosporins

Chlorpromazine

Colchicine

Cytotoxic drugs

Dipyrone

Heparin

Levamisole

Methimazole

Modified live vaccines

NSAIDs

Oestrogens

Penicillins

Propylthiouracil

Quinidine

Trimethoprim/sulphonamide

Secondary immune-mediated thrombocytopenia

Infections

- Babesiosis
- Dirofilariasis
- Ehrlichiosis
- Feline immunodeficiency virus* (C)
- Feline leukaemia virus* (C)
- Leptospirosis

Neonatal alloimmune thrombocytopenia

Neoplasia, e.g.

- Lymphoma*
- Solid tumours

Systemic lupus erythematosus

Transfusion reactions

Increased utilisation/non-immune destruction

Disseminated intravascular coagulation

Haemolytic-uraemic syndrome

Microangiopathic destruction

Septicaemia

Snake venom

Chronic/severe haemorrhage

Coagulopathy

Neoplasia

Vasculitis

Canine adenovirus-1

Canine herpesvirus

Dirofilariasis

Ehrlichiosis

Feline infectious peritonitis* (C)

Neoplasia

Polyarteritis nodosa

Rocky Mountain spotted fever Septicaemia Systemic lupus erythematosus

Sequestration

Hepatomegaly* q.v.

Sepsis*

Splenomegaly* q.v.

- Chronic infection*
- Haematoma*
- Immune-mediated haemolytic anaemia*
- Neoplasia
 - Haemangioma
 - Haemangiosarcoma
 - Mast cell
 - Metastatic
- Portal hypertension
- Splenic torsion
- Splenitis
- Systemic lupus erythematosus

4.2.5 Thrombocytosis

Normal

May be normal in older animals

Splenic contraction

Excitement*

Exercise*

Stress*

Post splenectomy

Primary

Essential thrombocytosis

Reactive

Bradycardia q.v.

Chronic haemorrhage* q.v.

Fractures*

Gastrointestinal disease* q.v.

Hyperadrenocorticism

Hypercoagulability/disseminated intravascular coagulation

Hyperviscosity syndromes

Hypotension*

Infection

Inflammation/immune-mediated disease*

Metastatic carcinoma

Non-specific bone marrow stimulation

Paraneoplastic

- Bronchoalveolar carcinoma
- Chronic myeloid leukaemia
- Gingival carcinoma
- Metastatic squamous cell carcinoma
- Osteosarcoma

Polycythaemia q.v.

Shock* q.v.

Rebound

Secondary to resolution of previous thrombocytopenia

4.2.6 Neutrophilia

Immunodeficiency syndromes, e.g.

Canine leukocyte adhesion deficiency (D) Weimaraner immunodeficiency (D)

Inflammatory conditions - acute or chronic*, e.g.

Chemical exposure

Immune-mediated disease*, e.g.

Haemolytic anaemia*

Polyarthritis

Systemic lupus erythematosus

Infections

Bacterial*

Fungal

Protozoal

Viral*

Neoplasia

Necrosis*

Secondary bacterial infection*

Ulceration*

Tissue necrosis, e.g.

Large tumours*

Pancreatitis*

Pansteatitis

Toxins

Endotoxin*

Snakebite

Physiological

Stress

- Adrenaline release
- Corticosteroid (endogenous or exogenous)

Primary

Myeloproliferative disease

- · Acute myeloid leukaemia
- · Chronic myeloid leukaemia

Reactive

Haemolysis* q.v.

Haemorrhage*

Neoplasia*

Oestrogen toxicity

Recent surgery*

Trauma*

4.2.7 Neutropenia

Decreased neutrophil survival

Haemophagocytic syndromes Immune-mediated neutropenia (D)

Parvovirus enteritis*

Sepsis/endotoxaemia*, e.g.

Acute salmonellosis*

Aspiration pneumonia*

Peritonitis*

Pvometra*

Pyothorax*

Reduced neutrophil release

Trapped neutrophil syndrome in border collie (D)

Reduced neutrophil production

Canine cyclic haematopoiesis

Acute viral infections*

Canine parvovirus* (D)

Feline immunodeficiency virus* (C)

Feline leukaemia virus* (C)

Feline panleukopenia virus* (C)

Infectious canine hepatitis* (D)

Bone marrow disease

Aplastic anaemia

- Ehrlichiosis
- Idiopathic
- Toxicity
 - Oestrogen
 - Phenylbutazone

Bone marrow neoplasia, e.g.

- Lymphoproliferative disease
- Metastatic neoplasia
- Myeloproliferative disease

Disseminated granulomatous disease

Immune-mediated destruction of neutrophil precursors

Myelodysplasia

Myelophthisis

Bone marrow suppression

Drugs

- Albendazole
- Azathioprine
- Busulphan

- Carbimazole
- Carboplatin
- Chlorambucil
- Chloramphenicol
- Cyclophosphamide
- Cytarabine
- Diazoxide
- Doxorubicin
- Frusemide
- Griseofulvin
- Hydroxyurea
- Lomustine
- Melphalan
- Methimazole
- Oestrogen
- Phenobarbitone
- Phenylbutazone
- Trimethoprim/sulphonamide (C)
- Vinblastine

Oestrogen toxicity, e.g.

- Iatrogenic
- Sertoli cell tumour

Radiation therapy

4.2.8 Lymphocytosis

Miscellaneous

Chronic infection*

Hypoadrenocorticism (D)

Recent vaccination*

Neoplasia

Leukaemia

- · Acute lymphoblastic leukaemia
- Chronic lymphocytic leukaemia

Stage V lymphoma

Physiological*

Excitement*

Exercise*

Immature animal*

Post vaccination*

Stress (adrenaline response)*

4.2.9 Lymphopenia

Drugs

Albendazole

Azathioprine

Busulphan

Carbimazole

Carboplatin

Chlorambucil

Chloramphenicol

Corticosteroids

Cyclophosphamide

Cyclosporin

Cytarabine

Diazoxide

Doxorubicin

Frusemide

Griseofulvin

Hydroxyurea

Lomustine

Melphalan

Phenylbutazone

Trimethoprim/sulphonamide (C)

Vinblastine

Endocrine

Hyperadrenocorticism

Immunodeficiency syndromes, e.g.

Basset hound Cardigan Welsh corgi Jack Russell terrier

Infectious/inflammatory

Septicaemia*

Viral infections, e.g.

Canine distemper virus* (D)

Coronavirus*

Feline immunodeficiency virus* (C)

Feline leukaemia virus* (C)

Infectious canine hepatitis* (D)

Parvovirus

Loss of lymph

Chylothorax Lymphangiectasia Protein-losing enteropathy* *q.v.*

Physiological

Stress (corticosteroid response)*

4.2.10 Monocytosis

Chronic inflammation

Granulomatous inflammation Pyogranulomatous inflammation Suppuration* Tissue necrosis*

Corticosteroids

Hyperadrenocorticism Iatrogenic Stress

Infections

Fungal, e.g. Coccidioidomycosis

Parasitic, e.g. Leishmaniasis

Viral, e.g.

Feline immunodeficiency virus* (C)

Bacterial e.g. Rickettsial

Haemolytic/haemorrhagic diseases* q.v.

Immune-mediated disease, e.g.

Immune-mediated haemolytic anaemia* Immune-mediated polyarthritis

Neoplasia

Monocytic leukaemia Myelomonocytic leukaemia Tumours with necrotic centres*

4.2.11 Eosinophilia

Hormonal

Hypoadrenocorticism Oestrus in some bitches

Immune mediated

Allergies *

- Atopy*
- Feline asthma* (C)
- Flea allergy*
- Food allergies*

Canine panosteitis (D)

Eosinophilic bronchopneumopathy (D)

Eosinophilic gastroenteritis*

Eosinophilic granuloma complex*

Eosinophilic myositis

Feline hypereosinophilic syndrome (C)

Pemphigus foliaceus

Infection

Bacterial*

Fungal, e.g. Aspergillosis Cryptococcosis

Parasites*, e.g.

Aelurostrongylus abstrusus Ancylostoma spp. Angiostrongylus vasorum Capillaria aerophila Dirofilaria immitis Oslerus osleri Pneumonyssoides caninum Trichuris vulpis

Neoplastic

Eosinophilic leukaemia

Tumour-associated eosinophilia
Fibrosarcoma
Myeloproliferative disease
Lymphoma
Mast cell tumour
Mucinous carcinomas
Transitional cell carcinoma

4.2.12 Eosinopenia

Acute infection*
Acute inflammation*
Bone marrow aplasia/hypoplasia
Glucocorticoid therapy*
Hyperadrenocorticism
Stress*

4.2.13 Mastocytemia

Disseminated mast cell neoplasia Mast cell leukaemia Mast cell tumour*, e.g.

- Intestinal tract
- Spleen

Severe inflammation

4.2.14 Basophilia

Chronic granulocytic leukaemia Hyperlipoproteinaemia Hypersensitivity reactions Lymphoma Lymphomatoid granulomatosis Lymphoplasmacytic gastroenteritis Mast cell tumours* Parasitism, especially dirofilariasis

4.2.15 Increased buccal mucosal bleeding time (disorders of primary haemostasis)

Thrombocytopenia *q.v.* Thrombocytopathia

Acquired

Chronic anaemia

Disseminated intravascular coagulation

Drugs/toxins

- Antibiotics
- Barbiturates
- Calcium channel blockers
- Colloids
- Heparin
- Hetastarch
- NSAIDs, especially aspirin
- Propranolol
- Theophylline
- Snake venom

Hepatic disease*

Infection

- Ehrlichiosis
- Feline leukaemia virus* (C)

Neoplasia*, e.g.

- Lymphocytic leukaemia
- Multiple myeloma

Paraproteinaemias

- Benign macroglobulinaemia
- Polyclonal gammopathies

Uraemia* q.v.

Inherited

Basset hound thrombopathia (D)
Canine thrombasthenic thrombopathia of otter hounds and great pyrenees (D)
Chédiak–Higashi syndrome (C)
Cocker spaniel bleeding disorders (D)
Cyclic haematopoiesis (grey collie)
Glanzmann's thrombasthenia (D)
von Willebrand's disease* (D)

4.2.16 Increased prothrombin time (disorders of extrinsic and common pathways)

Artefact

Deficiency of factor II, V, VII or X Disseminated intravascular coagulation Hypo- or dysfibrinogenaemia Liver disease*, e.g.

- Portosystemic shunt
- Vitamin K antagonism*

4.2.17 Increased partial thromboplastin time or activated clotting time (disorders of intrinsic and common pathways)

Colloid administration
Disseminated intravascular coagulation
Factor II, V, X, XI or XII deficiency
Haemophilia A (factor VIII deficiency)
Haemorphilia B (factor IX deficiency)
Haemorrhage
Hypo- or dysfibrinogenaemia

Liver disease* q.v. Vitamin K antagonism* Vitamin K-dependent coagulopathy

4.2.18 Increased fibrin degradation products

Disseminated intravascular coagulation Hepatic disease* *q.v.* Hyperfibrinogenolysis Internal haemorrhage Thrombosis* Vitamin K antagonism*

4.2.19 Decreased fibrinogen levels

Artefact

- Clot
- Incorrect anticoagulant

Disseminated intravascular coagulation* Excessive blood loss* Hereditary fibrinogen deficiency Immune-mediated haemolytic anaemia Severe hepatic deficiency

4.2.20 Decreased antithrombin III levels

Heparin therapy Hepatic disease* *q.v.* Hypercoagulability, e.g.

• Disseminated intravascular coagulation Protein-losing enteropathy* *q.v.*, e.g.

Parvovirus enteritis

Protein-losing nephropathy* q.v.

4.3 Electrolyte and blood gas findings

4.3.1 Total calcium

Decreased

Acute pancreatitis*

Acute kidney injury q.v.

Canine distemper virus* (D)

Chronic kidney disease* q.v.

Exocrine pancreatic insufficiency (D)

Hypoalbuminaemia* q.v.

Hypomagnesaemia q.v.

Hypoproteinaemia

Hypovitaminosis D

Iatrogenic (post thyroidectomy)*

Idiopathic

Infarction of parathyroid gland adenomas

Intestinal malabsorption*

Lactational hypocalcaemia

Medullary carcinoma of the thyroid (C-cell tumour)

Nutritional secondary hyperparathyroidism

Primary hypoparathyroidism

Puerperal tetany (eclampsia)*

Rhabdomyolysis

Tumour lysis syndrome

Artefact

Haemolysis

Incorrect anticoagulant

Drugs/toxins

Anticonvulsants

Calcitonin therapy

EDTA

Ethylene glycol

Frusemide

Glucagon

Intravenous phosphate administration

Mithramycin
Oxalate toxicity
Pamidronate
Phosphate-containing enemas
Sodium bicarbonate
Transfusion using citrated blood

Increased

Acute kidney injury q.v.

Artefact

Lipaemia

Chronic kidney disease* q.v.

Dehydration/hyperalbuminaemia* q.v.

Granulomatous disease

Hypervitaminosis A

Hypervitaminosis D

Hypoadrenocorticism (D)

Idiopathic hypercalcaemia of cats (C)

Physiological

- Postprandial
- Young dog*

Tertiary hyperparathyroidism

Drugs/toxins

Anabolic steroids

Calcipotriol

Cholecalciferol rodenticides

Hydralazine

Jasmine

Oestrogen

Oral or intravenous calcium

Oral phosphate binders

Paracetamol

Parenteral calcium administration

Progesterone

Testosterone

Trilostane

Vitamin D analogues

Hypercalcaemia of malignancy

Carcinoma

- Bronchogenic
- Mammary
- Nasal cavity
- Prostatic
- Squamous cell
- Thyroid

Haematological malignancies

- Lymphoma*
- Multiple myeloma
- Myeloproliferative disease

Metastatic or primary bone neoplasia q.v.

Pseudohyperparathyroidism

- Apocrine gland adenocarcinoma*
- Lymphoma*

Primary hyperparathyroidism

Hereditary neonatal hyperparathyroidism Multiple endocrine neoplasia Parathyroid gland adenoma Parathyroid gland carcinoma Primary hyperplasia of the parathyroid glands

Skeletal lesions

Bone metastases Hypertrophic osteodystrophy Osteomyelitis Systemic mycoses

4.3.2 Chloride

Note: Most causes of hyperchloraemia also cause concurrent hypernatraemia, and if changes are proportionate, it is usually easier to look for causes of hypernatraemia. Formulae to correct chloride to account for sodium changes have been suggested as follows:

```
\begin{aligned} & Dogs\colon Cl^-(corrected) = Cl^-(measured) \times [146 \, / \, Na^+(measured)] \\ & Reference\ ranges\colon \quad Cl^-(measured) = 100 - 116 mmol \, / \, l \\ & \quad Cl^-(corrected) = 107 - 113 mmol \, / \, l \\ & Cats\colon Cl^-(corrected) = Cl^-(measured) \times [156 \, / \, Na^+(measured)] \\ & Reference\ ranges\colon \quad Cl^-(measured) = 100 - 124 mmol \, / \, l \\ & \quad Cl^-(corrected) = 117 - 123 mmol \, / \, l \end{aligned}
```

Note: Reference ranges may vary depending on the instruments used to perform the measurement.

Decreased

Artefact

Lipaemia

Corrected hypochloraemia

Chronic respiratory acidosis q.v.

Exercise*

Hyperadrenocorticism

Vomiting*

Drugs

- Frusemide
- Sodium bicarbonate
- Thiazide diuretics

Increased

Artefact

Hypotonic water loss

Lipaemia

Potassium bromide therapy

Pure water loss

Corrected hyperchloraemia

Chronic respiratory alkalosis q.v.

Diabetes mellitus*

Drugs/toxins

- Acetazolamide
- · Fluid therapy with saline

- Potassium chloride supplementation
- Salt poisoning
- Spironolactone
- Total parenteral nutrition
- Urinary acidifiers, e.g. ammonium chloride

Fanconi syndrome Hyperaldosteronism Hypoadrenocorticism (D) Renal disease* q.v. Renal tubular acidosis Small intestinal diarrhoea*

4.3.3 Magnesium

Decreased

Acute pancreatitis* Cholestasis* q.v. Decreased intake Hypercalcaemia q.v. Hypokalaemia q.v.

Artefact

Haemolysis

Drugs/iatrogenic

Amino acids Aminoglycosides

Blood transfusion

Cisplatin

Digitalis

Diuretics, e.g.

- Frusemide
- TruscillidesThiazides

Haemodialysis

Insulin

Nasogastric suction

Pamidronate

Peritoneal dialysis

Prolonged intravenous fluid therapy Total parenteral nutrition

Endocrine

Diabetic ketoacidosis* Hyperthyroidism* (C) Hypoparathyroidism (ionised hypomagnesaemia) Primary hyperaldosteronism Primary hyperparathyroidism

Intestinal loss

Bowel resection Enteropathies*

Redistribution

Hypothermia* q.v. Sepsis* Trauma*

Renal

Acute tubular necrosis Drug-induced tubular injury

- Aminoglycosides
- Cisplatin

Post-obstructive diuresis*

Increased

Artefact

• Sample haemolysis

Drugs

- Oral antacids
- Parenteral administration
- Progesterones

Haemolysis

Hypoadrenocorticism (D)

Obstructive uropathy*

Renal disease* q.v.

Thoracic neoplasia/pleural effusion (C)

4.3.4 Potassium

Decreased

Diet

Decreased dietary intake High-protein acidifying diets

Drugs/iatrogenic

Albuterol

Amphotericin B

Catecholamines

Dialysis

Diuretics, e.g.

- Frusemide
- Mineralocorticoids
- Penicillins
- Thiazides

Fludrocortisone

Frusemide

Glucose

Hydrochlorothiazide

Inadequate potassium supplementation during

fluid therapy

Insulin

Terbutaline

Total parenteral nutrition

Endocrine

Diabetes mellitus*

Hyperadrenocorticism

Mineralocorticoid excess

Primary hyperaldosteronism

Increased loss

Chronic kidney disease* q.v.

Diuresis, e.g.

- Diabetes mellitus*
- Diuretic therapy

Gastrointestinal loss (vomiting, diarrhoea)* q.v.

Post-obstructive diuresis*
Renal tubular acidosis

Translocation

Alkalosis

Hypothermia* q.v.

Idiopathic hypokalaemia of Burmese cats (C)

Increased

Artefact/pseudohyperkalaemia

Contamination of sample with potassium EDTA

Haemolysis (especially Japanese Akita)

Marked leukocytosis/thrombocytosis with delay

in separating serum

Thrombocytosis

Decreased urinary excretion

Acute kidney injury q.v.

Repeated drainage of effusions, e.g. chylothorax

Gastrointestinal diseases*

- Perforated duodenal ulcer
- Salmonellosis
- Trichuriasis

Hyporeninaemic hypoaldosteronism

Post-renal failure* q.v.

Ruptured bladder/uroperitoneum

Hypoadrenocorticism (D)

Drugs/toxins

ACE inhibitors

Amiloride

Beta blockers

Cardiac glycosides

Ethylene glycol

NSÁIDs

Oral or parenteral potassium supplementation

Paraquat

Prostaglandin inhibitors

Salbutamol

Spironolactone

Succinylcholine Tricyclic antidepressants Trilostane

Increased intake

Iatrogenic

Translocation

Acidosis *q.v.*

Diabetes mellitus/diabetic ketoacidosis*

Reperfusion injury, e.g.

- Aortic thromboembolism
- Crush

Tumour lysis syndrome

4.3.5 Phosphate

Decreased

Decreased dietary intake
Decreased intestinal absorption
Diarrhoea* q.v.
Eclampsia*
Hypercalcaemia of malignancy*
Hypothermia* q.v.
Hypovitaminosis D
Increased urinary excretion*
Metabolic acidosis* q.v.
Renal tubular defects, e.g.
• Fanconi syndrome
Respiratory alkalosis q.v.

Drugs/iatrogenic

Vomiting* q.v.

Bicarbonate
Diuretics
Fluid therapy
Glucocorticoids
Glucose

Insulin

Pamidronate Phosphate-binding antacids Salicylates Vitamin D deficiency

Endocrine disorders

Diabetic ketoacidosis* Hyperadrenocorticism Hyperinsulinism/insulinoma Primary hyperparathyroidism

Increased

Acute kidney injury or chronic kidney disease* q.v.
Haemolysis* q.v.
Metabolic acidosis* q.v.
Muscle trauma/necrosis*
Normal juvenile animal
Osteolytic bone lesions
Pre-renal azotaemia* q.v.
Post-renal azotaemia q.v.
Tumour lysis syndrome

Artefact

Haemolysis

Drugs/toxins

Cholecalciferol rodenticides Hypervitaminosis D Jasmine toxicity Phosphate-containing enemas Phosphate supplementation

Endocrine disorders

Acromegaly
Hyperthyroidism* (C)
Nutritional secondary hyperparathyroidism
Primary hypoparathyroidism
Renal secondary hyperparathyroidism*

4.3.6 **Sodium**

Decreased

Congestive heart failure with effusion*

Diarrhoea*

Hyperglycaemia* q.v.

Hyperlipidaemia q.v.

Hypoadrenocorticism (D)

Inappropriate antidiuretic hormone secretion

Inappropriate fluid therapy

Liver disease with ascites* q.v.

Marked hyperproteinaemia q.v.

Myxoedema coma of hypothyroidism

Nephrotic syndrome with effusion

Over-hydration

Pancreatitis*

Psychogenic polydipsia*

Renal disease* q.v.

Vomiting* q.v.

Dehydration/hypovolaemia

Cutaneous loss, e.g.

Burns

Gastrointestinal loss*

Hypoadrenocorticism (D)

Drugs

Cyclophosphamide

Diuretics, e.g.

- Amiloride
- Frusemide
- Mannitol
- Spironolactone
- Thiazides

NSAIDs

Vincristine

Effusions

Peritonitis*

Pleural effusion* q.v. Uroabdomen

Third space loss

Chylothorax with repeated drainage

Pancreatitis*

Peritonitis*

Uroabdomen

Increased

Drugs/toxins

Fludrocortisone

Hypertonic saline

Salt-containing products, e.g.

Playdough

Sodium bicarbonate

Sodium phosphate enemas

Hypotonic fluid loss

Cutaneous, e.g.

Burns

Diabetes mellitus (secondary to osmotic diuresis)*

Gastrointestinal (vomiting, diarrhoea, small intestinal obstruction)* q.v.

Post-obstructive diuresis*

Renal disease* q.v.

Third space loss, e.g.

- Pancreatitis*
- Peritonitis*

Increased intake

Hyperadrenocorticism Hyperaldosteronism Iatrogenic

Salt poisoning

Pure water loss

Hypodipsia or adipsia, e.g.

- Cranial trauma
- · Diabetes insipidus

- Inflammatory brain disease
- Intracranial neoplasia

Hyperthermia q.v.

Lack of free access to water with normal or increased insensible losses Panting/hyperventilation

Severe exercise in greyhounds

4.3.7 pH

ACIDAEMIA

Metabolic acidosis

Diabetic ketoacidosis*

Hypoadrenocorticism (D)

Post-hypocapnic metabolic acidosis

Renal disease* q.v.

Renal tubular acidosis

Drugs/toxins

Acetazolamide

Ammonium chloride

Ethylene glycol

Methanol

Methionine

Paraldehyde

Salicylic acid

Lactic acid production

Diarrhoea* q.v.

Hypoxaemia

Pancreatitis*

Sepsis*

Shock* q.v.

Respiratory acidosis

Cardiopulmonary arrest

CNS disease (brainstem/high cervical spinal lesion), e.g.

Intracranial space-occupying lesion

Trauma

latrogenic respiratory depression

Anaesthesia

Opiates

Organophosphates

Pancuronium

Succinylcholine

Neuromuscular defects

Botulism

Idiopathic hypokalaemia of Burmese cats (C)

Myasthenia gravis

Polymyositis

Polyradiculoneuritis

Tetanus

Tick paralysis

Severe respiratory disease

Acute respiratory distress syndrome

Airway obstruction*

Aspiration pneumonia

Chest wall trauma

Diaphragmatic hernia*

Haemothorax*

Neoplasia*

Pleural effusion* q.v.

Pneumonia* q.v.

Pneumothorax* q.v.

Pulmonary fibrosis

Pulmonary oedema* q.v.

Pulmonary thromboembolism

Pyothorax*

Smoke inhalation

ALKALAEMIA

Metabolic alkalosis

Hyperadrenocorticism

Post hypercapnia

Primary hyperaldosteronism

Vomiting*

Drugs

Acetate

Bicarbonate

Citrate

Diuretics

Exogenous steroid therapy

Gluconate

Lactate

Respiratory alkalosis

Overzealous ventilator therapy

Direct stimulation of medullary respiratory centre (neurogenic hyperventilation)

CNS disease *q.v.*

Hepatic disease q.v.

Sepsis*

Drugs

- Methyl xanthines
- Salicylate intoxication

Hypoxaemia, e.g.

Congestive heart failure*

High altitude

Pulmonary disease*

Right-to-left cardiac shunts

Severe anaemia* q.v.

Panting/hyperventilation

Anxiety*

Fever*

Heat stroke*

Hyperthyroidism* (C)

Pain*

4.3.8 pa02

Decreased

CNS disease (brainstem/high cervical spinal lesion), e.g.

Intracranial space-occupying lesion

Trauma

Heart disease

Pulmonary oedema* *q.v.* Right-to-left shunting

latrogenic respiratory depression

Anaesthesia

Opiates

Organophosphates

Pancuronium

Succinylcholine

Inadequate oxygen in inspired air

Failure of oxygen supply during anaesthesia High altitude

Neuromuscular defects

Botulism

Idiopathic hypokalaemia of Burmese cats (C)

Myasthenia gravis

Polymyositis

Polyradiculoneuritis

Tetanus

Tick paralysis

Severe respiratory disease

Acute respiratory distress syndrome

Airway obstruction*

Aspiration pneumonia*

Chest wall trauma*

Diaphragmatic hernia*

Haemothorax*

Neoplasia*

Pleural effusion* q.v.

Pneumonia* q.v.

Pneumothorax* q.v.

Pulmonary fibrosis

Pulmonary oedema* q.v.

Pulmonary thromboembolism

Pyothorax*

Smoke inhalation

Increased

Oxygen supplementation

4.3.9 Total C02

Decreased

Respiratory alkalosis q.v.

Increased

Respiratory acidosis q.v.

4.3.10 Bicarbonate

Decreased

Metabolic acidosis q.v.

Increased

Metabolic alkalosis q.v.

4.3.11 Base excess

Decreased

Metabolic acidosis q.v.

Increased

Metabolic alkalosis q.v.

4.4 Urinalysis findings

4.4.1 Alterations in specific gravity

HYPOSTHENURIA

Increased water loss but no increased loss of solutes

Drugs

Anticonvulsants
Carbonic anhydrase inhibitors

Corticosteroids

Frusemide

Spironolactone

Thiazide diuretics

Polyuria due to decreased ADH secretion

Drugs, e.g.

- Adrenaline
- Phenytoin

Insulinoma

Over-hydration

Pheochromocytoma

Primary central diabetes insipidus

Psychogenic polydipsia*

Polyuria due to ADH inhibition/resistance

Hyperadrenocorticism

Hypercalcaemia* q.v.

Hyperthyroidism* (C)

Hypokalaemia* q.v.

Liver disease* q.v.

Primary hyperparathyroidism

Primary nephrogenic diabetes insipidus

Toxaemia, e.g.

• Pyometra*

Inability of kidneys to concentrate urine

Acute kidney injury q.v.

Chronic kidney disease* q.v.

Hypoadrenocorticism (loss of medullary concentrating gradient)

Pyelonephritis

HYPERSTHENURIA

Polyuria with excess solute loss

Acromegaly

Diabetes mellitus*

Diet

- High protein
- High salt

Fanconi syndrome Hyperviscosity Osmotic diuretics

- Dextrose
- Mannitol

Primary renal glucosuria

Decreased loss of water and no decreased loss of solutes

Cardiac failure* Dehydration* Haemorrhage* Renal infarction Shock* *q.v.*

4.4.2 Abnormalities in urine chemistry

Bilirubin

False positive, e.g. pigmenturia Fever* *q.v.* Haemolytic disease Hyperbilirubinaemia* *q.v.* Normal in small quantities in dogs* Starvation*

Blood

See Haematuria q.v.

Glucose

Hyperglycaemia q.v.
Diabetes mellitus*
Hyperadrenocorticism
Iatrogenic
Pheochromocytoma
Primary hyperaldosteronism
Stress*

Renal tubular disorders

Fanconi syndrome Primary renal glucosuria

Urinary tract haemorrhage with mild hyperglycaemia

Haemoglobin

Haematuria q.v.

Haemolysis q.v.

Disseminated intravascular coagulation

Haemoplasmosis

Immune-mediated haemolytic anaemia*

Incompatible blood transfusion

Microangiopathic anaemia

Neonatal isoerythrolysis

Physical causes

- Burns
- Intravenous hypotonic solutions
- Radiation

Splenic torsion

Toxins

- Benzocaine
- Chlorate
- Dimethyl sulphoxide
- Nitrate
- Paracetamol
- Propylthiouracil
- Snake venom

Ketones

Hypoglycaemia, e.g.

• Insulinoma q.v.

Low-carbohydrate, high-fat diet

Starvation

Uncontrolled diabetes mellitus/diabetic

ketoacidosis*

Myoglobin - muscle injury/necrosis

Athletic performance Exercise-induced rhabdomyolysis Heat stroke* Ischaemia, e.g.

Aortic thromboembolism*

Trauma

• Crush injury*

Toxins

Snakebites

Nitrite

(*Note:* There are many false negatives in dogs and cats.) Gram-negative bacteriuria

Protein

False positives (strip test)

Contamination, e.g.

- Benzalkonium chloride
- Cetrimide
- Chlorhexidine

Stale urine

False positives (20% sulphosalicylic acid test)

Cephalosporins

Penicillins

Radiographic contrast media

Sulphafurazole

Thymol

Tolbutamide

Pre-renal

Haemoglobinuria, e.g.

Haemolytic anaemia*

Hyperproteinaemia q.v.

Myoglobinuria, e.g.

- Muscle trauma*
- Rhabdomyolysis

Physiological, e.g.

- Exercise*
- Stress*

Renal

Mild to moderate

- Acute kidney injury q.v.
- Amyloidosis

- Breed-associated nephropathy (D)
- Chronic kidney disease* q.v.
- Fanconi syndrome
- Glomerulonephritis
- IgA nephropathy
- Primary renal glucosuria
- Secondary glomerular disease
 - Bacterial endocarditis
 - Borreliosis
 - Brucellosis
 - Chronic bacterial infection*
 - Chronic skin disease* q.v.
 - Diabetic glomerulosclerosis
 - Dirofilariasis
 - Ehrlichiosis
 - Feline infectious peritonitis* (C)
 - Feline leukaemia virus* (C)
 - Hyperthermia* q.v.
 - Hypothermia* q.v.
 - Immune-mediated haemolytic anaemia*
 - Infectious canine hepatitis* (D)
 - Inflammatory bowel disease*
 - Leishmaniasis
 - Leptospirosis*
 - Mycoplasma polyarthritis
 - Pancreatitis*
 - Polyarthritis
 - Prostatitis*
 - Pyometra*
 - Pyrexia* q.v.
 - Rocky Mountain spotted fever (D)
 - Septicaemia*
 - Sulphonamide hypersensitivity
 - Systemic lupus erythematosus

Severe

- Amyloidosis
- Glomerulonephritis

Post-renal

Genital tract inflammation

- Prostatitis*
- Vaginitis*

Genital tract secretions

Urinary tract inflammation

- Trauma*
- Urinary tract infection*
- Urolithiasis*

Urogenital neoplasia

- Bladder neoplasia
- Ureteral neoplasia
- Urethral neoplasia
- · Vaginal or prostatic neoplasia

рΗ

DECREASED (<7)

Acidifying diets*

Drugs

- Ammonium chloride
- Frusemide
- Methionine
- Sodium acid phosphate
- Sodium chloride

Metabolic acidosis* q.v.

Respiratory acidosis* q.v.

INCREASED

Artefact

- Contamination with ammonia and detergents
- Old sample

Diet

- Low protein*
- Postprandial alkaline tide*

Drugs

- Acetazolamide
- Chlorothiazides
- Potassium citrate

- Sodium bicarbonate
- Sodium lactate

Metabolic alkalosis a.v.

Urinary tract disease

- Proximal renal tubular acidosis
- Urinary retention*
- Urinary tract infection with urea-producing bacteria*

Urobilinogen

(Note: Of limited use in veterinary medicine)

Re-establishment of bile flow after an episode of biliary obstruction

4.4.3 Abnormalities in urine sediment

Casts

Bilirubin

Bilirubinuria

Broad casts

- Chronic pyelonephritis
- Dilated renal tubules

Epithelial cell, fatty, granular and waxy casts

- Acute kidney injury q.v.
- Chronic kidney disease* q.v.
- Degeneration/necrosis of tubular epithelial cells
- Degeneration of white cells
- Glomerulopathy

Haemoglobin

• Haemoglobinuria q.v.

Hyaline

• Associated with proteinuria q.v.

Myoglobin

• Myoglobinuria q.v.

Red blood cell

• Renal tubular haemorrhage

White cell

· Tubulointerstitial inflammation

Crystals (predisposing factors)

Bilirubin

(See Bilirubinuria and Hyperbilirubinaemia)

Calcium oxalate

Diet

- Excess calcium
- Excess oxalic acid
- Excess vitamin C
- Excess vitamin D

Ethylene glycol poisoning Hyperadrenocorticism Hypercalciuria

• Hypercalcaemia q.v.

Calcium phosphate

Alkaline urine Primary hyperparathyroidism Renal tubular acidosis

Cystine

Acid pH Inherited defect of renal tubular cells

Silica

Dietary

- Gluten
- Soya bean hulls

Soil ingestion

Struvite

Alkaline urine* Urinary bladder foreign body Urinary tract infection*

Urate

Acid urine

Breed associated

- Dalmatian*
- English bulldog

Portosystemic shunts Urinary tract infection*

Xanthine

Allopurinol administration Hereditary

Increased red blood cells

Haematuria q.v.

Increased white blood cells

Low numbers – normal Neoplasia Urinary tract infection* Urinary tract inflammation* Urolithiasis*

4.4.4 Infectious agents

Bacteria

Contamination*

- Catheterised sample*
- Failure of sterile collection technique
- · Voided sample*

Urinary tract infection*

Fungi

Blastomycosis
Candidiasis
Contaminants*
Cryptococcosis
Prolonged antibiotic therapy

Parasites

Capillaria ova
Dioctophyma renale ova
Dirofilaria microfilaria
Faecal contamination*

Predisposing factors to urinary tract infection

Alteration of urothelium

Changes in normal flora of distal urogenital tract

Drugs

- Cyclophosphamide
- Oestrogens

Metaplasia

- Oestrogens
 - Exogenous
 - Sertoli cell tumours*

Neoplasia*

Trauma

- External*
- Iatrogenic, e.g.
 - Catheterisation*
 - Palpation
 - Surgery*
- Urolithiasis*

Alterations in urine

Decreased frequency of urination

- Involuntary retention*
- Voluntary retention*

Decreased volume

- Decreased water consumption*
- Increased fluid loss*
- Oliguric/anuric kidney injury q.v.

Dilute urine*

Glucosuria*

Anatomic defects

Acquired

- Chronic lower urinary tract disease*
- Secondary vesicoureteral reflux
- Surgical procedures

Congenital

- · Ectopic ureters
- · Persistent urachal diverticula
- Primary vesicoureteral reflux
- Urethral

Immunodeficiency

Congenital diseases

Hyperadrenocorticism

Iatrogenic, e.g.

Corticosteroids*

Uraemia* q.v.

Interference with normal micturition

Outflow obstruction

- Neoplasia*
- Prostatic disease*
- Strictures
- Urinary bladder herniation
- Urolithiasis*

Incomplete emptying of bladder

- Anatomic defects
 - Diverticula
 - Vesicoureteral reflux
- Neurogenic
 - Reflex dyssynergia*
 - Spinal disease

4.5 Cytological findings

4.5.1 Tracheal/bronchoalveolar lavage

Increased neutrophils

Aspiration pneumonia*
Bacterial bronchitis*

Bronchopneumonia*

Canine tracheobronchitis* (D)

Chronic bronchitis*

Foreign body*

Parasites, e.g.

• Angiostrongylus vasorum

Increased eosinophils

Drugs

• Potassium bromide (C)

Eosinophilic bronchitis*

Feline asthma* (C)

Parasites

- Aelurostrongylus abstrusus
- Angiostrongylus vasorum
- Capillaria aerophila
- Crenosoma vulpis
- Oslerus spp.

Pulmonary infiltrate with eosinophils/eosinophilic bronchopneumopathy

Organisms visible on microscopy/detectable on culture

Upper respiratory tract

Aelurostrongylus abstrusus Bordetella bronchiseptica Capillaria aerophila Malassezia pachydermatis Mycobacteria spp. Mycoplasma spp. Oslerus osleri

Lower respiratory tract

Aelurostrongylus abstrusus Aspergillus spp.
Blastomyces dermatitidis Bordetella bronchiseptica* Capillaria aerophila Coccidioides immitis Crenosoma vulpis (D) Cryptococcus neoformans Eucoleus aerophilus Haemophilus felis Histoplasma capsulatum Mycobacteria spp.
Mycoplasma spp.
Opportunistic bacteria*

- Pasteurella spp.
- Pseudomonas spp.
- Salmonella Typhimurium

Oslerus spp.

Paragonimus kellicotti (D) Penicillium spp. Pneumocystis carinii (D) Toxocara canis Toxoplasma gondii Yersinia pestis

4.5.2 Nasal flush cytology

Inflammation

Acute or chronic inflammation secondary to foreign body or dental disease* Allergic rhinitis* Granulomatous rhinitis Lymphoplasmacytic rhinitis* Nasopharyngeal polyp* Oronasal fistula

Neoplasia

Adenocarcinoma* Chondrosarcoma Esthesioneuroblastoma

Fibrosarcoma

Haemangiosarcoma

Histiocytoma

Leiomyosarcoma

Liposarcoma Lymphoma*

Malignant fibrous histiocytoma

Malignant melanoma

Malignant nerve sheath tumour

Mast cell tumour

Myxosarcoma

Neuroendocrine tumour

Osteosarcoma

Paranasal meningioma

Rhabdomyosarcoma

Squamous cell carcinoma*

Transitional cell carcinoma

Transmissible venereal tumour Undifferentiated carcinoma* Undifferentiated sarcoma

Organisms visible on microscopy/detectable on culture

Bacterial/mycoplasmal disease Bordetella bronchiseptica*

Chlamydophila felis* (C) Haemophilus felis Mycoplasma spp.*

Fungal disease

Aspergillosis Cryptococcosis Penicillium spp. Rhinosporidium spp.

Parasites

Capillaria aerophila Cuterebra spp. Eucoleus böehmi Linguatula serrata Pneumonyssoides caninum (D)

4.5.3 Liver cytology

Note that cytology of the liver often has low diagnostic value.

Amyloidosis

Hyperplasia Nodular hyperplasia*

Increased bile pigment

Cholestasis* q.v.

Increased copper

Copper-associated hepatopathy

Infectious hepatopathies

Babesiosis
Bacillus piliformis

Bacterial cholangiohepatitis*

Canine adenovirus-1* (D)

Canine herpesvirus (D)

Capillaria ĥepatica

Cvtauxzoonosis

Ehrlichiosis

Extrahepatic sepsis

Feline coronavirus* (C)

Hepatozoon canis

Leishmaniasis

Leptospirosis*

Liver abscess

Metorchis conjunctus

Mycobacteriosis

Neosporosis

Opisthorchis felineus

Rhodococcus equi

Toxoplasmosis

Yersiniosis

Inflammatory hepatopathies

Cholangiohepatitis* q.v.

Chronic hepatitis* q.v.

Copper retention/storage disease

Drugs

- Anticonvulsants
- NSAIDs

Granulomatous hepatitis

- Bartonella henselae
- Fungal disease
- Intestinal lymphangitis/lymphangiectasia
- Leishmaniasis

Idiosyncratic drug reaction

Lobular dissecting hepatitis

Neoplastic cells, e.g.

Bile duct carcinoma

Haemangiosarcoma

Hepatocellular adenocarcinoma*

Leiomyosarcoma

Lymphoma*
Mast cell
Metastatic tumour*

Vacuolar hepatopathies

Chronic infections, e.g.

- Dental disease*
- Pyelonephritis

Diabetes mellitus*

Exogenous glucocorticoid administration*

Hyperadrenocorticism

Hyperlipidaemia

Hypothyroidism* (D)

Inflammatory bowel disease*

Lipid storage disease

Neoplasia*

Pancreatitis*

4.5.4 Kidney cytology

Note that cytology of the kidney often has low diagnostic value.

Inflammatory cells

Chronic interstitial nephritis*

Glomerulonephritis

Leptospirosis*

Neoplasia

Pyelonephritis

Renal abscess

Neoplastic cells

Adenocarcinoma

Chondrosarcoma

Haemangioma

Haemangiosarcoma

Lymphoma*

Metastatic thyroid adenocarcinoma

Osteosarcoma

4.5.5 Skin scrapes/hair plucks/tape impressions

Fungi

Dermatophytosis *Malassezia* spp.

Parasites

Cheyletiella spp.*
Demodex spp.*
Felicola subrostratus
Heterodoxus spiniger
Larval ticks*
Linognathus setosus*
Lynxacarus radovskyi
Notoedres cati
Otodectes cynotis*
Sarcoptes scabiei* (D)
Trichodectes canis
Trombiculid mites*

4.5.6 Cerebrospinal fluid (CSF) analysis

RAISED CSF WHITE CELL COUNT AND/OR PROTEIN LEVELS

Infectious

Algal

Protothecosis

Bacterial

Leptospirosis

Various aerobes and anaerobes, e.g.

- Escherichia coli
- Klebsiella spp.
- Streptococcus spp.

Fungal

Aspergillosis Blastomycosis Coccidioidomycosis Cryptococcosis Histoplasmosis Hyalohyphomycosis Phaeohyphomycosis

Parasitic

Ancylostoma caninum Angiostrongylus cantonensis Cuterebra spp. Dirofilaria immitis Toxocara canis

Protozoal

Acanthamoebiasis Babesiosis Encephalitozoonosis Neosporosis Sarcocystis-like organism Toxoplasmosis Trypanosomiasis

Rickettsial

Ehrlichiosis Rocky Mountain spotted fever (D) Salmon poisoning disease (D)

Viral

Borna disease virus
Canine distemper* (D)
Canine herpesvirus (D)
Canine parainfluenza (D)
Canine parvovirus* (D)
Central European tick-borne encephalitis
Feline immunodeficiency virus* (C)
Feline infectious peritonitis* (C)

Feline leukaemia virus* (C) Infectious canine hepatitis* (D)

Pseudorabies

Rabies

Non-infectious

Eosinophilic meningoencephalitis

Fibrocartilaginous embolism

Fucosidosis

Globoid cell leukodystrophy

Granulomatous meningoencephalomyelitis

Idiopathic tremor syndrome

Intervertebral disc disease

Meningoencephalomyelitis in pointers

Necrotising encephalitis

Neoplasia

Periventricular encephalitis

Polioencephalomyelitis

Pug and Maltese encephalitis

Pyogranulomatous meningoencephalomyelitis

Steroid-responsive meningoencephalomyelitis and polyarteritis

Yorkshire terrier encephalitis

4.5.7 Fine-needle aspiration of cutaneous/subcutaneous masses

Neoplasia

Epithelial

Basal cell tumour

Papilloma

Perianal adenoma*

Sebaceous adenoma/hyperplasia*

Sebaceous gland tumours*

Squamous cell carcinoma*

Sweat gland tumours

Mesenchymal

Haemangiopericytoma

Lipoma*

Sarcoma*, e.g.

- Chondrosarcoma
- Fibrosarcoma
- Haemangiosarcoma
- Osteosarcoma

Round cell

Histiocytoma* (D)

Lymphoma

Mast cell tumour*

Melanoma

Plasmacytoma

• Transmissible venereal tumour (D)

Inflammatory cells

Abscess*

Cellulitis*

Panniculitis

Pvoderma*

4.6 Hormones/endocrine testing

4.6.1 Thyroxine

Decreased

Neonatal cats*

Normal value is lower in sighthounds

Drugs

Amiodarone

Anabolic steroids

Anaesthetics

Anticonvulsants

- Phenobarbitone
- Phenytoin

Frusemide

Glucocorticoids

Iodine supplementation

Methimazole

NSAIDs

- Carprofen
- Flunixin
- Phenylbutazone
- Salicylates

Progestagens

Propranolol

Propylthiouracil

Sulphonamides

Non-thyroidal illness (sick euthyroid syndrome)*, many conditions, e.g.

Acute diseases

- Acute hepatitis* q.v.
- Acute pancreatitis*
- Acute kidney injury q.v.
- Autoimmune haemolytic anaemia*
- Bacterial bronchopneumonia*
- Canine distemper virus* (D)
- Intervertebral disc disease* (D)
- Polyradiculoneuritis
- Sepsis*
- Systemic lupus erythematosus

Chronic diseases

- Cachexia
 - Cardiac*
 - Neoplasia*
- Chronic kidney disease* q.v.
- Congestive heart failure*
- Dermatological disease* q.v.
- Diabetes mellitus*
- Gastrointestinal disease* q.v.
- Hyperadrenocorticism
- Hypoadrenocorticism (D)
- Liver disease* q.v.
- Lymphoma*
- · Megaoesophagus
- Systemic mycoses

Primary hypothyroidism Acquired*

Congenital

Increased

- Diet
- Soy

Hyperthyroidism* (C) Juvenile dogs*

Obesity*

Pregnant bitches*

Strenuous exercise*

Total T4 autoantibodies

Thyroid carcinoma

Drugs

- Excessive thyroid hormone supplementation
- Ipodate

4.6.2 Parathyroid hormone

Decreased

Artefact

 Prolonged storage/transport above freezing Hypervitaminosis D Non-parathyroid causes of hypercalcaemia Primary hypoparathyroidism Drugs that increase serum calcium (see Hypercalcaemia)

Increased

Hyperadrenocorticism
Non-parathyroid causes of hypocalcaemia *q.v.*Nutritional secondary hyperparathyroidism
Primary hyperparathyroidism
Renal secondary hyperparathyroidism*
Drugs that decrease serum calcium
(see Hypocalcaemia)

4.6.3 Cortisol (baseline or post-ACTH stimulation test)

Increased

Severe/chronic illness*
Stress*

Artefact

Cross-reaction with glucocorticoids (but not dexamethasone)

- Cortisone
- Hydrocortisone
- Methylprednisolone
- Prednisolone
- Prednisone

Drugs

Anticonvulsants

Hyperadrenocorticism Adrenal dependent Pituitary dependent

Decreased

Artefact

Prolonged/improper storage of ACTH Incorrect administration of ACTH

Drugs

Chronic androgen administration Chronic glucocorticoid administration Chronic progestagen administration Megestrol acetate

Hypoadrenocorticism (D)

Primary Secondary

4.6.4 Insulin

With concurrent hyperglycaemia

Decreased

Diabetes mellitus*

Increased

Insulin-binding antibodies
Insulin resistance*
With concurrent hypoglycaemia

Increased

Insulinoma

4.6.5 ACTH

Decreased

Adrenal-dependent hyperadrenocorticism Iatrogenic hyperadrenocorticism Spontaneous secondary hyperadrenocorticism

Artefact

Collecting into glass containers Storing above freezing

Increased

Ectopic ACTH secretion Insulin administration Pituitary-dependent hyperadrenocorticism Primary hypoadrenocorticism

4.6.6 Vitamin D (1,25-dihydroxycholecalciferol)

Decreased

Chronic kidney disease Lymphoma Primary hyperparathyroidism Vitamin D-deficient diet

Increased

Exogenous administration Granulomatous disease Humoral hypercalcaemia of malignancy Primary hyperparathyroidism Vitamin D-based rodenticides

4.6.7 Testosterone

Decreased

Castrated male Sertoli cell tumour* Drugs

Exogenous androgen treatment

Artefact

Collection into EDTA Storage at room temperature Storage with red blood cells

Increased (post GnRH or hCG)

Functional testicular tissue Ovarian thecoma

4.6.8 Progesterone

Decreased

Artefact

- Storage at room temperature
- Storage in whole blood

Exogenous progestagen administration Failure to maintain normal luteal function Failure to ovulate Imminent parturition Normal anoestrus

Increased

Adrenocortical carcinoma Granulosa cell tumour Luteal cysts Normal luteal function Ovarian remnant syndrome Prostaglandin therapy Recent oyulation

4.6.9 Oestradiol

Increased

Follicular ovarian cysts Ovarian remnant syndrome Seminoma* Sertoli cell tumour*

4.6.10 Pro-BNP

Increased

Acquired cardiac disease, e.g.

- Mitral valve disease *(D)
- Dilated cardiomyopathy *(D)
- Hypertrophic cardiomyopathy *(C)
- Pulmonary hypertension

Congenital cardiac disease, e.g.

Patent ductus arteriosus

Non-cardiac disease

- Azotaemia
- Babesiosis

Physiological

Variation over time in an individual

4.7 Faecal analysis findings

4.7.1 Faecal blood

See Haematochezia q.v. and Melaena q.v.

Note: Tests for occult blood may be positive if red meat has been fed in the previous five days.

4.7.2 Faecal parasites

Cardiorespiratory parasites shed in faeces

Aelurostrongylus abstrusus Angiostrongylus Capillaria aerophila Crenosoma vulpis (D) Eucoleus boehmi Paragonimus kellicotti (D)

Flukes

Alaria spp.

Hookworms

Ancylostoma* spp. *Uncinaria** spp.

Protozoa

Cryptosporidium* spp. Giardia* spp. Toxoplasma gondii Tritrichomonas foetus

Roundworms

Toxascaris leonina Toxocara canis Toxocara cati

Tapeworms

Taenia* spp.

Threadworm

Strongyloides spp.

Whipworms

Trichuris vulpis*

4.7.3 Faecal culture

Culture for specific enteropathogenic bacteria

Campylobacter spp.*
Clostridium difficile*
Clostridium perfringens*

Escherichia coli*

- Enterohaemorrhagic
- Enteropathogenic
- Enterotoxigenic

Salmonella spp. * Yersinia spp.

Non-selective culture

Non-selective culture is thought to be of limited diagnostic use.

4.7.4 Faecal fungal infections

Histoplasma capsulatum

4.7.5 Undigested food residues

Note: Trypsinogen-like immunoreactivity is a more sensitive test for exocrine pancreatic insufficiency than is the presence of undigested food residues.

Fat

Bile acid deficiency Exocrine pancreatic insufficiency Malabsorption*

Starch

Exocrine pancreatic insufficiency High-starch diet Increased intestinal transit time

PART 5 ELECTRODIAGNOSTIC TESTING

5.1 Electrocardiographic findings

Note: Changes in ECG measurements are relatively insensitive indicators of chamber size.

5.1.1 Alterations in P wave

Tall P wave (P pulmonale)

Right atrial enlargement, e.g.

- Chronic respiratory disease*
- Dilated cardiomyopathy*
- Tricuspid regurgitation*

Wide P wave (P mitrale)

Left atrial enlargement*, e.g.

- · Dilated cardiomyopathy*
- Mitral regurgitation*

Variable height of P wave (wandering pacemaker)

Increased vagal tone*

Absent P wave

Atrial fibrillation*

Acute atrial stretch

Volume overload

Atrial pathology

Excessive vagal stimulation

Large atria*

Persistent atrial standstill

Artefact

Atrial pathology

Hyperkalaemia

Sinus arrest/sino-atrial block

Normal in brachycephalics

Drugs, e.g.

- Beta blockers
- Calcium channel blockers
- Digitalis glycosides

Atrial disease, e.g.

- Cardiomyopathy*
- Dilatation*
- Fibrosis
- Hypertrophy
- Necrosis

Electrolyte imbalances*

Increased vagal tone

- Chronic respiratory disease*
- Gastrointestinal disease*

Sick sinus syndrome

Stenosis of bundle of His

5.1.2 Alterations in QRS complex

Tall R waves

Left ventricular enlargement, e.g.

- Cardiomyopathy*
- Hyperthyroidism* (C)
- Mitral regurgitation*

Small R waves

Acute haemorrhage Pericardial effusion

Wide QRS

Supraventricular

Left bundle branch block

- Cardiomyopathy*
- Subaortic stenosis*
- Drugs/toxins, e.g.
 - Doxorubicin
 - Tricyclic antidepressants

Right bundle branch block

- Occasionally seen in normal animals
- Cardiac neoplasia
- Heartworm disease
- Inherited
- Post cardiac arrest
- Ventricular septal defect

Left ventricular hypertrophy*

Microscopic intramural myocardial infarction

Quinidine toxicity

Severe ischaemia

Ventricular

Accelerated idioventricular rhythm*

Ventricular ectopy*

Ventricular escape complexes

Ventricular premature complexes*

Ventricular tachycardia*

Deep S waves

Right ventricular enlargement, e.g.

- Pulmonary hypertension
- Pulmonic stenosis
- · Reverse-shunting patent ductus arteriosus
- Tricuspid regurgitation

Electrical alternans

Pericardial effusion

Slurred upstroke

Ventricular pre-excitation/Wolff-Parkinson-White syndrome

- Acquired heart defects, e.g.
- Feline hypertrophic cardiomyopathy
- Congenital
- Idiopathic

5.1.3 Alterations in P-R relationship

Prolonged P-R interval (first-degree atrioventricular block)

Occasionally seen in normal animals*

Age-related degeneration of atrioventricular conduction system Drugs/toxins

- Beta blockers
- Calcium channel blockers
- Cardiac glycosides
- Quinidine
- Tricyclic antidepressants
- Vitamin D rodenticides

Feline dilated cardiomyopathy (C)

Heart disease*

Hyperkalaemia q.v.

Hypokalaemia* q.v.

Increased vagal tone*

Short P-R interval

Ventricular pre-excitation/Wolff-Parkinson-White syndrome

- Acquired heart defects, e.g.
- Feline hypertrophic cardiomyopathy
- Congenital
- Idiopathic

Intermittent failure of atrioventricular conduction (second-degree atrioventricular block)

May be seen in normal animals

Juvenile puppies at rest

Physiological when seen associated with supraventricular tachycardia

Drugs, e.g.

- Alpha-2 agonists
- Atropine
- Beta blockers
- Calcium channel blockers
- Cardiac glycosides

Electrolyte imbalances* q.v., e.g.

• Hyperkalaemia q.v.

Hyperthyroidism* (C)

Increased vagal tone, e.g.

- Chronic respiratory disease* q.v.
- Gastrointestinal disease* q.v.

Microscopic idiopathic fibrosis

Myocardial diseases

Stenosis of bundle of His

Complete atrioventricular block (third-degree atrioventricular block)

Idiopathic

Bacterial endocarditis

Congenital heart defects, e.g.

- Aortic stenosis
- Ventricular septal defect

Hyperkalaemia

Isolated congenital atrioventricular block

Myocardial diseases including infiltrative disorders

Myocardial infarction

Myocarditis

Severe drug intoxication, e.g.

- Beta blockers
- · Calcium channel blockers
- Cardiac glycosides

5.1.4 Alterations in S-T segment

S-T segment depression/slur

Acute myocardial infarction Cardiac trauma Digitalis toxicity Electrolyte disturbances* q.v. Myocardial ischaemia

S-T segment elevation

Myocardial hypoxia Myocardial infarction Myocardial neoplasia Pericarditis

Secondary changes to S-T segment following QRS abnormalities

Bundle branch block Ventricular hypertrophy Ventricular premature complexes*

Pseudo-depression of S-T segment (prominent atrial repolarisation wave)

Pathological atrial changes Tachycardia *q.v.*

5.1.5 Alterations in Q-T interval

Prolonged Q-T interval

Central nervous system disease q.v.

Drugs/toxins

- Amiodarone
- Ethylene glycol
- Quinidine
- · Tick paralysis
- Tricyclic antidepressants

Exercise*

Hypocalcaemia q.v.

Hypokalaemia* q.v.

Hypothermia* q.v.

Shortened Q-T interval

Hypercalcaemia *q.v.* Hyperkalaemia *q.v.* Drugs/toxins

Cardiac glycosides

5.1.6 Alterations in T wave

Tall T waves

Anaesthetic complications
Bradycardia *q.v.*Heart failure*
Hyperkalaemia *q.v.*Hyperventilation during heat stroke
Left bundle branch block
Myocardial hypoxia
Myocardial infarction
Right bundle branch block

Small T waves

Hypokalaemia* q.v.

T wave alternans

Hypocalcaemia *q.v.* Increased circulating catecholamines Increased sympathetic tone

5.1.7 Alterations in baseline

Atrial fibrillation Atrial flutter Movement artefact* Ventricular fibrillation Ventricular flutter

5.1.8 Rhythm alterations

Atrial fibrillation

Anaesthesia Gastrointestinal disease* Hypoadrenocorticism (D) Hypothyroidism* (D) Primary/'lone' Rapid, large-volume pericardiocentesis

Severe atrial enlargement, e.g.

- Dilated cardiomyopathy*
- Mitral regurgitation*
- Patent ductus arteriosus

Volume overload

Atrial flutter

Cardiomyopathy

Iatrogenic

Cardiac catheterisation

Severe atrial enlargement, e.g.

- Dilated cardiomyopathy*
- Mitral regurgitation*
- · Patent ductus arteriosus

Drugs

Quinidine

Atrioventricular block q.v.

Parasystole

Atrial

Ventricular

Persistent atrial standstill

Artefact

Atrial pathology

Hyperkalaemia

Sinus block/arrest

Atrial disease, e.g.

- · Cardiomyopathy*
- Dilatation*
- Fibrosis
- Hypertrophy
- Necrosis

Electrolyte imbalances* q.v.

Increased vagal tone

- Chronic respiratory disease*
- Gastrointestinal disease*

Sick sinus syndrome

Stenosis of bundle of His

Drugs, e.g.

- Beta blockers
- Calcium channel blockers
- Digitalis glycosides

Supraventricular premature complexes/ supraventricular tachycardia (sinus, atrial or junctional tachycardia)

May be normal

Structural cardiac disease, e.g.

Atrial enlargement* Myocardial disease

Systemic disease, e.g.

Drugs, e.g.

- Digoxin
- · General anaesthesia

Hyperthyroidism* (C)

Inflammation*

Neoplasia*

Sepsis*

Ventricular premature complexes/ventricular tachycardia

Cardiac disease

Cardiomyopathy, e.g. dilated cardiomyopathy and arrhythmogenic right ventricular cardiomyopathy

Congestive heart failure*

Endocarditis, e.g.

Bacterial

Inherited, e.g.

German Shepherd dogs

Myocardial infarction

Myocarditis, e.g.

- Idiopathic
- Traumatic
- Viral

Neoplasia Pericarditis

Extra-cardiac disease

Anaemia* q.v.

Autonomic imbalances*

Coagulopathies q.v.

Disseminated intravascular

coagulation

Drugs/toxins

- Atropine
- Anti-dysrhythmics, e.g.
 - Amiodarone
 - Digoxin
 - Lignocaine
 - Sotalol
- Dobutamine
- Dopamine
- Glycopyrronium bromide
- Halothane
- Propantheline bromide
- Theobromine
- Tricyclic antidepressants
- Xylazine
- Vitamin D rodenticides

Endocrinopathies*

Gastric dilatation/volvulus*

Hypoxia

Nutritional deficiencies

Pancreatitis*

Sepsis*

Uraemia* q.v.

Ventricular flutter/fibrillation

Ventricular asystole

Electrolyte/acid-base disorders Severe sino-atrial block Terminal systemic disease Third-degree atrioventricular block

5.1.9 Alterations in rate

Tachycardia

Sinus tachycardia

Physiological

- Excitement*
- Exercise*
- Fear*
- Pain*

Drugs/toxins

- Adder bites
- Baclofen
- Blue-green algae
- Cannabis
- · Ethylene glycol
- Glyphosate
- Ibuprofen
- Metaldehyde
- Paracetamol
- Paraquat
- Petroleum distillates
- Phenoxy acid herbicides
- Pyrethrins/pyrethroids
- Salbutamol
- · Selective serotonin reuptake inhibitors
- Terfenadine
- Theobromine
- Tricyclic antidepressants
- Vitamin D rodenticides
- Heart failure*
- Respiratory disease*
- Shock*

Pathological

- · Systemic disease
 - Anaemia* q.v.
 - Fever* *q.v.*

- Hyperthyroidism* (C)
- Hypoxia
- Sepsis*

Other supraventricular tachycardia

Atrial fibrillation

Atrial flutter

Ectopic atrial tachycardia

Junctional tachycardia

- Automatic junctional tachycardia
- · AV nodal re-entrant tachycardia
- Bypass tract-mediated macro-re-entrant tachycardia

Sinus nodal re-entrant tachycardia

Ventricular pre-excitation/Wolff–Parkinson–White syndrome Ventricular tachycardia *q.v.*

Bradycardia

Atrial standstill

- · Atrioventricular myopathy
- · Dilated cardiomyopathy*
- Hyperkalaemia q.v.

Heart block q.v.

Sick sinus syndrome

Sinus arrest

Sinus bradycardia

Normal in athletic dogs, during

rest/sleep

Cardiac disease

- End-stage heart failure*
- Feline dilated cardiomyopathy (C)

Drugs/toxins

Adder bites

Anti-dysrhythmics

- Beta blockers
- Calcium channel blockers
- Digoxin
- Baclofen
- Cannabis

- Carbamate
- Daffodil
- Glyphosate
- Ivermectin
- Loperamide
- Organophosphates
- Paraquat
- Phenoxy acid herbicides
- Rhododendron
- Theobromine
- Vitamin D rodenticides
- Yew

Hypoglycaemia q.v.

Hypothyroidism*

Increased vagal tone, e.g.

- Gastrointestinal disease* q.v.
- Respiratory disease* q.v.

Neurological disease, e.g.

Coma

Severe systemic disease*

5.2 Electromyographic findings

5.2.1 Spontaneous activity

Normal end-plate noise Electrode-insertion artefact Fibrillation potentials

Denervation

Myotonic potentials (dive bomber sound)

• Myotonia

Pseudo-myotonic potentials

- Polymyositis
- Primary myopathies
- Steroid myopathy

5.2.2 Evoked activity

Decreased muscle action potential

Junctionopathies

- Botulism
- Tick paralysis

Neuropathies

Primary myopathies

Increased muscle action potential

Aged animals Chronic neuropathies

Decremental decrease after repeated stimulation

Myasthenia gravis Re-innervation

5.3 Nerve conduction velocity findings

5.3.1 Decreased velocity

Demyelinating neuropathies Distal part of extremity Hypothermia of adjacent tissues* Protein malnutrition Very old/young animals*

5.3.2 Increased velocity

Proximal part of extremity

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