

PUBLIC RECORDS RESPONSE

RCW 42.56

See 90.05 for additional instructions.

Washington State University
Office of Procedures, Records and Forms
Information Technology Building 3089
Pullman, WA 99164-1225
(509) 335-3928
FAX (509) 335-3969
E-mail forms@mail.wsu.edu

REQUEST NUMBER

7-127

DEPARTMENT

Charlie Powell on behalf of Washington Animal Disease Diagnostic Laboratory

DATE OF REQUEST

August 27, 2007

RECORDS NEEDED BY

September 4, 2007

The University has received a public records request for records meeting the following description. Please provide the following records to the Public Records Office:

REQUEST DESCRIPTION

Copies of necropsy reports of 24 rabbits, Case 2007-6489, Veterinarians: Cynthia Henkie and Mike Dix; rabbits owned by Best Friends Animal Society, received by WADDL on or around May 19, 2007.

Additional information:

The following fields are completed by the responding department:

I searched for records in the following locations:

I requested records from the following individuals:

I am submitting the following records to the Public Records Office: WADDL # 2007-6489
(entire record copy)

30 min. Estimate of time in hours expended to compile responsive records.

If additional records meeting the above description may be found in other departments, please identify departments and provide contact names.

☐

No requested records were found.

I hereby state that I conducted a diligent and good faith search of the files and records for the requested records. To the best of my knowledge, information, and belief, I have provided all such records to the University Public Records Office as of the date indicated below. I specifically state that I am aware of no other documents responsive to this public records request that have not been provided and I have no reason to believe that any such document exists.

I understand that this statement will be filed with the court if an action arises and that the court will rely on this statement as truthful.

NAME OF RESPONDER

Tim Baszler

Director Lab Operations
WADDL**SIGNATURE OF RESPONDER****DATE OF RESPONSE**

8-27-07 Received

AUG 28 2007

Washington State University
Office of Procedures, Records and Forms

OK to release info to
Cynthia Henkle DVM 206 784-9200
8205 Greenway Ave N.
Seattle WA 98103

ACCESSION FORM FOR GENERAL DIAGNOSTICS

Washington Animal Disease Diagnostic Laboratory
College of Veterinary Medicine, Washington State University
Mailing address: Shipping address:
P.O. Box 647034 Bustad Hall, Rm. 155-N
Pullman, WA. 99164-7034 Pullman, WA. 99164-7034
Phone: (509) 335-9696 FAX: (509) 335-7424
E-Mail: waddl@vetmed.wsu.edu
Web Site: http://waddl.vetmed.wsu.edu

Please type or use black ink and print clearly.

Veterinarian or Case Coordinator:		
Dr. Mike DIX		
Clinic:		
Street: 5001 Angel Canyon Road		
City: Kanab	State: UT	Zip: 84741
Phone: 435-644-2296	Fax: 435-644-2201	
Date Shipped:		
E-mail:		

Owner: Best Friends Animal Society		
Street: 5001 Angel Canyon Road		
City: Kanab	State: UT	Zip: 84741
Phone: 435-644-2201	Fax/E-mail: 435-644-3339	

Please fill out completely as possible: Russ @ bestfriends.org

Specimen(s) Submitted		Date Collected:																			
<table border="0"><tr><td>Tests Requested:</td><td><input type="checkbox"/> Necropsy</td><td><input type="checkbox"/> Virology</td><td><input type="checkbox"/> Bacteriology - Aerobe</td><td><input type="checkbox"/> IHC</td><td><input type="checkbox"/> Other:</td></tr><tr><td></td><td><input type="checkbox"/> Histopathology</td><td><input type="checkbox"/> Serology</td><td><input type="checkbox"/> Bacteriology - Anaerobe</td><td><input type="checkbox"/> PCR</td><td></td></tr><tr><td></td><td><input type="checkbox"/> Toxicology</td><td><input type="checkbox"/> Fungal Culture</td><td><input type="checkbox"/> Mycoplasma culture</td><td><input type="checkbox"/> Parasitology</td><td></td></tr></table>				Tests Requested:	<input type="checkbox"/> Necropsy	<input type="checkbox"/> Virology	<input type="checkbox"/> Bacteriology - Aerobe	<input type="checkbox"/> IHC	<input type="checkbox"/> Other:		<input type="checkbox"/> Histopathology	<input type="checkbox"/> Serology	<input type="checkbox"/> Bacteriology - Anaerobe	<input type="checkbox"/> PCR			<input type="checkbox"/> Toxicology	<input type="checkbox"/> Fungal Culture	<input type="checkbox"/> Mycoplasma culture	<input type="checkbox"/> Parasitology	
Tests Requested:	<input type="checkbox"/> Necropsy	<input type="checkbox"/> Virology	<input type="checkbox"/> Bacteriology - Aerobe	<input type="checkbox"/> IHC	<input type="checkbox"/> Other:																
	<input type="checkbox"/> Histopathology	<input type="checkbox"/> Serology	<input type="checkbox"/> Bacteriology - Anaerobe	<input type="checkbox"/> PCR																	
	<input type="checkbox"/> Toxicology	<input type="checkbox"/> Fungal Culture	<input type="checkbox"/> Mycoplasma culture	<input type="checkbox"/> Parasitology																	
Note: WADDL reserves the right to modify the tests requested for more efficient case work-up.																					
Species	Breed	Age	Sex	Location of Lesion																	
Animal ID (name/tag#)	Animal Weight	No. in group	No. Dead	No. Sick	No. on Premises	Duration of Problem															

* Was animal euthanized? If so, what method?

Additional History: Vaccinations, signs, stress factors, treatments, post mortem findings, pertinent feed or feed additives, clinical lab results, previous WADDL Case Numbers. (Attach additional sheets as necessary.)
~ 1 yr ago removed from Hoarder → isolated together & then sprayed/checked
with no later distributed separately
Gis harbor ~ 150 rabbits, kept isolated from other rabbits, but "close proximity" not
- 30 became sick not sure how long till became quarantined
- some of Gis harbor's original rabbits "sick", but none don't have results
head tilts, circling, obsessions, non responsive

WADDL is an official brucellosis testing laboratory. All serology for brucellosis, including abortion screens, requires identification of animals, date of sample collection, and signature of an accredited veterinarian attesting to the following statement:

"I certify that the specimens submitted with this form were collected by me from the animal(s) described on the date indicated."

Veterinarian's or Clinician's Signature:	Condition(s) Suspected:
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For Laboratory Use Only	
PO # / Budget #:	
WSU Account #:	
Invoice # : 4104705	
Completion Date: 7/18/07	
VADDS Log by: GE	Checked by: TVB
Samples Received: 29 Rabbits (4 Caudal) (the live)	

WADDL #: 2007-6489	Diagnostician: jbs
Date Received: 05/19/07	Date Completed:

Sample Condition (as received):	
<input type="checkbox"/> Frozen	<input type="checkbox"/> Chilled <input type="checkbox"/> Room Temperature
Comment: <input type="checkbox"/> Above Room Temperature	
Sample Shipped Via: <input type="checkbox"/> US Mail <input type="checkbox"/> UPS <input type="checkbox"/> Fed-Ex <input type="checkbox"/> Courier <input type="checkbox"/> Other	

New Acct. 5/12/07

EX 44608

Bill to Best Friends Animal Society
ATTN: Patricia Heywood Andak to release info
Director of Animal Care
5001 Angel Canyon Road Kanab UT 84741

Form WADDL 001.1, Version 03-06

Russ Mead
435-644-3333
cell 435-111-0213

WASHINGTON ANIMAL DISEASE DIAGNOSTIC LABORATORY

P.O. Box 647034
Pullman, WA 99164-7034
Phone: (509) 335-9696
Fax: (509) 335-7424

Veterinarian:

Clinic: Dr. Mike Dix
Address: 5001 Angel Canyon Road

Big Water, UT 84741
Phone: (435) 644-2001

Owner: Best Friends Animal Socie

Animal:

Species: Domestic Rabbit (aka European)

Breed:

Age:

Sex:

GROSS REPORT

05/21/07

WADDL #2007-6489

Report authorized by: Timothy Baszler, Senior Pathologist

Received: 05/19/07

Twenty live and four dead, 2-2.5 kg rabbits of varying gender and coloration are submitted for necropsy on May 19, 2007. The live rabbits were sedated with intramuscular injection of xylazine and ketamine then upon sedation euthanized by overdose of sodium pentobarbital. The rabbits are in good body condition with adequate adipose stores and musculature. Twenty three of the twenty four rabbits had scannable identification chips in the subcutaneous region of the neck or shoulder region. Full necropsy examination was done on all 24 rabbits. A subset of 6 rabbits were selected, based upon the presence of gross lesions, for complete histopathology examination and bacteriology examination as indicated in the table below. Selected tissues from the remaining 18 rabbits were processed as a pool sample for histopathology examination.

Mandible (AVID 102 000 278): The ventral intermandibular subcutis is focally disrupted by a multilobular, approximately 5 x 3 x 2 cm mass. The mass is composed of pale tan to white, thick creamy material that oozes on section and small areas of bone. The proximal ¼ of the mandible blends seamlessly with the mass.

Kidneys (AVID 102 322 548, 102 080 086, 102 013 280, 097 344 513, and 097 599 512): The capsular surface of the kidneys is multifocally disrupted by 1-3 mm diameter, well demarcated, red depressed areas. On section there is a wedge of subjacent renal tissue that is often red to pale tan.

Liver (AVID 097 608 527): There are numerous, tan, soft, depressed, 1-3 mm diameter areas on the capsular surface of the liver. These areas extend approximately 1-2 mm into the subjacent tissue.

Liver (AVID 102 283 539): The serosal surface of the liver is disrupted by several, slightly raised, pale tan areas.

Liver (AVID 102 311 311): A focally extensive area of the liver is dark brown.

GROSS REPORT**05/21/07****WADDL #2007-6489**

Liver (AVID 101 628 110): The liver is diffusely dark red with a prominent reticular pattern.

Lungs (AVID 097 365 016, 101 841 869, 097 344 513, and 097 608 527): The lungs are mottled dark red to pink, with the dark red areas composing greater than 50% of the total tissue volume. The pleural surfaces are often indented by rib impressions. Moderate amounts of serosanguinous fluid ooze from cut surfaces.

Conjunctiva (AVID 101 810 023): The margin of the eyelids is enlarged by numerous, firm, pale tan to white, 1-3 mm diameter nodules that elevate the surface.

Nasal Cavity (AVID 101 817 555): The nasal cavity is diffusely dark red.

All animals lack significant gross changes in the brain, heart, diaphragm, spleen, adrenal glands, and intestinal tract. All animals have formed feces in the colon.

GROSS DIAGNOSES:

Scanned ID #	Alive/Dead	Samples Taken	Gross Diagnoses
AVID 104 079 380	Dead		No Significant Findings (NSF)
AVID 097 365 016	Dead	Fixed lungs in pool	1. Pulmonary edema and congestion
AVID 101 817 555	Dead		1. Nasal sinus congestion
AVID 102 322 548	Dead	Fixed kidneys in pool	1. Chronic nephritis, multifocal, mild, left kidney
AVID 102 080 086	Alive	Fixed kidneys in pool	1. Chronic nephritis, multifocal, mild, right kidney
AVID 101 825 366	Alive		NSF
AVID 101 841 869	Alive		NSF
AVID 080 863 859	Alive	Full necropsy, lungs for culture	1. Pulmonary edema and congestion, diffuse, moderate
AVID 102 283 539	Alive	Full necropsy, liver for culture	1. Hepatitis, multifocal, mild
AVID 102 031 850	Alive		NSF
AVID 102 013 280	Alive	Bacterial swab of conjunctiva	1. Chronic nephritis, multifocal, mild, right kidney
AVID 102 311 311	Alive	Full necropsy, liver for culture	1. Hepatic necrosis (presumptive), focal, moderate
AVID 101 810 023	Alive	Kidney for culture, bacterial swab of conjunctiva	1. Conjunctivitis, proliferative, chronic, moderate
AVID 097 344 513	Alive	Full necropsy; lungs for culture	1. Pulmonary edema and congestion, diffuse, moderate 2. Chronic nephritis, multifocal, mild
AVID 102 258 803	Alive		NSF
AVID 097 785 581	Alive		NSF
AVID 097 592 081	Alive	Bacterial swab of conjunctiva	NSF
AVID 102 035 332	Alive		NSF

GROSS REPORT

05/21/07

WADDL #2007-6489

AVID 097 599 512	Alive	Fixed kidneys in pool	1. Chronic nephritis, multifocal, moderate to severe, left kidney
AVID 102 107 321	Alive		NSF
AVID 102 000 278	Alive	Full necropsy; bacterial swab of osteomyelitis	1. Osteomyelitis necrosuppurative, chronic with and subcutaneous abscess, mandible
AVID 101 628 110	Alive	Fixed liver in pool	1. Hepatic congestion, diffuse, mild
AVID 097 608 527	Alive	Full necropsy; liver for culture	1. Hepatic necrosis, acute, multifocal, moderate 2. Pulmonary edema and congestion, diffuse moderate
No scannable chip	Alive		NSF

COMMENTS: The cause of the clinical signs in all 24 animals is not grossly evident as the gross lesions are sparse and inconsistent across rabbits. The most severe lesion is the abscessing osteomyelitis in animal AVID 102 000 278. This lesion is most consistent with infection by *Pasteurella multocida*, but similar abscesses are lacking in the other animals. Many of the animals (AVID 102 322 548, 102 080 086, 102 013 280, 097 344 513, and 097 599 512) have renal lesions consistent with infection with *Encephalitozoon cuniculi*. This is a common finding in rabbits, and the lesions in these rabbits are relatively mild and likely not affecting the renal function of these animals. The hepatitis in animal AVID 097 608 527 is strongly suggestive of septicemia, but few of the other animals have similar lesions. Pulmonary edema and congestion, seen in AVID 097 365 016, 101 841 869, 097 344 513, and 097 608 527, are common postmortem findings. The significance of the pulmonary changes requires histopathology. Pooled sections of liver and kidney and a single piece of brain are saved frozen pending histopathology and bacteriology.

WORK PENDING: Histopathology and Bacteriology

Dr. James B. Stanton/TVB/tvb/djr

Phone contact: Results are discussed with Russ Mead on 5/19/2007 2:30 p.m.

WASHINGTON ANIMAL DISEASE DIAGNOSTIC LABORATORY

P.O. Box 647034
Pullman, WA 99164-7034
Phone: (509) 335-9696
Fax: (509) 335-7424

Veterinarian:
Clinic: Dr. Mike Dix
Address: 5001 Angel Canyon Road

Big Water, UT 84741
Phone: (435) 644-2001

Owner: Best Friends Animal Socie
Animal:
Species: Domestic Rabbit (aka European)
Breed:
Age:
Sex:

HISTOPATHOLOGY REPORT

06/01/07

WADDL #2007-6489

Report authorized by: Timothy Baszler, Senior Pathologist

Received: 05/19/07

A complete set of necropsy tissues are examined from animals #097 608 527, 102 000 278, 097 344 513, 102 283 539, 080 863 859, 102 311 311. Lungs, liver, kidneys, and conjunctiva are examined from the "pooled" sample of necropsy tissues.

Brain from all animals except #102 000 278: The brainstem and cerebellum have multifocal, sometimes bilaterally symmetrical areas of rarefaction, necrosis and gliosis. The areas effected include the white matter and gray matter around the fourth ventricle (dorsal brainstem including vestibular nuclei and ventral brainstem) and around the mesencephalic aqueduct (including the peri-aqueductal gray matter), and cerebellar white matter. The lesions are characterized by loss of neuropil, individual or coalescent clear spaces (spongiosis), mildly to markedly increased numbers of astrocytes, which often have large amounts of eosinophilic cytoplasm and eccentric nuclei (gemistocytes), and loose accumulation of microglial cells, sometimes with foamy cytoplasm (gitter cells). Axon sheaths within these areas are often dilated and contain enlarged, eosinophilic axons (spheroids). Rarely, axon sheaths contain macrophages (digestion chambers). There is marked swelling of neuronal soma in effected areas (hydropic degeneration) and some entrapped neuronal cell bodies are shrunken and hypereosinophilic (neuronal necrosis). Adjacent to few affected areas are mild perivascular cuffs (one cell layer thick) of lymphocytes and plasma cells. Both sides of the fornix are similarly affected in animal #097 344 513.

Animals 097 608 527, 097 344 513, and 102 311 311 also have randomly scattered, approximately 100 µm diameter granulomas (compact, expansive aggregates of epithelioid macrophages) surrounded by few lymphocytes and plasma cells. All animals examined have few to several perivascular spaces, at all levels, that are expanded by one to five layers of lymphocytes.

Brain #102 000 278: Few, scattered perivascular spaces are expanded by one to two, incomplete layers of lymphocytes.

Kidneys (All kidneys except one from the “pooled” sample): Less than 10% of the architecture is disrupted by multifocal interstitial infiltrates (each less than 1 mm diameter) of lymphocytes and plasma cells. These areas, and other interstitial areas, are further expanded by linear arrays of moderate amounts of dense fibrous tissue. Entrapped glomeruli are shrunken and almost completely effaced by fibrillar eosinophilic material (glomerulosclerosis). Occasional scattered tubular epithelial cells in the superficial cortex are disrupted by granular, basophilic material that chips out of section (mineralization). Rare tubules contain granular protein casts or small amounts of hypereosinophilic cytoplasmic debris. There are few, small (less than 0.5 mm diameter) aggregates of macrophages, mixed with few lymphocytes and embedded within a matrix of fibrous connective tissue that separated collecting ducts.

Kidneys (most severely affected kidney specimen from “pooled” sample): Over 90% of the architecture is replaced by abundant fibrous tissue mixed with numerous aggregates of lymphocytes and plasma cells (similar to those described above). Tubular basement membranes and Bowman’s capsules are markedly thickened by fibrous tissue. Glomerulosclerosis is prominent and numerous tubules contain granular eosinophilic protein casts.

Liver (all animals): Periportal areas are mildly to moderately expanded by increased amounts of loose fibrous tissue mixed with few to medium numbers of lymphocytes and plasma cells.

Lungs #080 863 859 and #102 311 311: There several scattered foci of alveoli (less than 10% of total sectional area) that contain numerous heterophils mixed with fewer macrophages. Intervascular septa are mildly thickened by macrophages and small amounts of fibrillar eosinophilic material.

Submandibular abscess #102 000 278: The submandibular subcutis is disrupted by large aggregate of necrotic, lysed heterophils mixed with scattered aggregates of mineral. A thick band of dense fibrous tissue encapsulates the necrotic core. The abscess extends into and effaces the adjacent mandibular bone.

Bone marrow #102 000 278: The adipose tissue is replaced by wispy to homogenous eosinophilic to basophilic material (serous atrophy of fat).

Trachea #102 311 311: The lamina propria is expanded by few lymphocytes and plasma cells.

Conjunctiva (“pooled” sample): In one section of conjunctiva approximately 20% of the mucosa is ulcerated and replaced with a thin serous crust of degenerate heterophils. The subjacent propria is expanded by several ectatic squamous lined ducts and several hyperplastic sebaceous glands.

Tissues lacking significant histologic changes include tongue, pituitary gland, thyroid gland, salivary gland, esophagus, heart, diaphragm, spleen, urinary bladder, adrenal gland, stomach, small intestine, large intestine, pancreas, lymph node, and bone marrow.

HISTOLOGIC DIAGNOSES:

1. Encephalomalacia, chronic, multifocal, severe; brain stem, cerebellum, mesencephalon, and fornix (all animals but 102 000 278)
2. Encephalitis, granulomatous, multifocal, random, moderate, (097 608 527, 097 344 513, and 102 311 311)
3. Encephalitis, lymphoplasmacytic, chronic, perivascular, multifocal (all animals)
4. Nephritis, lymphoplasmacytic, chronic, multifocal, mild to severe (all animals)
5. Hepatitis, lymphoplasmacytic, chronic, multifocal, periportal, mild to severe (all animals)
6. Bronchopneumonia, suppurative, acute, multifocal, moderate (080 863 859 and 102 311 311)
7. Abscess, subcutaneous, focally extensive, severe; mandible (102 000 278)
8. Serous atrophy of fat (102 000 278)
9. Tracheitis, lymphoplasmacytic, chronic, segmental, mild to moderate (102 311 311)
10. Meibomian gland hyperplasia with ulcerative conjunctivitis (pooled sample)

COMMENTS: The encephalomalacia seen in five of the six brains is considered the cause of the neurological signs described in the history. The localization of the lesions to the brainstem and mesencephalon is consistent with the clinical signs of head tilt and circling. The precise cause of the malacia is not determined histologically. The sometimes symmetrical distribution of lesions and their limitation to specific areas in the brain suggest a nutritional or metabolic abnormality. Confirming nutritional or metabolic disease can be difficult to impossible with postmortem samples depending on the specific abnormality. Although infectious disease is unlikely since the lesions lack significant inflammation and there is no clinical evidence of contagion, infectious disease cannot be completely ruled out. Tests to rule out viruses are pending, as is consultation with our toxicologist to determine possible nutritional abnormalities that can result in these clinical signs. The bronchopneumonia is likely due to the neurologic deficits resulting in aspiration. The tracheitis may also be related to chronic aspiration secondary to neurologic disease.

The granulomatous encephalitis and the interstitial nephritis are both consistent with chronic infections with *Encephalitozoon cuniculi*. This is a common infection in rabbits and is often subclinical. It is unlikely that *E. cuniculi* is the primary cause of the clinical disease in these rabbits, although it is possible that infections with *E. cuniculi* may have contributed to some of the problems. The submandibular abscess in animal 102 000 278 likely was the main problem for this animal, as the serous atrophy of bone marrow fat suggests emaciation (likely due to inability to eat). The Meibomian gland hyperplasia and conjunctivitis are considered clinically insignificant.

WORK PENDING: Immunohistochemistry, Virus Isolation, Consultation

Dr. James B. Stanton/TVB/tvb/dlg

Phone contact: Results are discussed with Russ Mead on 5/25/2007 4:40 p.m.

Washington Animal Disease Diagnostic Lab

P.O. Box 647034
Pullman, WA 99164-7034
Telephone : (509) 335-9696
Fax : (509) 335-7424

Dr. Mike Dix
5001 Angel Canyon Road

Big Water, UT 84741

Case#: 2007-6489
Report Date: 07/18/07

Submittal Date: 05/19/07
Owner: Best Friends Animal Scty.

Species: Domestic Rabbit (aka European)

Age:
Sex:

Final Report:

Immunohistochemistry- Reported on 07/18/07 Authorized by Tim Baszler, Section Head

IHC for CDV SOP: 807.6.1.05.08.10

Animal	Specimen	Result
	34- Tissue Block Embedded	Not detected
	35- Tissue Block Embedded	Not detected

Previously reported results:

Bacteriology- Last reported on 05/24/07 Authorized by Lindsay Oaks, Section Head

Aerobic Culture SOP: 303.1.04.07.15

Animal	Specimen	Result	Isolate
102311311	Liver	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Streptococcus, Staphylococcus and Corynebacterium.			
102283539	Liver	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Acinetobacter, Corynebacterium and Streptococcus.			
102013280 eye swab	Swab	Moderate	Acinetobacter sp.
102013280 eye swab	Swab	See comment.	
<u>Result Comment:</u> Few colonies of Staphylococcus spp. also isolated. No probable pathogens identified.			
102000278	Swab	See comment.	Pseudomonas sp.
<u>Result Comment:</u> One colony isolated.			

Washington Animal Disease Diagnostic Lab

Aerobic Culture SOP: 303.1.04.07.15

Animal	Specimen	Result	Isolate
101817555 nasal swab	Swab	Moderate	Acinetobacter sp.
101817555 nasal swab	Swab	See comment.	
<u>Result Comment:</u> Few colonies of Staphylococcus, Pseudomonas and Enterobacter also isolated. No probable pathogens identified.			
101810023	Kidney	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Acinetobacter, Staphylococcus, Streptococcus and Micrococcus spp.			
101810023	Swab	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. No probable pathogens identified. Isolates include beta-hemolytic coag negative Staphylococcus, Micrococcus and Bacillus spp.			
097785581	Swab	Moderate	Coag. Neg. Staphylococcus sp.
<u>Result Comment:</u> Isolate is beta-hemolytic.			
097785581	Swab	See comment.	
<u>Result Comment:</u> Few colonies of Enterococcus, Corynebacterium and Acinetobacter also isolated. No probable pathogens identified.			
097608527	Liver	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Acinetobacter, Enterococcus and Corynebacterium.			
097608527	Lung	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Acinetobacter, Corynebacterium, and Micrococcus.			
097344513	Lung	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Staphylococcus, Streptococcus and Corynebacterium spp.			
080863859	Lung	See comment.	
<u>Result Comment:</u> Multiple colony types present in very low numbers suggestive of low level contamination. Isolates include Pseudomonas and Staphylococcus spp.			

Histopathology- Last reported on 07/06/07

Histo-WADDL necropsy (Other) SOP: 0601.3.03.09.18

Animal	Specimen	Result
	Cadaver	See Attached Report

Pathology- Last reported on 06/01/07

Necropsy SOP: 700.3.05.07.13

Animal	Specimen	Result
	Cadaver	See Attached Report

Washington Animal Disease Diagnostic Lab

Virology- Last reported on 06/12/07 Authorized by James Evermann, Section Head

Viral Isolation SOP: 404.1.04.10.20

Animal	Specimen	Result	Isolate
No ID	Brain	Negative	
<u>Result Comment:</u> NOTE: Virus isolation negative to date. Virus recovery from cell culture may require multiple passages and up to 3 weeks. A follow-up report will be sent if a virus is subsequently isolated.			

ADDITIONAL TESTS REQUESTED
(within WADDL)

DATE: 06-4-07 WADDL CASE #: 07-6489

REQUESTED BY: JBS TISSUE / SAMPLE: Tissue blocks 13 and 35

LOCATION OF SAMPLE: Histo

TEST(S) REQUESTED: CDV IHC

HAS SUBMITTING VETERINARIAN BEEN NOTIFIED? YES ☒ NO ☐

COMMENTS:

Spoke with Russ Mead to confirm additional testing.

Form WADDL 010, Version 10-03

RECEIVED WADDL
2007 JUN -4 P 4:49

WADDL IMMUNOHISTOCHEMISTRY FOR INFECTIOUS AGENTS

WADDL # 07-6489	Date in VADDS / Tech 6-5-07 / up	Date Slides Issued 6-6-07	Assigned Pathologist JBS
Veterinarian Dix	Owner Best Friends Animal Socy	Species Rabbit	Code

ASSAY	RESULT					TISSUE/BLOCK
	Control OK	Pathologist Initials/Date	Antigen Detected	Antigen Not Detected	Assay Inconclusive	
Adenovirus	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
BCV	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
BRSV	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
BVDV	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
CCV	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
CDV	<input checked="" type="checkbox"/>	JBS 6-6	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Bronch 13 & 35
Chlamydiaceae	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Coxiella burnetii	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
CWD	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
EHV-1	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
FIP	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
IBR	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Leptospira	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Listeria monocytogenes	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Parvovirus	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
PI3	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sarcocystis neurona	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Scrapie	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
TGE	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
WNV	<input type="checkbox"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Comments:

FOR BILLING ONLY	Charge to:	Teaching Budget		Client	
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WASHINGTON ANIMAL DISEASE DIAGNOSTIC LABORATORY

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Clinic: Dr. Mike Dix
Address: 5001 Angel Canyon Road
Big Water, UT 84741
Phone: (435) 644-2001

Owner: Best Friends Animal Society
Animal:
Species: Domestic Rabbit (aka European)
Breed:
Age:
Sex: Not Reported

SUMMARY REPORT

07/18/07

WADDL #2007-6489

Report authorized by: Timothy Baszler, Senior Pathologist

Received: 05/19/07

All testing at WADDL is complete. As mentioned in the histopathology reports, the lesions in the brains are consistent with the history of circling, head tilt, and other neurologic signs seen in these rabbits. However, no definitive cause is identified. Virus isolation is negative, as is immunohistochemical testing for infection with canine distemper virus.

One-hundred thirty-nine slides of brain are examined and only one slide of caudal brainstem from animal #102 311 311 has an approximately 100 μ m diameter clear space containing an irregularly folded, homogenous eosinophilic structure (ascarid cuticle) with roughly symmetric small points (lateral alae). However, the structure is collapsed, preventing evaluation of any internal structures. The adjacent neuropil is vacuolated with increased numbers of hypertrophic microglial cells.

FINAL DIAGNOSIS:

1. Larval migrans (presumptive), *Baylisascaris procyonis*

COMMENTS: The structure identified in the single section of brain is suggestive of a *Baylisascaris procyonis* larva. The lack of definitively identifiable larvae is common in rabbits with this disease as only a few larvae can be present and yet still cause significant damage to the brain. *B. procyonis* is an ascarid of raccoons, and rabbits are a dead end host for this parasite (i.e., rabbits cannot pass the infection to other animals, including other rabbits). Additional history indicates that raccoons are common on the premises that housed these rabbits (history of raising an orphaned raccoon). Eggs of *B. procyonis* are passed in raccoon feces and can infect rabbits that ingest the raccoon feces. A common source of raccoon feces contamination is when wild raccoons forage in and defecate in bins of rabbit food.

SUMMARY REPORT

07/18/07

WADDL #2007-6489

WORK PENDING: None

Dr. James B. Stanton/TVB/tvb/sls

Phone contact: Called Russ Mead on 6/15/2007 10:34 AM. Spoke with Russ Mead on 6/18/2007 12:35 PM.