



DENVER VETERINARY SPECIALISTS

3695 Kipling Street Wheat Ridge, Colorado 80033
Tel 303-940-1239 Fax 303-420-8360

Text of fax dictated on 03/08/03

March 8, 2003

Martha Rideout, DVM
Alpine Animal Hospital
17776 Hwy 82
Carbondale, CO 81623

RE: Kali Bamesberger

Dear Dr. Rideout:

Thank you for your referral of Deb and Craig Bamesberger for evaluation of Kali, their 6-year-old, spayed female Beagle.

HISTORY: Kali had initially presented to your clinic on February 12th, 2003 for extreme lethargy and anorexia. At that time her most significant clinical findings were a hematocrit of 8% with a normal total protein, and mild serosanguinous vulvar discharge. At that time Kali was not spayed. She was given one whole blood transfusion and was spayed due to the possible pyometra. Kali's hematocrit stabilized at approximately 22% for one week, but on March 3rd, she re-presented for recurrence of anemia and lethargy. Her hematocrit at that time was back down to 8%. Kali had no history of recent vaccinations or other medications although she did have an extensive travel history to Arizona, Utah, and Mexico in the last six months.

Blood count 8%

PHYSICAL EXAMINATION: On presentation here Kali was normothermic and depressed. Her mucous membranes were pale and tacky. On chest auscultation a II/VI holosystolic murmur was heard accompanied by strong bounding pulses. She was tachycardic with a heart rate of 180 beats per minute. She was mildly tachypneic, although lung sounds were within normal limits. On abdominal palpation she had splenomegaly and hepatomegaly.

PROBLEMS AND DIFFERENTIALS: Rule outs for the anemia included blood loss (coagulopathy, neoplasia), increased destruction (immune-mediated hemolytic anemia, infectious), consumption or decrease in production. The most likely cause for the heart murmur was anemia, although we could not rule out primary cardiac disease as well.

Continued...

Immune-Mediated Hemolytic Anemia