Clinical pathology diagnostic challenge: case #18

Signalment: 3 year old intact male German Shepherd

History: Sudden exhaustion noticed two days ago, after a long walk in the park where the animal played a lot with other dogs.

Physical exam observations: icterus, weakness, marked splenomegaly.

Treatment: Received dexamethasone from the referring veterinarian.

CBC results*

| Day 1 | Day 2 |
|---------|---|
| 0.20 | 0.17 |
| 77 | 65 |
| 2.9 | 2.4 |
| - | - |
| - | - |
| 2 | 4 |
| <60 000 | 72 000 |
| 89 | 126 |
| - | - |
| 41.6 | 44.3 |
| 32.0 | 31.9 |
| 0 | 2.2 |
| 0 | 0.4 |
| 9.6 | 9.7 |
| 0 | 0 |
| 0 | 0 |
| | 0.20 77 2.9 - 2 <60 000 89 - 41.6 32.0 0 9.6 |

[•] Moderate hemolysis noticed in each blood test tube.

Clinical chemistry changes

No tests were requested in this case.

Other tests:

Coombs negative
Coagulation tests:
Prothrombin time
Patient: 7.9 seconds
Control: 8.7 seconds
Partial thromboplastin time
Patient: 11.3 seconds
Control: 12.2 seconds
Fibrin or fibrinogen degrada

Fibrin or fibrinogen degradation products (**FDPs**): 10-40 mg/dL

Urinalysis (catheter collection)

Color orange Turbidity turbid Specific gravity > 1.035 6.0 pН Protein 1+ Glucose neg. Ketone bodies neg. Bilirubin 3+ Blood 3+

Using the laboratory changes, submit a differential diagnosis and justify it (pathophysiology). If needed list other possible tests to confirm your diagnosis.