

### CLIENT INFORMATION:

Name: Melinda Moros

Address: 2160 Ann St.  
Concord, CA 94520

Phone: H: (925) 202-7552 W: ( ) -  
ext:

### PATIENT INFORMATION:

Name: Hershey

Sex: MN

Birthday: 11/15/2006

ID: 48081-A

Color: Chocolate

Breed: Labrador Mix

Age: 10 years and 11 months old

Weight: 77.4 lbs.

**Primary Vet:** Dr. Terry Kubicka, Four Corners Veterinary Hospital

### Nova CCX - Nova CCX

10/11/2017 09:39 PM

pH <sup>M</sup>	7.42	7.310-7.500	
pCO <sub>2</sub> <sup>M</sup>	32.6	29.0-36.0 mmHg	
Hct <sup>M</sup>	46	35-54 %	
Hb <sup>M</sup>	15.3	12.5-19.0 g/dL	
Na <sup>+</sup> <sup>M</sup>	147.9	140.0-159.0 mmol/L	
K <sup>+</sup> <sup>M</sup>	4.03	3.70-5.80 mmol/L	
Cl <sup>-</sup> <sup>M</sup>	113.2	105.0-115.0 mmol/L	
Ca <sup>++</sup> <sup>M</sup>	1.42	1.10-1.40 mmol/L	
Mg <sup>++</sup> <sup>M</sup>	0.46	0.30-0.55 mmol/L	
Glu <sup>M</sup>	94	60-110 mg/dL	
Lac <sup>M</sup>	1.3	0.3-1.0 mmol/L	
BUN <sup>M</sup>		mg/dL	
Creat <sup>M</sup>	1.4	0.4-1.8 mg/dL	
A <sup>C</sup>	110.6	mmHg	
HCO <sub>3</sub> <sup>-</sup> <sup>C</sup>	21.4	mmol/L	
BE-ecf <sup>C</sup>	-3.3	mmol/L	
BE-b <sup>C</sup>	-1.6	mmol/L	
O <sub>2</sub> Cap <sup>C</sup>	21.3	mL/dL	
TCO <sub>2</sub> <sup>M</sup>	22.4	23.0-29.0 mmol/L	
Gap <sup>C</sup>	13.4	mmol/L	
Ca/Mg <sup>C</sup>	3.1	mol/mol	

nCa <sup>+</sup> C	1.44	mmol/L
nMg <sup>+</sup> C	0.47	mmol/L
pO <sub>2</sub> <sup>A</sup> M	51.6	29.0-36.0 mmHg
SO <sub>2</sub> % <sup>A</sup> M	86.7	66.0-78.0
SBC <sup>+</sup> C	22.8	mmol/L
P50 <sup>+</sup> C	26.6	mmHg
O <sub>2</sub> Ct <sup>+</sup> C	18.6	mL/dL
BP <sup>A</sup> M	763.2942	mmHg
TempP <sup>A</sup> E		
EnteredHb <sup>A</sup> E		
FIO <sub>2</sub> <sup>A</sup> E		%



**Date:** Oct 11, 2017  
**8pm**

### Pertinent Past History

Diagnosed apocrine gland adenocarcinoma on 7-27-16. Abdominal ultrasound with Dr. Matteucci on 9-8-2016 was unremarkable. On 9-26-2016, Hershey had a left anal sacculotomy and mass removal performed at Four Corners by Dr. Koehler.

After initial oncology consultation at EBVS on 11-15-16, a decision was made to administer carboplatin to treat any microscopic residual disease and potential microscopic systemic disease. Restaging of Hershey at that time revealed no overt metastatic disease. Hershey received the first dose of carboplatin on 11-15-16 and tolerated it well. Final Carboplatin treatment 2/2017.

Owner reports progression of heart murmur and recent radiographs showed cardiomegaly.

Recheck Abd US at primary veterinarian 8/2017 was normal. Recheck bloodwork yesterday was unremarkable aside from mild increase in Ca and owner reports mild increase in kidney value (unsure which and record not available to review).

Cough x months and presently treated with Amoxicillin for possible infectious cause.

History of limb shakiness and occasional weakness, most significant the last 1 week.

### Presenting History

Owner was walking Hershey tonight and pulled him away from eating something outside. When he was pulled away the owner reports that one of his back legs "gave out" and he fell. He was unable to rise for about 5-10 seconds. Since that time Hershey has been walking normally. No change in activity otherwise. No V/D and E/D normally. No further episodes noted.

### Current Medications

Gabapentin  
 Tramadol

### Physical Exam

**GEN:** BARH, T- 101.5, P- 130, R- panting, MM-pink and moist, CRT < 2 sec, Wt- 79#

**Eyes:** Cornea clear and conjunctiva normal OU

**Ears:** Ear canal open, no odor or discharge

**Skin:** Multiple SQ masses, cutaneous mass on dorsal lumbar skin, patchy haircoat cranial chest

**Lymph Nodes:** None enlarged

**Cardiovascular:** Grade III/VI L systolic M, pulses synchronous and palpate within normal limits

**Respiratory:** Eupneic, no crackles or wheezes ausculted

**Abdominal/ Rectal:** Non-painful on palpation, normal formed stool on rectal

**Urogenital:** No abnormal findings

**Musculoskeletal:** Amb x 4, consistent pain on palpation of lumbar spine

**Neurological/ Mentation:** No neurological abnormalities, normal mentation

### **Diagnostics**

Lumbar/Pelvic Radiographs: Multiple disc space narrowing L3-4, L4-5. Pelvis and hips appear normal.

CCP: Creat 1.4, Lac 1.3, K 4.03, iCa 1.42 (sl H), PCV 47%, TP 7.8

BP- unable to measure due to activity/anxiety

### **Assessment**

Episode of pelvic limb weakness R/O IVDD, myelopathy, OA, vascular event

Historic anal gland adenocarcinoma

Hypercalcemia R/O secondary to malignancy vs other

### **Plan**

Discussed evidence of disc space narrowing on radiographs and possible IVDD or OA leading to PL weakness

Advised owner to follow up with primary care veterinarian regarding hypercalcemia (malignancy profile) and bicavitary ultrasound (for murmur and recheck AUS).

Discussed BP when first entering hospital to avoid spurious results

Discussed physical therapy, acupuncture and supplements for possible OA or degenerative disease.

Also advised to continue Gabapentin and consider NSAID if episodes persist or pain is worsening.

Advised owner to monitor for further episodes. Can continue to walk as usual but avoid high impact exercise.

Call with any questions or concerns.

Thank you for referring Hershey Moros to East Bay Veterinary Specialists and Emergency. If you have any questions or concerns regarding our management or recommendations of Hershey's disease, please do not hesitate to contact us at (925) 937-5001.

With regards,

Molly Priest, DVM

Emergency and Urgent Care Veterinarian