

## **USDA-APHIS-Animal Care**



|                                     | ANIMAL                             | WELFARE        | COM             | PLAINT         |                     |
|-------------------------------------|------------------------------------|----------------|-----------------|----------------|---------------------|
| Complaint No. AC20-348              | Date Entered:<br>September 1, 2020 | )              | Processed By:   |                |                     |
| Referred To:                        | ,,                                 | -              |                 | Reply<br>Augus | Due:<br>st 24, 2020 |
|                                     | Facility or                        | Person Compla  | int Filed       |                | <b>,</b>            |
| Name:                               |                                    |                | Custon          | ner No.:       | License No.:        |
| ALPHA GENESIS II Address:           | NC                                 |                | 905             | Email Add      | ragg:               |
| Address.                            |                                    |                |                 | Eman Aud       | iess.               |
| City:                               |                                    | State:         |                 | Phone No.:     |                     |
|                                     | Co                                 | mplainant Info | rmation         | 1              |                     |
| Name:<br>(b) (6), (b) (7)(C), (b) ( | 7)(D)                              |                | Organi:<br>SAEN | zation:        |                     |
| Address:                            |                                    |                |                 | Email Add      | ress:               |
| City:                               |                                    | State:         |                 | Phone No.:     |                     |
| How was the Compla<br>Email         | aint received?                     |                | ·               |                |                     |
| Details of Complaint                |                                    |                |                 |                |                     |
| See Attached                        |                                    |                |                 |                |                     |
| Results:                            |                                    |                |                 |                |                     |
|                                     |                                    |                |                 |                |                     |
|                                     |                                    |                |                 |                |                     |
| Application Kit Prov                | : d                                |                |                 |                |                     |
| Yes: No:                            | ided:                              |                |                 |                |                     |
| Inspector:<br>SIMONE TOMLINS        | SON                                |                |                 |                | Date:               |
| Reviewed By:                        |                                    |                |                 |                | Date:               |

From: <u>APHIS-AnimalCare</u>
To: <u>Rehurek, Sean P - APHIS</u>

Subject: FW: Official Complaint -- Alpha Genesis

Date: Thursday, July 23, 2020 9:41:18 AM

Attachments: 53358-NecropsyReportJan2019toJan72020FOIA.xlsx

**From:** (b) (6), (b) (7)(C) [mailto @cinci.rr.com]

Sent: Tuesday, July 21, 2020 1:12 PM

**To:** Gibbens, Robert - APHIS < robert.m.gibbens@usda.gov>

**Cc:** APHIS-AnimalCare <AnimalCare@usda.gov> **Subject:** Official Complaint -- Alpha Genesis



Stop Animal Exploitation NOW!

Robert M. Gibbens, D.V.M.. Director,

7/21/20

Animal Welfare Operations. USDA-APHIS-Animal Care.

Via e-mail: <u>robert.m.gibbens@usda.gov</u>

animalcare@usda.gov

Dr. Gibbens,

I am contacting you today to file an Official Complaint against Alpha Genesis inc. 56-B-0120 and 56-R-0105. As you know, Alpha Genesis paid a \$12,600 federal fine in July of 2017 for the previous escapes of 28 monkeys (1 of whom was never recovered) and deaths of 3 primates.

Alpha Genesis Communication with the National Institutes of Health in the form of reports relevant to an NIAID contract discuss the causes of death for many primates. The file is attached to this email for your use.

One common term used in this file is "crush injury." In other words, arms, legs, etc do not have a less minor type of injury like a small laceration, instead these animals have injuries where the appendage has been crushed. Six monkeys at Alpha Genesis have these crush injuries.

For example, according to Alpha Genesis records monkey H237 was euthanized because of ". . . systemic infection and possible sepsis secondary to crush injury." The report also states that this monkey had "Arms/legs: necropurulent wounds with strong odor." Purulent means that pus was oozing from the wounds. Pus is made up of dead neutrophils, and takes about 72

hours to develop. The necro part of necropurulent means that the tissue was necrotic (dying), and apparently it had a foul odor. Wounds do not reach this state in a matter of hours. This level of severe deterioration requires multiple days. The post mortem record for this animal does not discuss any form of treatment. Therefore, this incident potentially violates "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that include: (3) Daily observation of all animals to assess their health and well-being." This incident, specifically the injuries which this monkey sustained may violate Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

Monkey FA7B had "Severe crush injury to arms, legs, and face. Lacerations on head, heels, and legs." This monkey was euthanized due to "trauma, rhabdomyolysis, acute renal failure" Rhabdomyolysis is the breakdown of muscle tissue. So, in other words, this monkey had significant trauma, muscle tissue was breaking down, and had kidney failure. It is possible that all of these issues were directly relevant to injuries. This incident may Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

The condition of monkey H12N is described as: "Severe bruising and crush trauma to arms, legs, face, and dorsum. Gums swollen and partially sloughed off." The diagnosis is listed as: "Likely sepsis and shock secondary to crush injury." This monkey is not listed as being euthanized, therefore the only assumption that can be made is that this monkey was simply found dead. Failure to euthanize this monkey would constitute a violation of "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that include: (3) Daily observation of all animals to assess their health and well-being." This incident, specifically the injuries which this monkey sustained may violate Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

Monkey DN2K is described as: "Crush trauma on arms, legs, torso, face. Muscles have multifocal amorphous black regions occasionally coinciding with crush injury." The final diagnosis is "Crush injury/trauma." Again, this monkey is not listed as being euthanized, therefore I must assume that this monkey was simply found dead. Failure to euthanize this monkey would constitute a violation of "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that include: (3) Daily observation of all animals to assess their health and well-being." This incident, specifically the injuries which this monkey sustained may violate Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

Monkey H16H is described as "Severe crush injury to face and ears. Mild to moderate crush trauma to arms." The diagnosis column lists this monkey as "Crush injury, rhabdomyolysis, left ventricular hypertrophy." Again, rhabdomyolysis is the breakdown of muscle tissue. So, in other words, this monkey had significant trauma, muscle tissue was breaking down. Again, this record does not discuss euthanasia. Therefore, failure to euthanize this monkey would constitute a violation of "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that

include: (3) Daily observation of all animals to assess their health and well-being." This incident, specifically the injuries which this monkey sustained may violate Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

Monkey H47L is listed with "Severe crush trauma to face, legs, arms." The diagnosis listing is "Severe crush trauma." Again, this record does not discuss euthanasia. Therefore, failure to euthanize this monkey would constitute a violation of "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that include: (3) Daily observation of all animals to assess their health and well-being." This incident, specifically the injuries which this monkey sustained may violate Sec. 2.38 Miscellaneous (f)(1) "Handling of all animals shall be done as expeditiously and carefully as possible in a manner that does not cause trauma, overheating, excessive cooling, behavioral stress, physical harm, or unnecessary discomfort."

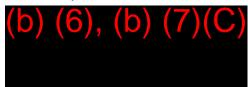
This same file lists four additional monkeys M195, DN4T, 8C4-39, and N185 with "sepsis." Sepsis is defined as "a serious condition resulting from the presence of harmful microorganisms in the blood or other tissues and the body's response to their presence, potentially leading to the malfunctioning of various organs, shock, and death." Sepsis is typically not the result of an infection which receives prompt and adequate treatment. Therefore, sepsis in these monkeys potentially violates "Sec. 2.33 Attending veterinarian and adequate veterinary care (b) Each research facility shall establish and maintain programs of adequate veterinary care that include: (3) Daily observation of all animals to assess their health and well-being."

Clearly this facility potentially under both the license as an animal dealer and/or the registration as a research facility, has failed to properly handle animals, and has also failed to provide adequate veterinary care, resulting in ten entirely preventable monkey deaths. It is clear that the previous fine paid by Alpha Genesis did NOTHING to compel them to end their violations of the federal Animal Welfare Act.

Therefore, I must insist that your office open a full investigation of these new non-compliances immediately, and at the conclusion of your investigation, issue the largest fine allowable under the Animal Welfare Act of \$10,000 per infraction/per animal against the Alpha Genesis registration, 56-R-0105, and at the same time I am calling upon your office to terminate the dealer license of Alpha Genesis 56-B-0120, because the previous federal fine was apparently levied against the animal dealer license of Alpha Genesis, and these new deaths would constitute further serious Animal Welfare Act violations by this same entity.

I look forward to hearing from you in the near future about the fate of this facility.

Sincerely,



Executive Director, SAEN

Attachments: Alpha Genesis Necropsy Data file -- 53358-PhysicalExamJan2019\_Jan72020FOIA

1081-B State Route 28 #280 280 Milford, OH 45150 www.SAENonline.org

513-575-5517

| ID Number | PostMortem # | Death Date | <b>Current Weight</b> | lecropsy Date/Tim | tibiotics Last 48 l |
|-----------|--------------|------------|-----------------------|-------------------|---------------------|
| H237      | 19H-001      | 1/11/2019  | 05.57                 | 1/11/2019 0:00    |                     |
| M342      | 19H-002      | 1/17/2019  | 00.92                 | 1/19/2019 0:00    |                     |
| L370      | 19H-003.2    | 1/19/2019  | 00.99                 | 1/23/2019 0:00    |                     |
| J921      | 19H-005      | 1/30/2019  | 03.42                 | 1/31/2019 0:00    |                     |
| M195      | 19H-006      | 1/31/2019  | 01.60                 | 1/31/2019 0:00    |                     |
| GB57      | 19H-007      | 2/5/2019   | 04.41                 | 2/5/2019 0:00     |                     |
| DX5B      | 19H-009      | 2/16/2019  | 05.10                 | 2/18/2019 0:00    |                     |

| FA7B | 19Н-010 | 3/11/2019 | 11.60 | 3/12/2019 0:00 |  |
|------|---------|-----------|-------|----------------|--|
| M340 | 19H-012 | 3/15/2019 | 00.75 | 3/18/2019 0:00 |  |
| H12N | 19Н-013 | 3/21/2019 | 05.05 | 3/21/2019 0:00 |  |
| H034 | 19H-014 | 3/24/2019 | 07.52 | 3/25/2019 0:00 |  |
| DN4T | 19H-015 | 3/25/2019 | 06.54 | 3/25/2019 0:00 |  |
| DJ6B | 19H-016 | 3/26/2019 | 05.49 | 3/26/2019 0:00 |  |

| H78V   | 19Н-017 | 3/29/2019 | 02.60 | 3/29/2019 0:00 |  |
|--------|---------|-----------|-------|----------------|--|
| 5C4-33 | 19H-018 | 4/3/2019  | 05.09 | 4/3/2019 0:00  |  |
| M386   | 19H-019 | 4/3/2019  | 00.34 | 4/4/2019 0:00  |  |
| M395   | 19H-021 | 4/22/2019 | 00.28 | 4/23/2019 0:00 |  |
| H705   | 19H-022 | 4/23/2019 | 03.77 | 4/23/2019 0:00 |  |
| Н97Е   | 19H-024 | 4/25/2019 | 03.11 | 4/25/2019 0:00 |  |

| 8C4-39 | 19H-025 | 4/30/2019 | 03.90 | 4/30/2019 0:00 |  |
|--------|---------|-----------|-------|----------------|--|
| M718   | 19H-027 | 5/6/2019  | 00.34 | 5/6/2019 0:00  |  |
| M751   | 19H-030 | 5/22/2019 | 00.32 | 5/23/2019 0:00 |  |
| M136   | 19H-031 | 5/23/2019 |       | 5/23/2019 0:00 |  |
| H66K   | 19H-032 | 5/26/2019 | 05.54 | 5/28/2019 0:00 |  |
| M754   | 19H-033 | 5/26/2019 | 00.48 | 5/28/2019 0:00 |  |
| DJ5M   | 19H-034 | 5/29/2019 | 09.12 | 5/30/2019 0:00 |  |
| DN2K   | 19H-035 | 6/12/2019 | 05.52 | 6/13/2019 0:00 |  |
| N102   | 19H-036 | 6/18/2019 | 00.51 | 6/18/2019 0:00 |  |

| M789 | 19H-037 | 6/21/2019 | 00.38 | 6/21/2019 0:00 |  |
|------|---------|-----------|-------|----------------|--|
| CX7A | 19H-038 | 6/23/2019 | 04.06 | 6/24/2019 0:00 |  |
| J878 | 19н-039 | 6/26/2019 | 01.90 | 6/26/2019 0:00 |  |
| BR7W | 19Н-040 | 7/12/2019 | 06.13 | 7/12/2019 0:00 |  |
| N158 | 19H-041 | 7/13/2019 | 00.37 | 7/15/2019 0:00 |  |
| DP9W | 19H-044 | 7/22/2019 | 07.34 | 7/23/2019 0:00 |  |

| N115 | 19H-045 | 7/27/2019 | 00.55 | 7/29/2019 0:00 |  |
|------|---------|-----------|-------|----------------|--|
| L572 | 19H-046 | 7/28/2019 | 01.46 | 7/29/2019 0:00 |  |
| DM5J | 19H-047 | 7/31/2019 | 05.72 | 7/31/2019 0:00 |  |
| N163 | 19H-048 | 7/31/2019 | 00.44 | 7/31/2019 0:00 |  |
| N333 | 19H-049 | 8/6/2019  | 00.46 | 8/6/2019 0:00  |  |
| DX3W | 19H-050 | 8/8/2019  | 10.97 | 8/8/2019 0:00  |  |

| HAFF | 19H-052 | 8/9/2019  | 04.30 | 8/9/2019 0:00  |  |
|------|---------|-----------|-------|----------------|--|
| Н697 | 19H-053 | 8/9/2019  | 09.22 | 8/9/2019 0:00  |  |
| N184 | 19H-056 | 8/11/2019 | 01.38 | 8/13/2019 0:00 |  |
| L558 | 19H-057 | 8/14/2019 |       | 8/14/2019 0:00 |  |
| M793 | 19H-058 | 8/17/2019 | 00.62 | 8/19/2019 0:00 |  |
| H432 | 19H-061 | 9/2/2019  | 06.17 | 9/2/2019 0:00  |  |
| M749 | 19H-062 | 9/2/2019  | 00.49 | 9/2/2019 0:00  |  |
| N185 | 19H-063 | 9/17/2019 | 00.62 | 9/17/2019 0:00 |  |
| N145 | 19H-064 | 9/17/2019 | 00.56 | 9/19/2019 0:00 |  |

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|--------|---------|------------|-------|-----------------|--|
| 5C4-52 | 19H-065 | 9/20/2019  |       | 9/20/2019 0:00  |  |
| N397   | 19H-066 | 9/27/2019  | 00.67 | 9/30/2019 0:00  |  |
| CX4A   | 19H-067 | 9/30/2019  | 10.16 | 9/30/2019 0:00  |  |
| N178   | 19H-068 | 10/2/2019  | 00.89 | 10/2/2019 0:00  |  |
| N626   | 19H-070 | 10/11/2019 | 00.92 | 10/11/2019 0:00 |  |
| DJ7C   | 19H-071 | 10/14/2019 | 06.07 | 10/14/2019 0:00 |  |
| H348   | 19H-073 | 10/15/2019 | 04.07 | 10/15/2019 0:00 |  |
| N159   | 19H-074 | 10/17/2019 | 00.66 | 10/17/2019 0:00 |  |

| M764 | 19Н-076 | 10/23/2019 | 00.90 | 10/23/2019 0:00 |  |
|------|---------|------------|-------|-----------------|--|
| M399 | 19H-077 | 10/28/2019 | 01.23 | 10/29/2019 0:00 |  |
| L551 | 19Н-079 | 11/5/2019  | 02.82 | 11/6/2019 0:00  |  |
| H16H | 19H-080 | 11/6/2019  | 06.62 | 11/6/2019 0:00  |  |
| DJ7F | 19H-085 | 11/15/2019 | 04.69 | 11/15/2019 0:00 |  |
| DP75 | 19H-086 | 11/16/2019 | 05.49 | 11/18/2019 0:00 |  |

| M336 | 19H-088 | 11/21/2019 | 01.24 | 11/21/2019 0:00 |  |
|------|---------|------------|-------|-----------------|--|
| H542 | 19H-089 | 11/22/2019 | 05.80 | 11/22/2019 0:00 |  |
| H47L | 19H-090 | 11/25/2019 | 05.33 | 11/26/2019 0:00 |  |
| L584 | 19H-091 | 12/3/2019  | 02.98 | 12/6/2019 0:00  |  |
| M713 | 19H-092 | 12/6/2019  | 00.68 | 12/6/2019 0:00  |  |
| DL4C | 19H-093 | 12/8/2019  | 07.95 | 12/9/2019 0:00  |  |

## Comments1

BCS: 2.5/5. Mild subcutaneous edema. Face erythemic and swollen with some scabs. Arms/legs: necropurulent wounds with strong odor. Stomach empty. Colon contains diarrhea. Left kidney 18 grams, right kidney 17 grams; pale yellow cortex with pink

BCS: 2/5. Puncture wound on mid-dorsum just right of the spine with extra-abdominal small intestine. Small intestine: extra-abdominal through dorsum, perforation with mottled pink-and-red viscera. Milk in stomach. Normal stool in colon.

BCS: 2/5. Sunken-eyed. Hyperemic serosal surfaces of the GI tract. Colon contains mucoid diarrhea. Mesenteric lymph nodes are black and prominent. Kidneys 1.5 grams each; pale tan cortices, burgundy medullas. Gallbladder: green fluid easily expressed.

BCS: 2.5-3/5. Severe facial trauma with separation of the nasal planum. Section (2 cm) of the distal descending colon had dark red mucosa. Cecum had soft, pasty dark yellow/brown stool. Stomach had bile-colored fluid present. Right kidney 12.5 grams,

BCS: 3/5. Facial bruising and swelling; erythema on arms and inner thighs. Section of small intestine had a torsion with dark brown congested mucosa. Kidneys 3.5 grams in weight, burgundy-colored cortex, white-colored medulla. Adrenals slightly enlarged.

BCS: 1.5/5. Sparse lipid deposits. Mild stenosis in mid-jejunum, still patent. Colon is distended with diarrhea, mucosa is mottled grey. Kidneys 18.5 grams each; right kidney condensed, mottled grey and tan cortex with dark burgundy medulla, friable;

BCS: 1-1.5/5. Muscle atrophy present. Alopecia. Skin ulcers on hip and thighs. Small amount of liquid in stomach. Small intestine hyperemic serosa. Cecum with soft pasty stool. Colon mostly empty with pale mucosa. Left kidney 34.5 grams,

BCS: 3.75/5. Severe crush injury to arms, legs, and face. Lacerations on head, heels, and legs. Mild subcutaneous edema. Ample lipid deposits. Kidneys 35.5 grams each, striations through parenchyma with decreased corticomedullary distinction.

BCS: likely 3/5. Minor puncture wound to top of head. All tissues autolyzed.

BCS: 2/5. Severe bruising and crush trauma to arms, legs, face, and dorsum. Gums swollen and partially sloughed off. Intestinal serosa and mucosa are a medium gray color. Left kidney 14.0 grams, right kidney 13.5 grams; striations on cut section.

BCS: 3/5. Bruising on face, arms, chest, abdomen, legs. Left kidney 17.5 grams, right kidney 14.5 grams; pitted outer surface, burgundy-colored cortex and pink-colored medulla, dilated renal pelvis. Adrenals slightly enlarged. Spleen deep purple in color.

BCS: 2/5. Open wound base of tail. Sunken-eyed. Omentum adhered to intestines. Empty stomach, hyperemic small intestine; cecum: dark grey mucosa; colon: inflammed mucosa with soft/liquid stool. Both kidneys weighed 33.5 grams; tan-colored cortex with red

BCS: 1.75/5. GI tract pushed caudolaterally to the right due to liver. Diarrhea in colon, increased vasculature throughout GI tract. Some prominent lymph nodes about 1 cm long. Kidneys 19.0 grams, dark in color, bulge on cut section.

BCS: 1.0-1.5/5. Sunken-eyed. Thin peritoneal fat. Stomach: small amount of liquid ingesta. Cecum: small rocks present. Colon: inflammed mucosa and liquid stool. Left kidney 8.0 grams, right kidney 8.5 grams in weight; burgundy-colored cortex and medulla.

BCS: 4/5. Small amount of herniated mesentery in umbilicus. GI contents very watery throughout, thin mucosa. Left kidney 25.5 grams, right kidney 23.5 grams; very pale pink cortices, dark burgundy medullas, jagged corticomedullary junction.

BCS: 1.75/5. Peritoneal cavity: all tissues partially autolyzed. Diarrhea in colon. Kidneys 1.0 gram each. Lungs mottled red and purple diffusely. Heart 2.5 grams. Eyes autolyzed. Remaining tissues appear within normal limits.

small intestine. Right kidney 0.5 grams. Heart 2 grams. Remaining tissues appear within normal limits. \*\*Tissues saved for histopathology.\*\* Note:

BCS: 1.5/5. Alopecia. Dry skin. Slightly sunken-eyed. Sparse lipid deposits. GI tract mostly empty; mucosa thin and irregular; gastric mucosa multifocal erythema. Prominent mesenteric lymph nodes (up to 1.5 cm in diameter). Kidneys 16.0 grams each,

BCS: 1/5. Very thin. Subcutaneous tissue has frequent focal to coalescing black lines <2 cm long diffusely; small sores on legs. Sparse lipid deposits. GI tract: watery diarrhea, thin mucosa diffusely, prominent mesenteric lymph nodes.

BCS: 2.5/5. Stomach: lumen full of black liquid. Small intestine had greenish-black ingesta, multifocal areas of redness. Colon: solid, flaky, fecal matter present. Left kidney 13.5 grams, right kidney 13.0 grams. Left lung lobes had multifocal areas of

BCS: 2/5. Mild blue tinge around the mouth. Clear yellow ingesta observed in stomach, cecum, small intestine and colon. Kidneys 0.5 grams each. Heart 2.5 grams. Remaining tissues appear within normal limits.

All tissues autolyzed.

BCS: 1.75/5. Black line of skin following the caudal aspect of the left leg. Right leg amputation site is apposed with no discharge or fluid accumulation; clean muscle and SQ tissues under stitches. Mild air distension throughout GI tract.

BCS: 2.5-3/5. Kidneys 11.5 grams in weight. Spleen deep purple in color. Liver: post-mortem changes. Urinary bladder empty. Lungs: mottled appearance. Heart: left ventricular wall measured a little bit over 1 cm. Thymus, thyroid not examined.

All tissues autolyzed.

BCS: 3/5. Bilateral leg contracture. Ischial callosities infected, blood clots. Stomach distended with brown semi-soft liquid material. Colonic diverticulosis (multiple areas throughout the colon). Left kidney 24.5 grams, right kidney 26.5 grams; mottled

BCS: 3/5. Crush trauma on arms, legs, torso, face. Muscles have multifocal amorphous black regions occasionally coinciding with crush injury. Peritoneal cavity contents variable, autolyzed. Soft/normal stool in colon. Kidneys almost black.

milliary foci ventrally. Heart 4.5 grams. Remaining tissues appear within

BCS: 2.5/5. Small abrasions on hands and feet. Normal stool in colon. Kidneys 1.0 gram each. Heart 2.0 grams. Remaining tissues appear within normal limits. \*\*Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas,

BCS: 1.75/5. Sparse lipid deposits. Stomach empty. Small intestine mostly empty, thin ingesta. Colon: small amount of diarrhea, thin mucosa. Kidneys 21.5 grams each, pale, mildly friable. Liver mildly enlarged with rounded edges. Heart 19.0 grams.

BCS: 1.5-2/5. Scab right side of head. Sunken-eyed. Thin peritoneal fat. Stomach: small amount of liquid ingesta. Gas-filled, thin-walled small intestine. Cecum and colon dark grey, hemorrhagic mucosa, thin-walled, soft and liquid stool.

BCS: 1.5/5. Sunken-eyed. Sparse lipid deposits. Stomach mostly empty; proximal duodenum: thickened mucosa, decreased patency in lumen of four inches of intestine with more patency distally; colon: pasty, pale diarrhea.

BCS: 2.75/5. Dorsal aspects of both feet had open wounds with some necrotic tissue, starting to heal. Left kidney 1.5 grams, right kidney 2.0 grams. All lung lobes diffusely mottled red to dark purple, firm. Heart 3.0 grams.

BCS: 3-3.5/5. Bruising and bite marks to face, chest, arms and legs; subcutaneous hematomas on chest area. Periorbital swelling. Messy tail. Stomach distended with gas and liquid ingesta, grass. Small intestine distended with gas.

BCS: 2/5. Stomach empty. Small intestine with scant yellow liquid. Colon with dark grey mucosa, diarrhea. Some prominent mesenteric lymph nodes. Left kidney 1.5 grams, right kidney 2.0 grams. Heart 2.5 grams. Remaining tissues appear within normal limits.

BCS: 1.5/5. GI tract: sparse gastric ingesta; diarrhea in colon; thickened colonic mesentery. Kidneys 6.0 grams each, pale tan cortices, magenta medullas. Lungs mottled red and pink. Heart 7.5 grams, scant pericardial effusion.

BCS: 1.75/5. Focal, poorly demarcated intestinal lesion at the root of the mesentery; mass had irregular texture and raised white foci. Nearby mesentery was thickened with multifocal white raised foci about 2-3 mm in diameter. Intestine was thickened,

BCS: 1.75/5. Facial abrasions, bruising on right wrist. Green diarrhea in colon. Kidneys 3.0 grams each. Liver: multifocal circular areas of yellow viscous exudate, 1-3 mm in diameter- more severe on right lobe. Lungs dark red. Remaining tissues appear

BCS: 1.5/5. Rough coat. Sunken-eyed. Thin peritoneal fat. Stomach biletinged, empty. Small intestine thin-walled. Cecum: small amount of liquid feces. Colon: thin-walled, empty. Left kidney 4 grams, right kidney 3.5 grams; light tan-colored cortex

BCS: 3.5/5. Right scrotal hernia containing mesentery; herniated content is darker than that in peritoneal cavity. Stomach mucosa dark grey. Kidneys pale, mottled grey. Adrenals: dark medulla. Liver black. Gallbladder: yellow fluid easily expressed.

BCS: 2/5. Small intestine: loops were slightly tangled and the mucosa was dark red/grey in color. Cecum: red-colored mucosa. Colon: red-colored mucosa, inflammed with blood-tinged liquid stool. Left kidney 11 grams, right kidney 10.5 grams; tightly

BCS: 3.5-4/5. Swollen thighs with bruising; bruising to face, upper arms, legs. Left kidney 26 grams, right kidney 25 grams; brown cortex and light brown medulla, embedded in fat. Adrenals normal, embedded in fat. Spleen deep purple in color.

All tissues autolyzed.

BCS: 2/5. Sunken-eyed. Sublumbar lymph nodes are black. Serosal and mucosal surfaces of GI tract are medium to dark grey. Prominent Peyer's patches. Normal and soft stool in distal colon, liquid stool in proximal colon.

BCS: 2/5. All tissues autolyzed.

BCS: 1.5-2/5. Rough coat. Left ear canal was closed; examination revealed inflammation down to inner ear. Thin peritoneal fat. Empty stomach. Hyperemic dark red-colored mucosa in small intestine. Mild inflammation in cecal mucosa. No evidence of

BCS: 1-1.5/5. Very thin. Rough coat. Previously enucleated right eye. Thin peritoneal fat. Empty stomach, very little fecal material throughout GI tract, thin GI mucosa. Thyroid not examined. Remaining tissues appear within normal limits.

BCS: 2/5. GI tract: 2.5 cm mid-jejunum intussusception, region is mottled dark purple and swollen. Kidneys 2.0 grams each; dilated vessels at corticomedullary junction. Lungs consolidated, mottled red/purple, adhesions to pleura, thick yellow pleural

BCS: 0-1/5. Emaciated. Bruising on upper lip. Left kidney 1.0 gram, right kidney 4.5 grams; possibly purulent material in medulla; autolysis. Heart 3.5 grams, unremarkable. Eyes, peritoneal cavity, GI tract, pancreas autolyzed. Thymus not readily seen.

BCS: 4.75/5. Peritoneal contents partially autolyzed. Stomach distended with clear fluid. Colon contains hemorrhagic diarrhea, mucosa thin and smooth. Left kidney 20.5 grams, right kidney 21.0 grams; friable, pale cortices and burgundy medullas.

BCS: 2/5. All tissue autolyzed.

BCS: 2.5/5. Subcutaneous edema. Peritoneal cavity: 150 mL straw-colored abdominal free-fluid; fluid extended up to spermatic cord. GI tract: mesentery pink and mottled; serosal surfaces of the GI tract have irregular texture; small intestinal serosa and

BCS: 3/5. Brain tissue: no gross abnormalities apparent. GI tract: descending colonic serosa diffusely covered in 2 mm white slightly raised foci; normal stool in colon. Kidneys 2.5 grams each. Gallbladder: green fluid easily expressed. Heart 3.0 grams.

BCS: 3/5. Gallbladder empty. Lungs red/pink mottled appearance. Thyroid not examined. Remaining tissues appear within normal limits.

BCS: 2/5. Thin over hip bones and spine, with significant periumbilical lipid deposits. Mild subcutaneous edema. Fat is diffusely soft with scattered pink lesions having a nearly granular texture. Peritoneal cavity: contents adhered to right side of

BCS: 1-1.5/5. Rough coat. Sunken-eyed. Thin peritoneal fat. Inflammed mucosa throughout the GI tract; enlarged mesenteric lymph nodes; liquid/pasty stool in cecum, liquid in colon. Each kidney weighed 19 grams, tan-colored cortex with red striations;

BCS: 3/5. Laceration on caudal dorsum (back). Lumbar spine severed; some GI tract protruding from wound. Soft stool in colon. Kidneys 2.0 grams each. Heart 2.5 grams. Remaining tissues appear within normal limits.

BCS: 1.5-2/5. Sunken-eyed. Thin peritoneal fat. Stomach: inflammed mucosa with small amount of liquid ingesta; small intestine: dark red-colored mucosa; cecum and colon: inflammed mucosa with liquid stool. Left kidney 4.0 grams, right kidney 3.5 grams;

BCS: 3/5. Sparse clear free fluid in peritoneal cavity. Left kidney 4.5 grams, right kidney 4.0 grams. Heart 8.0 grams. Remaining tissues appear within normal limits. \*\*Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart,

BCS: 2/5. Sunken-eyed. Abdominal cavity with approximately 10 mL clear fluid present. Stomach: edematous mucosa, small amount of bile-tinged fluid. Small intestine: pale pink mucosa. Cecum: dark red/brown-colored liquid stool. Colon: soft formed stool.

BCS: 3/5. Severe crush injury to face and ears. Mild to moderate crush trauma to arms. Small intestine: green-tinged ingesta. Left kidney 15.5 grams, right kidney 16.0 grams; decreased corticomedullary junction. Left ovary: large follicle present.

BCS: 1.5/5. Stomach and small intestine distended with air and yellow-tinged ingesta; yellow liquid diarrhea in colon; proximal colon is thickened and firm. Left kidney 15.5 grams, right kidney 14.5 grams; dark burgundy corticomedullary junctions.

BCS: 2/5. Peritoneal cavity: 50 mL straw-colored free fluid noted. Stomach: mild-to-moderate air distension. Cecum adhered to proximal colon, firm, mucosa thickened and mottled black, grey, and pink. Left kidney 11.5 grams, right kidney 12.0 grams.

BCS: 1.75/5. GI tract: soft stool and diarrhea in the colon. Kidneys 6.0 grams each, irregular corticomedullary junctions, dark red medullas. Heart 5.0 grams in weight. Remaining tissues appear within normal limits. BCS: 4/5. Left kidney 16.0 grams, right kidney 16.5 grams; pale cortices and dark medullas with irregular corticomedullary junctions, friable. Liver: mildly increased reticular pattern. Gallbladder: green fluid easily expressed. BCS: 3/5. Severe crush trauma to face, legs, arms. Left kidney 14.5 grams, right kidney 14.0 grams. Heart 19.5 grams, LVFW 9 mm, RVFW 1 mm. Remaining tissues appear within normal limits. Partial autolysis of skin. Eyes autolyzed. Peritoneal cavity partial autolysis. GI tract partial autolysis, full of ingesta. Kidneys: partial autolysis; left kidney 6.5 grams, right kidney 7.0 grams; very friable, burgundy-colored cortex and medulla. BCS: 1.75/5. GI tract: colonic diameter is 0.5 cm with two distinct regions of 2.5 cm that are each about 4 cm long; watery diarrhea in colon. Kidneys 2.5 grams each. Heart 3.0 grams in weight. Remaining tissues appear within normal limits. BCS: 2/5. Subcutaneous edema. GI tract: 5 cm portion of mid-colon is thickened, hyperemic serosa with irregular texture; black diarrhea in colon; green bile in duodenum; black ingesta in rest of small intestine. Left

kidney 41.5 grams, right kidney

| Comments2  | Comments3   |
|--|---|
| medulla, rounded. Liver mottled pale yellow and pink, mildly friable. Gallbladder: green fluid easily expressed. Uterus mildly enlarged and contained gelatinous red-and-cream fluid. Caudodorsal lungs mottled red, foamy on cut section. Heart 24.5 grams, | pericardium mildly opaque, 1 mL serous free<br>pericardial fluid. Remaining tissues appear within<br>normal limits. **Tissues saved for histopathology:<br>spleen, kidneys, pancreas, adrenals, liver, lungs,<br>heart, stomach, small intestine, cecum, colon.** |
| Kidneys 4.0 grams each, pale. Spleen enlarged. Gallbladder: green fluid easily expressed. Heart 5.0 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenals, pancreas, liver, lungs, heart,      | stomach, small intestine, cecum, colon.**   |
| Heart 5.0 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**  |   |
| left kidney 12.0 grams; light brown-colored cortex and medulla with red-colored corticomedullary junction. Adrenals slightly enlarged. Urinary bladder empty. Light pink-colored lung lobes. Heart: mild left ventricular hypertrophy.                       | Thyroid not examined. Remaining tissues appear within normal limits.  |
| Urinary bladder empty. Thyroid not examined.<br>Remaining tissues appear within normal limits.   |   |
| left kidney appears normal. Heart 18.5 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenals, liver, lungs, heart, stomach, pancreas, small intestine, cecum, colon.**                         |   |
| right kidney 32.5 grams; burgundy-colored cortex and medulla, mottled appearance on outer surface. Adrenals slightly enlarged. Spleen deep purple in color, friable. Liver firm, rounded edges, burgundy in color. Gallbladder full. Urinary bladder empty.  | Uterus: post-c-section incision, sutures intact. Lungs bright pink in color, hemorrhagic on cut section. Heart: mild left ventricular hypertrophy. Brain examined- no gross abnormalities found. Thyroid not examined. Remaining tissues appear within normal I   |

| Gallbladder: green fluid easily expressed. Uterus enlarged, contains partial placenta. Heart 55.5 grams, left ventricular free wall 1.2 cm, right ventricular free wall 2 mm. Remaining tissues appear within normal limits.                                       | **Tissues saved for histopathology: spleen,<br>kidneys, adrenals, liver, lungs, heart, stomach,<br>pancreas, small intestine, cecum, colon, uterus.**   |
|--|---|
| Liver: rounded edges. Gallbladder: yellow fluid easily expressed. Edematous lungs. Heart: 20.5 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenal glands, pancreas, liver, lung, heart, stomach    | small intestine, cecum, colon.**  |
| Liver: hepatomegaly; firm, rounded edges that were pale yellow/white in color; dark red/red-colored lobes with increased hepatocellular pattern. Urinary bladder empty. Lungs collapsed, pink in color. Heart: left ventricular hypertrophy.                       | Thymus, thyroid not examined. Remaining tissues appear within normal limits.  |
| striations, burgundy-colored medulla. Adrenals<br>enlarged. Spleen dark purple in color. Liver:<br>hepatomegaly, increased hepatocellular pattern.<br>Gallbladder engorged with bile. Urinary bladder<br>empty. Uterus mildly enlarged with bloody<br>endometrium. | Lungs pale pink in color. Thymus, thyroid not examined. Remaining tissues appear within normal limits.  |
| Liver 595.0 grams, severely enlarged with rounded edges; right medial lobe especially prominent, extends to caudal abdomen; mildly friable diffusely, mostly brown in color with a band of white across cranial portion of lobes that extends about 1 - 1.5 cm     | into the parenchyma. Lungs mottled red and purple diffusely, left lobes adhered to body wall. Heart 22.5 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenals, liver, lung, heart, pancreas, sto |

| Right adrenal gland larger than the left. Gallbladder empty. Urinary bladder empty. Uterus enlarged, normal post-partum. Lungs: bright pink/light pink mottled appearance, dense, frothy. Thymus, thyroid not examined. Remaining tissues appear within normal | limits.   |
|--|---|
| Liver mildly enlarged with rounded edges and increased reticular pattern. Gallbladder easily expressed. Right lungs mottled red and pink. Heart 13.0 grams. Remaining tissues appear within normal limits.   | **Tissues saved for histopathology: spleen,<br>kidneys, adrenal glands, liver, lungs, heart,<br>stomach, small intestine, cecum, colon.**   |
| **Tissues saved for histopathology: spleen, kidneys, adrenal glands, pancreas, liver, lung, heart, stomach, small intestine, cecum, colon.**   |   |
| diarrhea, mild dehydration.  |   |
| indistinct corticomedullary junctions. Adrenals mildly enlarged. Gallbladder: green fluid easily expressed. Enlarged uterus, hemorrhagic endometrium. Heart 19.0 grams; left ventricular free wall 5 mm; right ventricular free wall 1 mm. Remaining tissues   | appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenals, pancreas, liver, lung, heart, stomach, small intestine, cecum, colon, thyroid, uterus.** Note: Carrying newborn on admission to clinic. Infant was failing to thriv |
| Left kidney 8.0 grams, right kidney 9.0 grams; pale tan. Gallbladder: blue-green fluid easily expressed. Heart: 10.0 grams. Remaining tissues appear within normal limits.   | **Tissue saved for histopathology: spleen,<br>kidneys, adrenal glands, liver, lungs, heart,<br>pancreas, stomach, small intestine, cecum, colon,<br>thyroid, mesenteric lymph node, subcutaneous<br>tissue with body wall.**                                    |

| dark discoloration, focal area of consolidation,<br>friable. Right lung lobes friable. Heart 14.0 grams.<br>Remaining tissues appear within normal limits.  |   |
|---|---|
| Stomach and duodenum: liquid, curdling ingesta; thin mucosa throughout. Cecum and colon: diarrheal contents bright green. Kidneys 3.5 grams each. Gallbladder: dark blue-green fluid easily expressed. Lungs: about 3 mL serous pleural effusion; lungs       | diffusely condensed and firm, medium pink in color. Heart 3.0 grams. Remaining tissues appear within normal limits. **Tissues saved for histopathology: spleen, kidneys, adrenals, liver, lungs, heart, stomach, small intestine, cecum, colon.**               |
| Remaining tissues appear within normal limits.  **Tissues saved for histopathology.**   |   |
| appearance on outer surface, pale tan cortex with red striations, pale renal medulla, well-demarcated renal calyces. Adrenals slightly enlarged, embedded in fat. Spleen slightly enlarged, mottled appearance. Liver very firm, light brown in color,        | mild increase in hepatocellular pattern, rounded edges. Gallbladder: yellow bile. Urinary bladder empty. Uterus enlarged, post-caesarean section incision. Lungs pale pink in color. Thymus, thyroid not examined. Remaining tissues appear within normal limit |
| Adrenals friable. Spleen friable, almost black. Pancreas dark, mottled. Liver almost black, mildly rounded, friable. Multiple adhesions present in pleural cavity. Froth in trachea. Lungs mottled dark red and pink. Heart: left ventricular free wall 4 mm, | right ventricular free wall 1 mm. Eyes, gallbladder, urinary bladder, uterus, thymus, thyroid appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, stomach, small intestine, cecum, colon.**   |
| nissue saved for nistopathology: spieen, kidneys, adrenal glands, liver, lungs, heart, stomach, small intesting, secum, colon **  |   |

| stomach, small intestine, cecum, colon.** Note: Dam pulled at the same time for severe weight loss and bloody diarrhea; diarrhea not resolved.  |   |
|---|---|
| Remaining tissues appear within normal limits.  **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**  |   |
| Kidneys 6.5 grams in weight, brown-colored cortex and dark red-colored medulla. Adrenals slightly enlarged. Liver dark burgundy in color with mottled appearance. Gallbladder full. Urinary bladder normal/empty. Lungs bright pink in color.                 | Thymus, thyroid not examined. Remaining tissues appear within normal limits.  |
| Left kidney 21.5 grams, right kidney 23.0 grams; mottled gray, red and purple; indistinct corticomedullary junctions; portions of cortex adhered to kidneys. Liver enlarged, rounded edges, increased reticular pattern, irregular-textured surface.          | Gallbladder severely distended with dark green bile, unable to express; common bile duct also severely distended. Urinary bladder normal, empty. Heart 34.5 grams; tricuspid valve is thickened and mildly opaque with an irregular surface; mitral valve is mi |
| Remaining tissues appear within normal limits.  **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**  |   |
| Cecum: mild inflammation and distended with gas. Colon thin-walled, liquid stool. Left kidney 16.5 grams, right kidney 11.0 grams; both kidneys were pale with dark red mottled color on outer surface, firm with a pitted surface; right kidney was shrunken | and firm. Adrenals embedded in fat. Spleen deep purple in color. Liver firm with rounded edges; yellow/light brown mottled appearance; increased hepatocellular pattern. Gallbladder: yellow/greencolored bile. Urinary bladder empty. Lungs red/dark red mott  |

| **Tissue saved for histopathology: spleen, kidneys, adrenal glands, pancreas, liver, lungs, heart, stomach, small intestine, cecum, colon.**   |   |
|--|---|
| Remaining tissues appear within normal limits.  **Tissue saved for histopathology: spleen, kidneys, adrenal glands, pancreas, liver, lungs, heart, stomach, small intestine, cecum, colon.**   |   |
| especially on the mesenteric side, from several centimeters of small intestine to several centimeters of colon. Small blind pouch about 2 cm in diameter may be atrophied cecum; serosal surface was rough with multifocal to coalescing white raised lesions. | Enlarged mesenteric lymph nodes. Left kidney 19.0 grams, right kidney 18.0 grams. Pancreas mildly thickened. Liver severely enlarged, firm. Gallbladder normal, empty. Heart 25.0 grams. Remaining tissues appear within normal limits. **Tissue saved for hist |
| within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, stomach, small intestine, cecum, colon. Liver culture.**  |   |
| anf light pink medulla. Gallbladder full. Urinary bladder empty. Thymus, thyroid not examined. Remaining tissues appear within normal limits.  |   |
| Gonads: right spermatic cord swollen. Pleural cavity contents adhered together, sparse serous fluid. Foam in trachea. Lungs firm, mottled red and pink, adhered to pleural cavity. Heart: left ventricular free wall 11 mm, right ventricular free wall 4 mm;  | diffuse milliary red foci on epicardium, sparse pericardial effusion. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, stomach, small intestine, cecum, colon, right spe |

| adhered renal capsule, brown-colored cortex and inflammed red medulla. Liver red in color. Gallbladder empty. Urinary bladder empty. Heart: left ventricular hypertrophy, left ventricular wall was 1 cm thick, white colored apex.            | Thymus, thyroid not examined. Remaining tissues appear within normal limits. Note: this animal was a chronic diarrhea patient that was rejected by group and moved to a single cage. **Tissue saved for histopathology.**                                      |
|--|--|
| Pancreas normal, embedded in fat. Thymus, thyroid not examined. Remaining tissues appear within normal limits.   |  |
| Kidneys 8.5 grams, pale cortices, post-mortem changes. Liver: diffuse multifocal pale amorphous areas (1-2 cm each) throughout parenchyma. Gallbladder: yellow fluid, easily expressed. Lungs mottled dark red, light foam on crossection.     | Heart 11.5 grams (0.52% body weight), prominent coronary vessels; left ventricular free wall 8 mm, right ventricular free wall 2 mm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, |
| fecal material in colon. Left kidney 16.5 grams, right kidney 16.0 grams; burgundy-colored renal cortex and medulla. Adrenals slightly enlarged. Spleen deep purple in color. Liver burgundy-colored. Gallbladder full. Urinary bladder empty. | Thymus, thyroid not examined. Remaining tissues appear within normal limits.   |
|  |  |
| effusion. Heart 3.5 grams. Remaining tissues appear within normal limits. **Culture: pleural exudate. Tissue saved for histopathology: spleen, kidneys, adrenals, liver, lungs, heart, stomach, pancreas, GI, cecum, colon.**                  |  |
| Remaining tissues appear within normal limits.  **Culture: kidney.**   |  |

| Liver enlarged, rounded edges, pale and friable. Dark red mottled lungs. Heart 24.5 grams (0.31% body weight). Remaining tissues appear within normal limits.   | **Tissue saved for histopathology: spleen,<br>kidneys, adrenal glands, liver, lungs, heart,<br>stomach, small intestine, cecum, colon.**  |
|---|---|
| mucosa are dark purple; soft stool and normal stool in the colon. Kidneys 27.0 grams each; distended vessels at the corticomedullary junction. Liver: increased reticular pattern, mildly enlarged. Gallbladder: green fluid easily expressed.  | Pleural cavity: 220 mL flocculent pink-tinged free-fluid. Lungs diffusely dense and firm, smooth and not spongy in texture, white. Heart 74.5 grams (0.73 % body weight); right ventricular free wall 4 mm, left ventricular free wall 9 mm; mitral valve opaqu |
| Remaining tissues appear within normal limits.  **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lung, heart, stomach, small intestine, cecum, colon, brain.**  |   |
|   |   |
| peritoneum. GI tract: portion of cecum, colon, and small intestine adhered together; cecum and proximal colon are partially impacted with plant material. Kidneys 21.5 grams each. Spleen rounded. Liver: round edges, mildly pale and mottled. | Lungs foamy on cross-section. Heart 25.0 grams. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lung, heart, stomach, small intestine, cecum, colon.**                                |
| pale, tan-colored medulla with red-colored corticomedullary junction. Adrenals slightly enlarged. Spleen: rounded edges. Liver: hepatomegaly. Gallbladder empty. Urinary bladder empty. Pale pink-colored lungs. Thymus, thyroid not examined.  | Remaining tissues appear within normal limits.  **Tissue saved in formalin.**   |
| **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, pancreas, lungs, heart, stomach, spleen, small intestine, cecum, colon.**  |   |

| tan-colored cortex, burgundy-colored medulla. Spleen: dark red/purple mottled appearance. Urinary bladder empty. Thyroid not examined. Remaining tissues appear within normal limits. ** Tissue saved for histopathology.**                                    |   |
|--|---|
| stomach, small intestine, cecum, colon, brain.**   |   |
| Kidneys 8 grams in weight, tan-colored cortex, light pink medulla. Pancreas prominent in size. Liver firm, rounded edges, yellow/brown mottled appearance. Gallbladder empty. Urinary bladder empty. Left lung lobes had mottled appearance (ddx post-mortem); | appear within normal limits. **Tissue saved for |
| Heart: 30.0 grams, LVFW 10 mm, RVFW 2 mm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**                          |   |
| Liver pale. Heart 27.0 grams in weight, LVFW 7mm, RVFW 2mm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**        |   |
| Lungs mottled pink and red. Heart 24.5 grams in weight, LVFW 1.1 cm, RVFW 3 mm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidney, adrenals, liver, lungs, heart, stomach, small intestine, cecum, colon,       | pancreas. Abdominal fluid analysis.**           |

| **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon.**   |   |
|--|---|
| Uterus: enlarged, hemorrhagic (gravid). Heart: LVFW 9 mm, RVFW 1 mm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, pancreas, stomach, small intestine, cecum, colon, | uterus.**   |
| **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lung, heart, pancreas, stomach, small intestine, cecum, colon.**  |   |
| Adrenals, spleen, pancreas, liver: partial autolysis. Gallbladder, Urinary bladder: empty. Uterus: partial autolysis. Pleural cavity: small amount of blood present in thoracic cavity. Thymus, upper respiratory: partial autolysis.                          | Lungs: partial autolysis; dark red/pink mottled appearance. Thyroid not examined. Heart: partial autolysis. Musculoskeletal: muscle and subcutaneous bruising on chest and inner thighs.  |
| **Tissue saved for histopathology: spleen, kidneys, adrenal glands, pancreas, liver, lungs, heart, stomach, small intestine, cecum, colon.**   |   |
| 38.5 grams; enlarged, rounded; pale cortices with pink medullas; mildly friable. Adrenals friable. Spleen rounded. Liver: mildly rounded edges. Gallbladder easily expressed. Gravid uterus, T1 fetus. Heart 53.0 grams (0.67% body weight); left ventricular  | free wall 0.9 cm, right ventricular free wall 0.1 cm. Remaining tissues appear within normal limits. **Tissue saved for histopathology: spleen, kidneys, adrenal glands, liver, lungs, heart, stomach, small intestine, cecum, colon.** |

| Tissue           | Tissue Sent To                        | Summary/Dx   |
|------------------|---------------------------------------|--|
|                  |                                       | Euthanasia: systemic infection and possible sepsis secondary to crush injury. Left-sided renal failure. Hepatic lipidosis. Noncardiogenic pulmonary edema secondary to inflammation. Pericarditis. Possible early pregnancy. |
|                  |                                       | Euthanasia: trauma, extra-abdominal perforated small intestine. Acute renal failure.   |
|                  |                                       | Enterocolitis with secondary renal failure.  |
|                  |                                       | Trauma: acute renal failure secondary to trauma, rhabdomyolysis.   |
|                  |                                       | Trauma: small intestinal torsion, possible sepsis and acute renal failure.   |
| Saved - Sent to: | Antech<br>Diagnostics                 | Euthanasia: chronic colitis, mild jejunal stenosis.<br>Right kidney failure pending histopathology.  |
| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02411669 | Euthanasia: chronic renal failure.   |

|                  |                                       | Euthanasia: trauma, rhabdomyolysis, acute renal failure, retained placenta.                   |
|------------------|---------------------------------------|---|
|                  |                                       | Unable to determine: autolysis.   |
|                  |                                       | Likely sepsis and shock secondary to crush injury.  |
|                  |                                       | Trauma: acute renal failure, rhabdomyolysis, hepatomegaly, left ventricular hypertrophy.      |
|                  |                                       | Euthanasia: multisystemic. Chronic renal failure, colitis, typhlitis, possible sepsis.        |
| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02411613 | Euthanasia: hepatomegaly pending histopathology. Lung congestion, possible chronic infection. |

|                  |                                       | Euthanasia: multisytemic, lung congestion, colitis, renal failure.  |
|------------------|---------------------------------------|---|
|                  |                                       | Enterocolitis with secondary renal failure and reactive hepatopathy. Probable post-mortem congestion of right lung lobes. |
|                  |                                       | Probable enterocolitis. Possible pneumonia.   |
|                  |                                       | Euthanasia: failure to thrive.  |
| Saved - Sent to: | Antech<br>Diagnostics                 | Euthanasia: gastroenteritis with secondary renal insufficiency and mesenteric lymphadenopathy. Post-partum uterus.        |
| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02762056 | Euthanasia: enterocolitis with secondary renal insufficiency. Possible fat necrosis pending histopathology.               |

| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02762136 | Euthanasia: possible sepsis, possible pneumonia, acute renal failure.  |
|------------------|---------------------------------------|--|
|                  |                                       | Maternal neglect.  |
|                  |                                       | Unable to determine: autolysis.  |
| Saved - Sent to: | Antech Diagnostics NYBC02932361       | Pneumonia pending histopathology, enterocolitis. Healing right leg amputation. Possible left leg focal dermatitis. |
| Saved - Sent to: | Antech<br>Diagnostics                 | Left ventricular hypertrophy.  |
|                  |                                       | Unable to determine due to autolysis.  |
|                  |                                       | Euthanasia: multisystemic, diverticulosis, leg contracture.  |
| Saved - Sent to: | Antech<br>Diagnostics                 | Crush injury/trauma. Probable over exertion.   |
|                  |                                       | Euthanasia: maternal neglect and failure to thrive with foster dam.  |

|                  |                                       | Failure to thrive.  |
|------------------|---------------------------------------|---|
|                  |                                       | Euthanasia: enterocolitis with secondary renal failure. Mild hepatic lipidosis.   |
|                  |                                       | Multisystemic: enteritis, acute renal failure.  |
| Saved - Sent to: | Antech Diagnostics NYBC02762163       | Euthanasia: multisytemic. Biliary stasis possibly secondary to enterocolitis pending histopathology. Possible renal failure and endocarditis. |
|                  |                                       | Pneumonia, trauma.  |
| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02762065 | Multisystemic- trauma, chronic renal failure, enteritis.  |

|                  |                                       | Colitis.  |
|------------------|---------------------------------------|---|
| Saved - Sent to: | Antech<br>Diagnostics                 | Euthanasia: colitis with secondary renal failure.   |
| Saved - Sent to: | Antech Diagnostics NYBC02762083       | Euthanasia: intestinal mass, possible neoplasia. Hepatitis. Pending histopathology.                         |
| Saved - Sent to: | Antech<br>Diagnostics<br>NYBC02762074 | Multifocal suppurative hepatitis. Possible colitis and pneumonia.   |
|                  |                                       | Failure to thrive, renal failure.   |
| Saved - Sent to: | Antech Diagnostics NYBC02782971       | Possible DIC and systemic infection with pleuropneumonia. Right scrotal hernia with mesentery fat contents. |

| Saved - Sent to: | Antech Diagnostics NYBC02782952 | Possible small intestinal torsion, acute hemorrhagic enterotyphlocolitis, left ventricular hypertrophy. |
|------------------|---------------------------------|---|
|                  |                                 | Euthanasia: rhabdomyolysis secondary to trauma, acute renal failure.                                    |
|                  |                                 | Unable to determine due to autolysis.   |
| Saved - Sent to: | Antech Diagnostics NYBC02782999 | Pending histopathology: pulmonary edema, left ventricular hypertrophy.                                  |
|                  |                                 | Unable to determine: autolysis.   |
|                  |                                 | Euthanasia: enteritis, inner ear infection.   |
|                  |                                 | Euthanasia: enteritis, failure to thrive.   |
| Saved - Sent to: | Antech<br>Diagnostics           | Euthanasia: mid-jejunal intussusception, purulent pneumonia pending culture, possible sepsis.           |
|                  |                                 | Failure to thrive, autolysis.   |

|                  |                       | Multisystemic: hemorrhagic colitis with secondary hepatic lipidosis and possible renal failure. Cardiomegaly. |
|------------------|-----------------------|---|
|                  |                       | Unable to determine due to autolysis.   |
| Saved - Sent to: | Antech<br>Diagnostics | Pleural effusion and abdominal ascites secondary to left ventricular hypertrophy and mitral endocardiosis.    |
|                  |                       | Euthanasia: unknown, pending histopathology.  |
|                  |                       | Pneumonia.  |
|                  |                       | Euthanasia: partial cecum/colon impaction with likely local perforation and focal peritonitis.                |
|                  |                       | Euthanasia: enterocolitis (possible protein-losing enteropathy).  |
|                  |                       | Trauma.   |

|  | Gastroenteritis.  |
|--|---|
|  | Unknown: possible anesthetic death, possible seizures. Pending histopathology.    |
|  | Euthanasia: gastroenteritis, typhlitis. Possible hepatitis vs. hepatic lipidosis. |
|  | Crush injury, rhabdomyolysis, left ventricular hypertrophy.                       |
|  | Euthanasia: chronic colitis. Pending histopathology.                              |
|  | Typhlitis pending histopathology, left ventricular hypertrophy.                   |

|  | Colitis with secondary renal failure pending histopathology.                             |
|--|--|
|  | Renal failure pending histopathology, Left ventricular hypertrophy.                      |
|  | Severe crush trauma. Left ventricular hypertrophy.                                       |
|  | Trauma. Autolysis. Histopath results pending.  |
|  | Enterocolitis pending histopathology.  |
|  | Euthanasia: renal failure, left ventricular hypertrophy, colitis pending histopathology. |