

Cornell University College of Veterinary Medicine Pre-Vet Newsletter July 2019



Application Process for the Class of 2024

Important Links:

- <u>VMCAS Application</u>
- <u>Cornell Tracking Page</u>- this is how we communicate with you throughout the application process and where you will get your admissions decision.
- <u>Application Instructions</u>
- <u>Prerequisite Courses</u>

Hospital services coordinate to diagnose and treat dangerous, disguised condition

Within only a few days, a young St. Bernard went from a swollen leg to critically ill. Her owners rushed her to Cornell University Hospital for Animals (CUHA). There, it was all hands on deck as the hospital's emergency, internal medicine, soft tissue, anesthesiology and critical care services worked together to diagnose and treat an unusual sepsis, a response to infection, that was threatening the pup's life.

"I can't even tell you how grateful I am to Cornell for saving Charlie's life," says Marjorie DiMorier, who owns the 18-month-old dog.

At first, Charlie was simply not herself and lethargic. Her local veterinarian treated her for a fever but, within a week, her back leg was significantly swollen and

paralyzed. When Charlie also stopped eating her owners took her to CUHA. The emergency and critical care service did blood work and found changes consistent with inflammation in her body, so they transferred her to internal medicine service for further investigation.

"There was no obvious cause of the inflammation so we did a complete

work-up of Charlie," explains Dr. Brittany Kunz, secondyear internal medicine resident. This included blood work and testing fluid from the swollen leg that was thought to be at the root of the problem. A CT scan of Charlie's abdomen was also performed, which identified a fluid pocket. Kunz took a sample of the fluid and sent it for testing that determined it was infectious. This confirmed that Charlie had a very serious condition, septic peritonitis, in which the tissue that lines the inner wall of the abdomen is inflamed. She needed exploratory surgery to find and treat the cause.



"This was a good reminder that not everything is localized to the region with the obvious symptoms, such as the leg in Charlie's case," says Kunz. "The infectious

fluid took an unusual path down the leg that masked its presence in her abdomen." Internal medicine consulted with soft tissue service, who reviewed the CT and agreed Charlie needed surgery.

"Everyone did a great job reaching a diagnosis. Septic peritonitis is a life-threatening condition and only about half of the animals who suffer from it survive," says Dominick Valenzano D.V.M. '15, a surgical resident.

During surgery, Valenzano explains, "We found a giant abscess around the kidney that ruptured and was leaking infected fluid throughout the abdomen." He notes there are many causes for an abscess like this to form and it's not known exactly why Charlie developed hers. Surgeons removed as much of the abscessed tissue as possible. They also started Charlie on antibiotics to help her body kill off any remaining bacteria.

Charlie recovered with the critical care service in the intensive care unit, as is typical for animals with septic peritonitis. "In these cases, we worry both about the consequences of sepsis itself and the potential for complications of surgery and anesthesia," explains Dr. Robert Goggs, assistant professor in emergency and critical care at Cornell. He supervised Charlie's care in critical care service. "Sometimes the disease and treatment are overwhelming and organ dysfunction can occur despite our best efforts," he adds.

"Charlie did remarkably well," says Dr. Sarah Robbins, emergency critical care resident. DiMorier says Charlie is completely recovered and "back to her clown self," adding, "If it weren't for Cornell, she wouldn't be alive today." Article By Cynthia McVey

Charlie recovers from surgery at home in above photo (Photo provided)

FULL ARTICLE

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