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Doctor: Koepl	Date: August 22, 2007
Clinic: Bat World Milwaukee 2821 S. Logan Avenue Milwaukee, WI 53207	Access: V072731-6 Species: Mammal Breed: Bat Sex: Female Name: Eptesicus fuscus
ISIS: 58-07	Age: Unknown Type: Post mortem jar

CLINICAL INFORMATION

This bat presented with torticollis on July 30. Antiparasitics and doxycycline were used. The condition progressively worsened, and the bat was euthanized on August 12.

MICROSCOPIC

Submitted is the entire body preserved for examination.

Spleen: The spleen is severely congested and is supporting multifocal areas of hemorrhage.

Uterus: No lesion recognized

Kidney: Examined are sections through the cortex and medulla of the kidney. These are congested.

Large intestine: No lesion recognized.

Lung: The lung is congested.

Cerebrum: No lesion recognized.

Cerebellum: No lesion recognized.

Salivary gland: No lesion recognized.

Haired skin: No lesion recognized.

Stomach: Within the submucosa, there are embedded metazoan parasites. These metazoan parasites have a surrounding mantle of lymphocytes, plasma cells, and neutrophils. The parasites have a slightly corrugated eosinophilic cuticle supporting a low coelomyarian musculature around a pseudocoelomic body cavity.

Intestines: Examined are multiple sections of the intestines at various levels. There are small numbers of mucosal glands that contain intraluminal aggregates of degenerate neutrophils.

Heart: Examined is a longitudinal section through the ventricle and atrium of the heart. No lesion is recognized.

CONTINUED

Tongue: No lesion recognized.

Trachea: Examined is a cross-section through the trachea. No lesion is recognized.

Thyroid gland: No lesion recognized.

Liver: The liver is diffusely congested.

DIAGNOSIS

- 1) **STOMACH: FOCAL SUBMUCOSAL METAZOAN GRANULOMA**
- 2) **INTESTINE: MILD MULTIFOCAL GLANDULAR ABSCESS**

COMMENT

The only significant lesions identified are of metazoan parasites, most likely nematodes, embedded in the submucosa of the stomach and the glandular abscesses identified in the intestinal sections. I suspect that the intestinal lesions are secondary to a possible bacterial infection. It is also possible that there may have been a more significant parasitic infestation that responded to the therapy. The presence of the nematodes within the submucosa suggests that these are possibly migrating out of the digestive tract. Sections through the skull, including the ears, are being decalcified for processing.

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DRR:br*

Q2 KW digestive, infection