

GRU- Laboratory Animal Services

CLINICIAN: Secondary individual
DATE OF NECROPSY: 8 Jan. 2014
SPECIES: Nonhuman Primate
BREED/STRAIN: Rhesus macaque
NO. EXAMINED: 1
MODE OF DEATH: deceased under anesthesia
PROSECTOR: Secondary individual
ANIMAL NUMBER: AC70
PROTOCOL/PROJECT: 2008-0134
SOURCE: CB 1619
AGE: 17 yrs. WEIGHT: 9.9 kg

DATE/TIME OF DEATH: 7 Jan. 14, 1830 hrs
DATE/TIME RECEIVED: 8 Jan. 14, 1300 hrs

CLINICAL ABSTRACT

Per Secondary individual – Experimental animal – Craniotomy head post implant in 5/08/2012. Animal is on a daily training with a chair working procedure. The semi-annual physical exam performed on 12/13/2013. Diagnostic of white plaque on the root of the tongue (oro-pharyngeal sample was collected). BSC 4/6 adequate. General condition good. Craniotomy on 1/07/2014 for implant a recording device. Animal did not recover from anesthesia after 6 h of surgical procedure. The animal vomit a bile content when moved out from the stereotactic frame. A respiratory arrest was noted and treated with doxapram and subsequent cardiac arrest.

CLINICAL DIAGNOSIS

Possible candidiasis (thrush). Lab. results indicated MRSA and enterococcus.

NECROPSY FINDINGS

GENERAL: (Weight, Condition of Cadaver, Hair Coat, Integument, etc.)

An intact male in fair body condition is presented for necropsy. Right hind limb has digits 2nd and 3rd in abnormal position.

PRIMARY INCISION: (Subcutaneous Fat, Muscles, Peritoneum, Position of Viscera, etc.)

There is minimal to no subcutaneous adipose tissue. The omental fat is minimal.

RESPIRATORY: (Nasal Passages, Sinus, Larynx, Trachea, Bronchi, Lungs, Pleura)

The lungs are pink with the exception of the left lung ventral aspect of the lobes that is congested and collapsed. The mucosa of the entire trachea presents several petechiae/ecchymotic and hemorrhagic areas extending to the bronchi. Samples were collected in formalin.

CIRCULATORY: (Heart, Arteries, Veins, Lymph Vessels, Blood)

Sections from the heart sample were collected in formalin.

LIVER AND GALL BLADDER:

The liver presents dark irregular edges with pale foci moderately diffuse throughout the surface and a firm texture. The gall bladder is enlarged. Samples were collected in formalin.

DIGESTIVE: (Mouth, Pharynx, Salivary Glands, Esophagus, Stomach, Intestines, Rectum, Pancreas)

Esophagus presents reddened foci of the mucosa in the pharyngeal (proximal) area. Bile content is noted. The stomach mucosa has multifocal hyperemic foci. Samples were collected in formalin.

LYMPHATIC: (Lymph Nodes, Tonsil, Thymus, Spleen)

The thymus is not apparent. The spleen appears small and retracted. Samples were collected in formalin.

URINARY: (Urethra, Bladder, Ureters, Kidneys)

The cortex of both kidneys appears normal. The urinary bladder is full with urine. Samples were collected in formalin.

ENDOCRINE: (Thyroid, Adrenals and Parathyroid)

No gross lesions noted.

SPECIAL SENSES: (Eyes, Ears)

No gross lesions noted.

LOCOMOTOR: (Skeletal Muscles, Bones)

No gross lesions noted.

GENITAL:

No gross lesions noted.

NERVOUS: (Brain and Nerves)

Brain sample obtained from the surgical opening on right side (cerebral cortex). Cross sections of the hemispheres identified an area of hemorrhagic at the level of the right lateral ventricle. Samples were collected in formalin.

POSTMORTEM DIAGNOSIS

The presumptive diagnosis based on trachea, bronchi and esophagus lesions are possibly consistent with clinical pathology parameters during MRSA infection.

Thymic atrophy or involution is an age appropriate change. A final report will be submitted after examination of selected tissues histologically.