ASPCA

Poison Control Notes

Fax Transmission

Attention to:-
Name: 702.453.6647
Company:
Date: 03-10-2022
Time: 08:06:51 P

From:-
Name:
Company:
Telephone:
Pages: 7

RE: VLPP Report for Case 220056211

Comments/Notes:

ASPCA
Report

P

220056211
Case Opened: 2022-03-09 15:23:46.964
Case Closed: 2022-03-09 15:34:53.438

For further consultation related to this case, please call 888-299-2973.
To report the outcome of this case, please call 888-226-4767 or send information to (fax) 217-337-2699.

CONTACTS

Owner
Mr. Jim Snow
Las Vegas, NV
USA

Regular Veterinarian
Dr. Wachbrit
Animal Kindness Veterinary Hospital
4910 East Bonanza Road
Las Vegas, NV 89110
USA
1-702-453-2990

Vet Staff
Gabby Hernandez
Animal Kindness Veterinary Hospital
4910 East Bonanza Road
Las Vegas, NV 89110
USA
1-702-453-2990

Emergency Vet
Dr. Vrind
Animal Emergency Center
3340 East Patrick Lane
Las Vegas, NV 89120
USA
1-702-457-8050

AGENTS

PRN Calsorb Calcium Supplement

1. Calcium: 170.0 mg/mL

Carafate Tablet 1 g

1. Sucralfate: 1.0 g
2. D and C Red Number 30: unknown amount
3. FD and C Blue Number 1: unknown amount
4. Magnesium Stearate: unknown amount
5. Cellulose: unknown amount

PATIENT

Domestic Shorthair Cat Mix named **Kiwi**: 9.0 yr old Neutered Male weighing 12.4 lb: Good health.

Patient has been constipated for a few days and came into the clinic today for treatment. Otherwise normal, vitals wnl (HR=180-190 and steady) recent labwork was all WNL

EXPOSURE(S)

PRN Calsorb Calcium Supplement

Exposure occurred on Mar 09, 2022 at 03:10 PM CST and involved 9.0 mL Rectally

Clinic staff were treating patients constipation with an enema and unfortunatley grabbed the bottle of the wrong solution (made from the same company.) Enema was performed with a calcium supplement gel by accident. Staff gave 12ml rectally but estimate at least 6ml came back out of the rectum WCS=12ml

Dosage

Calcium 272.02 ±90.67 mg/kg

Carafate Tablet 1 g

Exposure occurred on Mar 09, 2022 at 07:45 PM CST and involved 0.5 count Orally.

Owner gave the sucralfate as directed, 1/2 tab into 3 mLs of H20. Shortly after that Kiwi vomited. Kiwi vomited again another 2 hours later and he seems "off". Kiwi has also been in and out of the litter box and straining multiple times.

Dosage

Sucralfate 88.9 mg/kg

CLINICAL SITUATION

Vomiting Each time it was a brownish color and is thicker than water.. Mild Isolated Event Mar 09, 2022 at 08:00 PM CST. Mild Isolated Event Mar 09, 2022 at 10:20 PM CST.

Tenesmus Has been in his litter box 7-9 times since he has been home, only produced a small pile of feces once.. Mild Begin Mar 09, 2022 at 08:00 PM CST.

Behavior Change Per Owner Kiwi just isn't himself and seems off.. Mild Begin Mar 09, 2022 at 08:00 PM CST.

Blood Pressure (280.0/146.0 mm Hg) High Measured Mar 10, 2022 at 03:00 AM CST;

Hypertension Severe Time Observed Mar 10, 2022 at 03:00 AM CST.

Mean Arterial Pressure (190.0 mm Hg) High Measured Mar 10, 2022 at 03:00 AM CST;

Serum Calcium (14.0 mEq/L) Elevated Measured Mar 10, 2022 at 03:00 AM CST;

Hypercalcemia Moderate Time Observed Mar 10, 2022 at 03:00 AM CST.

Ionized Serum Calcium (2.11 Unk) Elevated Measured Mar 10, 2022 at 03:00 AM CST;

Blood Urea Nitrogen (25.0 mg/dL) Normal Measured Mar 09, 2022 at 03:20 PM CST; (62.0 mg/dL) Elevated Measured Mar 10, 2022 at 05:22 PM CST;

Serum Creatinine (1.6 mg/dL) Normal Measured Mar 09, 2022 at 03:20 PM CST; (2.0 mg/dL) Normal Measured Mar 10, 2022 at 05:22 PM CST;

SDMA Symmetric Dimethylarginine (9.0 mcg/dL) Normal Measured Mar 09, 2022 at 03:20 PM CST; (10.0 mcg/dL) Normal Measured Mar 10, 2022 at 05:22 PM CST;

Elevated Blood Urea Nitrogen Moderate Time Observed Mar 10, 2022 at 05:22 PM CST.

RISKS

PRN Calsorb Calcium Supplement

Risk Note: Risk with this exposure is colonic irritation. Transient hypercalcemia may develop, but systemic toxicity is unlikely to occur.

Risk Assessment: Without treatment, this amount would possibly cause signs. There is a low risk of clinical signs developing. If signs develop, there is a low risk that those signs will be serious or life-threatening.

Carafate Tablet 1 g

Risk Note: Risk with this exposure is for GI upset.

Risk Assessment: Without treatment, this amount would possibly cause signs. There is a medium risk of clinical signs developing. If signs develop, there is a low risk that those signs will be serious or life-threatening.

RULE OUTS

PRN Calsorb Calcium Supplement The onset of signs is somewhat consistent with this situation. The clinical signs are somewhat consistent with this situation. Based on the circumstances, there is a medium likelihood of this being related

Carafate Tablet 1 g The onset of signs is generally consistent with this situation. The clinical signs are somewhat consistent with this situation. Based on the circumstances, there is a medium likelihood of this being related

Constipation The clinical signs are generally consistent with this situation. Based on the circumstances, there is a medium likelihood of this being related

UNPLANNED CARE

Enema: ; Saline and lubricant Caregiver: Regular Veterinarian; Mar 09, 2022 03:59 PM

Renal Profile: Caregiver: Regular Veterinarian; Mar 09, 2022 03:59 PM

Referral to Manufacturer: Caregiver: Regular Veterinarian; Mar 09, 2022 03:59 PM

Maropitant - Cat: Caregiver: Vet Staff; Unknown Time

TREATMENT RECOMMENDATIONS

Monitor for Gastrointestinal Signs: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Symptomatic Care: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Supportive Care: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Ionized Serum Calcium: Importance: Potential. To Do: Regular Veterinarian. ; Plan Status: Planned

Call Back With Questions: Importance: Potential. To Do: Regular Veterinarian. ; Plan Status: Planned

Discontinue Medication: Carafate Importance: Important. To Do: Owner. ; Plan Status. Planned

Take Animal to Veterinarian: Radiographs to see if constipated still Importance: Important. To Do: Owner. ; Plan Status: Planned

Have Veterinarian Call for Information: Importance: Important. To Do: Owner. ; Plan Status: Planned

Call Back With Questions: Importance: Important. To Do: Owner. ; Plan Status: Planned

Monitor at Veterinary Facility: Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Monitor for Central Nervous System Signs: Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Monitor Cardiovascular Function: Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Diagnostic Evaluation: Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Ionized Serum Calcium: Or total. Recheck as needed. Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Fluid Therapy: High rates should be considered cautiously with compromised cardiac function or pulmonary edema. Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Call Back With Questions: Importance: Important. To Do: Emergency Vet. ; Plan Status: Planned

Serum Calcium: Recheck 12-24h Importance: Important. ; Plan Status: Planned

Fluid Therapy: 0.9% NaCl with cautious rate due to underlying heart murmur Importance: Important. ; Plan Status: Planned

Manage Hypertension: Importance: Important. ; Plan Status: Planned

Call Back With Questions: Importance: Important. Performed Mar 10, 2022 07:57 PM. ; Plan Status: Implemented

Fluid Therapy: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Monitor Blood Pressure: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Monitor Packed Cell Volume: Baseline Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Urine Specific Gravity: Baseline Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Chemistry Profile: Recheck renal values and calcium 72 hours post-exposure or sooner if signs worsen Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Continue Treatment: Management of constipation Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

Call Back With Questions: Importance: Important. To Do: Regular Veterinarian. ; Plan Status: Planned

OUTCOME

Outcome: Unknown

CONTACTS

2022-03-09 15:23:47.219

Argo, Elisha (technician) interacted with Gabby Hernandez (vet staff) for reason: obtain help. Transferred Dr. Walford to Dr. Troudot for vet consultation

2022-03-09 15:50:14.33

Tourdot, Renee (toxicologist) interacted with Gabby Hernandez (vet staff) for reason: update case-in. Discussed case with DVM. She spoke with the manufacturer who indicated that they did not think a significant hypercalcemia leading to renal injury would develop but they did recommend monitoring of iCa at 24 and 72h post exposure.

2022-03-09 22:32:32.537

France, Jen (technician) interacted with Mr. Jim Snow (owner) for reason: update case-in. Owner calling back, asking for his case number, Owner also has questions because Kiwi seems to be off and is now vomiting. Discussed case with caller per Dr. Skrainka. Owner will take Kiwi to EDVM for abdominal radiographs to check the status of his constipation.

2022-03-10 01:33:17.137

Gordon, Emma (veterinarian) interacted with Dr. Vrind (emergency vet) for reason: update case-in. Discussed case with Dr. Vrind and staff member Michelle. Kiwi presented lethargic with a grade V/VI pansystolic murmur. Pulses are unremarkable. He has a palpable abdominal abnormality, although radiographs have not confirmed constipation yet. Severe signs are not expected from this calcium enema. Current clinical signs are not consistent with a phosphate enema, typically severe neurologic changes are expected (weakness, ataxia, tremors, tetany, and seizures) as well as arrhythmias. Recommend additional diagnostics to assess constipation and rule out other conditions or complications. Please call back with lab abnormalities to update case recommendations or any additional questions or concerns.

2022-03-10 03:13:54.87

Khalafalla, Suzanne (veterinarian) interacted with Dr. Vrind (emergency vet) for reason: update case-in. Dr. Vrind calling back with update. Kiwi is hypertensive on presentation, BP 280/146 (MAP 190). Radiographs reveal fecal material in the ascending/transverse colon and distal colon. Heart appears normal. It is unknown if any labwork was performed at the primary veterinarian prior to transfer. It was reported that Kiwi received carafate and then vomited 10 minutes later. He did defecate once prior to arrival. Ca 14.0 (7.8-11.3) iCa 2.11 (1.13-1.38) Discussed that with this product we suspect a transient hypercalcemia but significant systemic side-effects would not be expected. Discussed treatment plan with Dr. Marko. Would start with cautious IV fluids and recheck calcium. If calcium is not improving with fluid therapy, then could consider adding a corticosteroid. Unfortunately a baseline prior to administration of the calcium, so it is assumed that this is secondary to the enema, however pre-existing conditions cannot be fully ruled out and administration of prednisone may make diagnostics more difficult to interpret. Would recheck the BP and if persistently elevated, could consider pain medications and if still elevated, would start antihypertensives. Discussed possible interactions with calcium channel blockers due to the high circulating calcium. There should not be interactions with nitroprusside, hydralazine, or acepromazine if needed to manage the acute hypertension. Also discussed cardiac arrhythmias are possible with hypercalcemia but generally uncommon.

2022-03-10 19:16:41.757

Anderson, Louis (veterinarian) interacted with Dr. Wachbrit (regular veterinarian) for reason: update case-in. Dr. Walford calling with update. Kiwi was transferred from ER clinic this morning for continued therapy. Continued on twice maintenance fluid therapy. Recheck radiographs revealing continued constipation. Pet received a warm water/mineral oil enema. Sent home tonight with plan to follow up tomorrow morning for continued care. Kiwi was not interested in eating today but still clinically doing well. Bloodwork performed yesterday showed BUN 25, Creat 1.6, and SDMA of 9. Today BUN is 62, Creat 2, and SDMA 10. iCa that was sent out 3 hours after the Calcium enema is still pending. Discussed performing a PCV/TS and USG tomorrow on recheck. Increase in renal values may be due to dehydration due to concurrent constipation. Recheck bloodpressure since ER hospital was reporting hypertension last night. Consider screening for other pre-existing conditions such as hyperthyroidism. Continue with IVF in the morning and management of constipation. Recheck renal values and iCa 72 hours post-exposure or

sooner if signs worsen. Long-term diet change, either high-fiber or low-residue, indicated once all values and signs resolved. Call back with update in 24-48 hours.

Disclaimer: The potential risks mentioned in this summary and the treatment recommendations herein were developed for this individual in this specific situation, considering all of the facts and circumstances known to the ASPCA at the time the advice was provided, and represent the professional opinion of the ASPCA as of a specific moment in time. This information should not be reused for future patients, as such reuse without specific consultation with the ASPCA may create an undue risk of harm, up to and including death.

This report was generated Mar 10, 2022 at 08:06 PM CST

www.aspcapro.org/poison

RECEIPT

CaseID: 220056211

Date of Service: 2022-03-09 15:23:46.9640000

Card Holder	CC num (last 4)	Amount Paid
Gabby Hernandez (Vet Staff)	4199	$75.00 USD

Summary: CASE CONSULTATION # 220056211: Case was opened on March 9, 2022 at 3:23 PM as a result of a call from Gabby Hernandez. Case involved: [1] PRN Calsorb Calcium Supplement, [2] Carafate Tablet 1 g. Case involved: [1] Kiwi (9.0 yr Domestic Shorthair Cat). Patient experienced: [1] Vomiting (Digest), [2] Tenesmus (Gneral), [3] Behavior Change (Bhavor), [5] Hypertension (Cardio), [8] Hypercalcemia (Metab).