Modifications for Clarity

Fundamentals of Veterinary Clinical Pathology
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This listing: April 26, 2004
Previous listings: March 8, 2003

The modifications are listed in two sections.

1. Modifications for 1st and 2nd printings.
2. Modifications for 1st, 2nd, and 3rd printings.

For each modification, the date when the modification was first posted on this website is noted.

Which printing do you have?

The printing notation is located on the last line of the copyright page (page iv): e.g., 1 for first printing. However, the last digit in both the 2nd and 3rd printings is a 2. To determine if you have a 2nd or 3rd printing, look at page 18 to see if the albumin unit in the second row of Fig. 1.3 has been corrected.

- The incorrect albumin unit (mg/dL) is in the 2nd printing.
- The correct albumin unit (g/dL) is in the 3rd printing.

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Modifications for 1st and 2nd printings

Page 58 (1st and 2nd printings) *March 8, 2003*
Add canine hepatozoonosis as a disorder associated with a leukemoid response (paragraph *f*)

Page 138 (1st and 2nd printings) *March 8, 2003*
14th line from bottom, paragraph I.C.2.a.: Delete *really not a polycythemia* and replace with *not due to increased erythrocyte mass.*
Modified:

a. Relative polycythemia: Erythrocytosis .. state is not due to increased erythrocyte mass.

Page 138 (1st and 2nd printings) *March 8, 2003*
4th line from bottom, paragraph I.D.: Add *s* to *membrane*
Modified:

D. Extreme ... Related .. membranes, congested ...

Page 295(1st and 2nd printings) *March 8, 2003*
15th line from top, paragraph II.C.3.: add info as shown below
Modified:

3. In older assays, non-Crt chromogens (*e.g., proteins, glucose, acetone, and acetoacetate reacted to produce Crt-like chromogens)* caused ...

Page 373 (1st and 2nd printings) *March 8, 2003*

Add footnote to Table 9.14

The data in the table illustrate the contributions of common serum solutes to total solute concentration. The data are expressed as osmolarities because the measured concentrations of individual solutes are routinely reported on a */L* basis and not on a */kg H_2O* basis. Assuming total solids occupy 7% of plasma volume and thus H_2O occupies 93% of plasma volume, osmolarity is converted to osmolality as follows: osmolarity ÷ 0.93 = osmolality.

Page 398 (1st and 2nd printings) *March 8, 2003*

Version in 1st and 2nd printings

I. Hypoxemia (decreased dissolved O_2 in blood; decreased Po_2) may cause hypoxia (decreased oxygen delivery or utilization of O_2 by tissues).

A. Disorders or conditions (Table 10.8). Hypoxemia may be caused by:

Modified

I. Hypoxia (decreased oxygen delivery or utilization of O_2 by tissues) may be due to hypoxemia (decreased dissolved O_2 in blood; decreased Po_2) or other causes.

A. Hypoxia due to hypoxemia (Table 10.8)

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Modifications for 1st, 2nd, and 3rd printings

Page 126 (1st, 2nd, and 3rd printings) *March 8, 2003*

Add the following to end of 14th line: , but it has been associated with infections, neoplasia, and vaccinations.

Modified:

(2) IIHA .. found, but it has been associated with infections, neoplasia, and vaccinations.

Page 239 (1st, 2nd, and 3rd printings) *March 8, 2003*

7th line from top, paragraph b.: add the following after *cats:* probably due to the formation of anti-Epo antibodies

Modified:

a. Secondary .. and cats probably due to the formation of anti-Epo antibodies.

Page 272 (1st, 2nd, and 3rd printings) *March 8, 2003*

10th line from top, paragraph 2.b.(1): add to end: However, the thrombin time will be prolonged from either a true fibrinogen deficiency or a functional deficiency (e.g., dysfibrinogenemia).

Modified:

(1) The common .. (see Chap. 5). However, the thrombin time will be prolonged from either a true fibrinogen deficiency or a functional deficiency (e.g., dysfibrinogenemia).

Page 454 (1st, 2nd, and 3rd printings) *April 26, 2004*

Paragraph IV.A.2.a. currently reads: a. Serum AMS activity in dogs with acute pancreatitis maybe WRI or it may be extremely increased (> 10xURL).

Modified:

a. Serum AMS activity in dogs with acute pancreatitis may range from WRI to extremely increased (> 10xURL).

Page 455 (1st, 2nd, and 3rd printings) *April 26, 2004*

Paragraph IV.A.2.a. currently reads: a. Serum LPS activity in dogs with acute pancreatitis maybe WRI or it may be extremely increased (> 10xURL).

Modified:

a. Serum LPS activity in dogs with acute pancreatitis may range from WRI to extremely increased (> 10xURL).

Page 455 (1st, 2nd, and 3rd printings) *April 26, 2004*

Paragraph IV.A.2.b. currently reads: b. In spontaneous feline pancreatitis, serum LPS activity may be WRI or moderately increased (< 5 × URL).[58, 59]

Modified:

b. In spontaneous feline pancreatitis, serum LPS activity may range from WRI to moderately increased (< 5 × URL).[58, 59]

Page 475 (1st, 2nd, and 3rd printings) *March 8, 2003*

Paragraph V.B.1.b.: change *the* to *this*

Modified:

b. Hemolyzed .. elevate this icterus index.

Page 489 (1st, 2nd, and 3rd printings) *March 8, 2003*

Figure 14.1 legend: Change 2nd sentence in *Muscle* section to read as follows

Change

Insulin promotes glycogen synthesis in myocytes. GH, glucagon, and epinephrine promote glycogenolysis in muscle (perhaps only cardiac muscle).

Note: There is documentation for the glycogenolysis in cardiac muscle but we have not found documentation for skeletal or smooth muscle.