

Dr. Jim Watlington
Indian Hills Animal Hospital
2838 South Church Street
Murfreesboro, Tennessee 37127

Dear Dr. Watlington:

Thank you for your thorough and compassionate evaluation and care of our cat Tucker during his recent illness. As you may recall we brought him to you with several weeks of weight loss, anorexia, dehydration, and lethargy, for which another clinic had been treating him for presumed UTI and/or pelvic trauma. Your evaluation revealed new onset unilateral blindness, a large renal stone and a lung mass. You referred us to Nolensville Veterinary Hospital at that point.

The upshot is that Tucker was diagnosed by them—via an ultrasound-guided needle biopsy—with an aggressive grade of primary lung carcinoma. Dr. Fly recommended no treatment and his counsel was very helpful in making the difficult decision between euthanasia and bringing Tucker home to die naturally. We chose the latter and brought him home on May 27 to share his last days with us. He was discharged from your care, incidentally, on May 24.

As it turned out the time we had with him was valuable for us all. Despite his debilitated condition (he never ate, but did drink water until very close to the end) Tucker interacted with us closely for a few days, in addition to roaming his favorite areas of the house and cuddling with his favorite toys. Progressively he, of course, became less mobile and interactive and largely slept. In his last 24 to 36 hours he was intermittently aware, suffered at least two tonic-clonic seizures, and finally passed away in his sleep on the afternoon of June 15 with us present.

We buried him by a pond on our property and for several hours after we observed a rabbit sitting on his grave.

In the way of clinical follow up—your evaluation of Tucker, again, revealed unilateral blindness, which was, as far as we were aware, new onset. You speculated this might have been a Baytril side effect. Dr. Fly did not feel that was a likely cause of the findings and noted retinal lesions. An ophthalmology consult was planned but given the gravity of Tucker's ultimate diagnosis, was not pursued. Our own Internet research noted reports of chorioretinopathy in felines with lung cancer. We don't recall if this was metastatic or paraneoplastic in nature, but now presume the eye findings to have been a direct consequence of the primary diagnosis.


Incidentally, during his terminal course at home, he developed swelling, ulceration, nail loss, and finally bleeding of one of his hind paws. We believe this to have been metastatic disease consistent with "lung-digit syndrome," reported in felines with lung cancer.

Thank you for helping to provide us with a definitive diagnosis and for referring us to Dr. Fly, in whose hands we felt very secure. Though Tucker's outcome was not as any of us would have hoped—knowing what we were dealing with, and what to do (and not do) about it was an enormous relief. At the time we came to you, we were frustrated, fearful, and concerned over Tucker's lack of a definitive diagnosis and therapeutic progress. You turned that situation around and for that we are grateful.

Sincerely,



James K. Rone, MD, FACP, FACE



Susan V. Rone, RN, MSN