



**DATE PRESENTING CLINICAL SIGNS**

1/12/22

Patient presents to BAESC for referral US services due to chronic weight loss and loose stools (years). Appetite remains adequate, but weight loss persists. Most recent blood work was performed February 2021 (~ 1 year ago) in which CBC was unremarkable and CHEM revealed hyperglobulinemia. T4, FeLV/FIV/HW and Fecal were all WNL/Negative No UA was submitted at the time. No treatments with prednisolone have been pursued to the clients knowledge, however it was discussed with Dr. Poet.

**INTERPRETED BY**

L.D. McGill, DVM,  
Ph.D, DACVP

PE: Lenticular sclerosis OU, moderate dental disease. Generalized thin/lean muscle atrophy. Stiff on mobility. Thickened intestines palpated. No obvious abdominal masses. Purring loudly, no murmur appreciated.

**PATIENT**

Austin Brian

No recent blood work; Last evaluated 2/2021  
Hyperglobulinemia, 6.3 g/dL (3-5.9)  
Remainder senior screen and fecal analysis unremarkable

**CYTOLOGY SUBMISSION**

**SPECIES**

Feline

FNA of Lymph Node & Spleen

**OBSERVATIONS**

**BREED**

DMH

Lymph node: Submitted are 4 excellent videos of minimal to moderate collections of cells from the lymph node in Austin. The majority of the lymphocytes are small mature lymphocytes. They are interspersed with scattered reactive or enlarged lymphocytes and scattered neutrophils with a few eosinophils. Macrophages with a foamy cytoplasm are identified. Malignant characteristics are not identified.

**SEX**

Male Neutered

Spleen: Submitted are 4 excellent videos of a hemodiluted collection of nucleated cells from the spleen in Austin. The majority of the cells are red blood cells but they are interspersed with nucleated cells. The nucleated cells consist of large numbers of neutrophils interspersed with some lymphocytes, eosinophils and macrophages. Nucleated RBCs are observed. Malignant characteristics are not identified.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

12year

Lymph node - Mild chronic suppurative lymphadenitis with reactive or stimulated lymph node.  
Spleen - Chronic suppurative splenitis with reactive mononuclear cells.

**COMMENTS**

**WEIGHT**

2.54 kg

The cellularity in both of these organs supports the likelihood of chronic inflammation draining to the lymph node and into the spleen. This inflammation could be secondary to inflammation from the intestine or secondary to inflammation from other organs including the pancreas. The inflammation from the intestine could be secondary to enteritis including eosinophilic enteritis or possibly even lymphoma. Lymphoma in the intestine is commonly not reflected in the lymph nodes or in the spleen. This is due to the fact that the intestinal lymphoma cells have specific markers to only grow in the intestine. A guarded prognosis is warranted in Austin due to the fact that we still do not know the cause for problems in the intestine. It could be inflammatory bowel disease or intestinal lymphoma not reflected in either of these organs. Biopsies of the intestine will likely be required to confirm the pathology in that organ.

**HOSPITAL NAME**

Highland Veterinary  
Hospital

**REFERRING VET**

Dr. Rachel Poet

**INVOICE NUMBER**

70446



**DATE**

1/12/22

**INTERPRETED BY**

L.D. McGill, DVM,  
Ph.D, DACVP

**PATIENT**

Austin Brian

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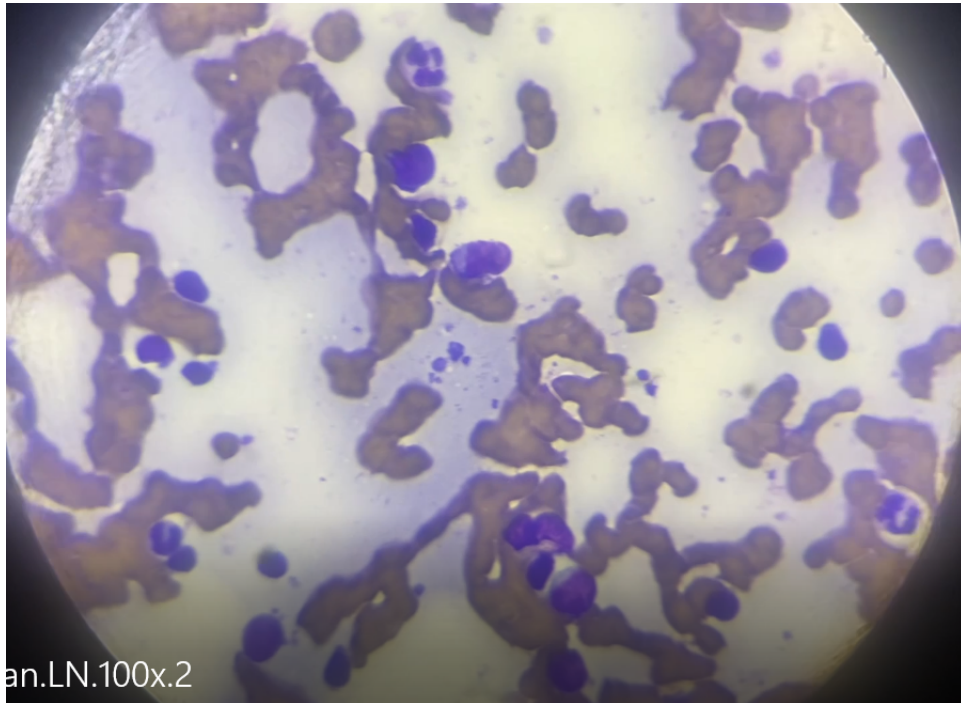
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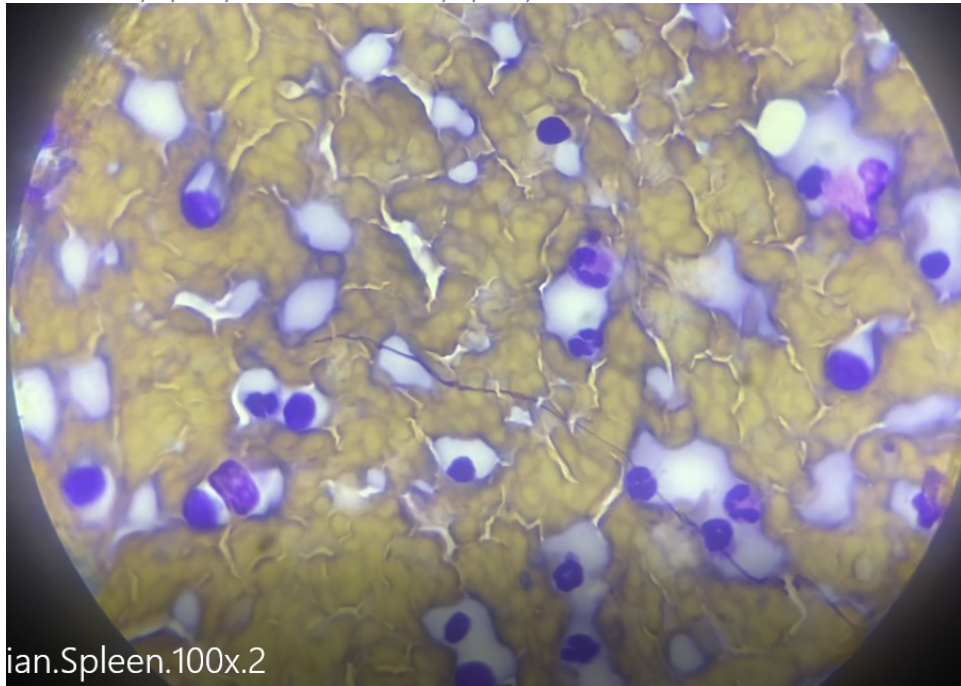
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an.LN.100x.2

Image shows a representative collection of cells from the lymph node in Austin. There are neutrophils and mature lymphocytes with a reactive lymphocyte.



ian.Spleen.100x.2

Image shows a representative field of cells collected from the spleen in Austin. Most of the cells are neutrophils with scattered eosinophils and small mature lymphocytes.



**DATE**

1/12/22

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**INTERPRETED BY**

L.D. McGill, DVM,  
Ph.D, DACVP

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

**PATIENT**

Austin Brian

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Cottonwood Heights, UT 84121  
ldmcgill.vetpath@gmail.com  
cell: 801-865-1220

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