



DATE PRESENTING CLINICAL SIGNS

10/10/22

2 week history of L stifle swelling. Non weight bearing. Rads were previously submitted to E sonopath- suggestive of osteosarcoma/chondrosarcoma but couldn't rule out fungal.

INTERPRETED BY

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

CYTOLOGY SUBMISSION

FNA of Dermal Left Stifle

PATIENT

Dottie Graham

OBSERVATIONS

Left Stifle: Submitted are large numbers of images of cells collected from the left stifle on Dottie. The cellularity is mixed through a large number of the images. Several images have round irregular cells with anisocytosis and anisokaryosis. There is an eosinophilic amorphous material associated with some of the cells. There are several images that have lymphoid cells present. I am unable to determine whether this is part of the case or not.

SPECIES

Canine

BREED

Spaniel Mix

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Left Stifle - Suggestive of osteosarcoma with pyogranulomatous inflammation.

SEX

F

The cellularity in these images is minimal but there are a few cells that suggest the possibility of an osteosarcoma. Follow-up biopsy will be required or a repeat aspirate collecting more cells may be beneficial. Much of the cellularity in the collection consists of inflammation which is pyogranulomatous. This inflammation would be expected for a secondary change. A guarded prognosis is warranted until the bone lesion can be confirmed.

AGE

6y

WEIGHT

46.8

HOSPITAL NAME

Torch Lake Veterinary
Clinic

REFERRING VET

Dr. Adrienne Waffle

INVOICE NUMBER

40616



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10/10/22

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L.D. McGill, DVM,
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PATIENT

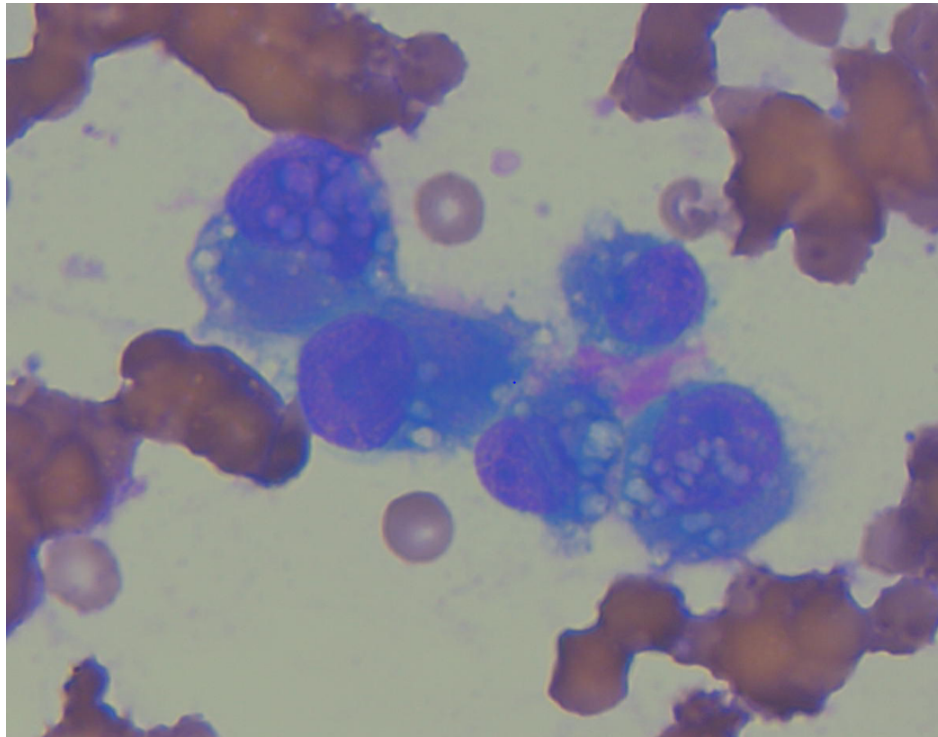
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Image shows some round cells with anisokaryosis, and anisocytosis (possible osteoblasts) with amorphous eosinophilic material (may be osteoid) associated with the cells collected from Dottie. Note the prominent nucleoli.

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.

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.

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