



DATE PRESENTING CLINICAL SIGNS

2/10/22

Presented to E clinic mid-November for bilateral scleral hemorrhage. Dx w/ITP and started on Doxycycline and Prednisone 30mg BID. Presented 3 weeks ago with tip of tongue ulcerated and necrotic. Started slowly weaning off Prednisone, but LE trending upwards (ALT especially) instead of improving.

INTERPRETED BY

PE: muscle wasting generalized, esp. on head. Mild potbelly, with ventral alopecia. Quiet but alert. Halitosis, tongue still healing.

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

Most recent BW: ALT 1351, ALP >993, GGT 109. CBC normal, Plt 319.

CYTOLOGY SUBMISSION

Liver

PATIENT

Gordo Wilson

OBSERVATIONS

Liver: Submitted are 14 excellent videos of cells collected from the liver in Gordo. The hepatocytes in some fields are almost normal with only slight vacuolization. In other fields the hepatocytes are markedly vacuolated to the point that they are difficult to identify. The hepatocytes are interspersed with inflammatory cells that are lymphocytes and scattered neutrophils. The lymphoid cells are irregular with some of the cells demonstrating nuclei that are 3 to 4 times the size of red blood cells. Other irregular changes are identified in these lymphocytes including cleaved nuclei.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Liver - Marked hepatocellular vacuolization with interspersed atypical lymphoid cells and scattered neutrophils.

Boxer

COMMENTS

There is extensive lipidosis throughout the liver smears. This is consistent with steroid hepatopathy of a rather severe nature. There are interspersed lymphoid cells that appear to be atypical supporting the likelihood of lymphoma. The more I looked at the videos, your suspicion of lymphoma with the steroids slightly controlling it seems very likely. There is inflammation occurring as well. But the major process is hepatocellular vacuolization and lipidosis. It may take months for those liver enzymes to decrease to a normal level and they may never lower to normal range. Confirmation of this interpretation will require liver biopsy to determine the lymphoid infiltration. A guarded to unfavorable prognosis is warranted in my opinion.

SEX

Male Neutered

AGE

4y

WEIGHT

51lbs

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Ebersole

INVOICE NUMBER

668

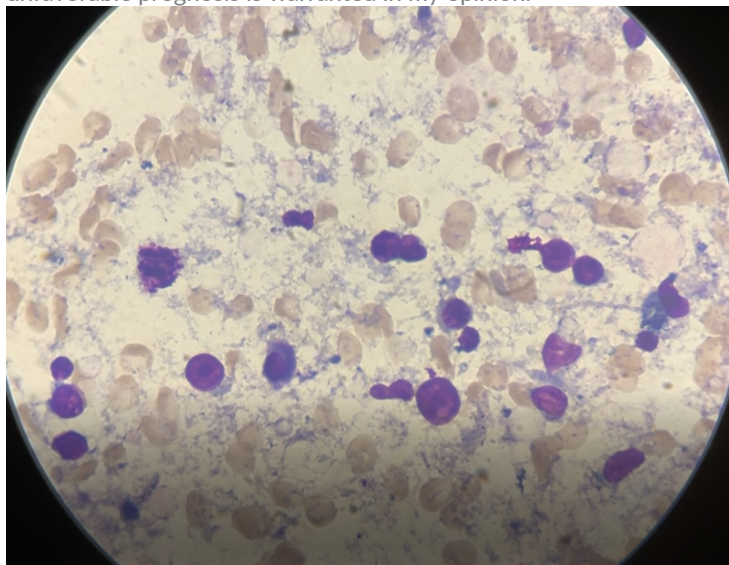


Image shows some lymphocytes and a background of hepatocellular material with lipidosis. Some of the lymphocytes have nuclei that are much larger than RBCs.



DATE

2/10/22

INTERPRETED BY

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

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.

PATIENT

Gordo Wilson

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

8288 Top of the World Drive
Cottonwood Heights, UT 84121

SPECIES

Canine

ldmcgill.vetpath@gmail.com
cell: 801-865-1220

BREED

Boxer

SEX

Male Neutered

AGE

4y

WEIGHT

51lbs

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Ebersole

INVOICE NUMBER

668