



**DATE PRESENTING CLINICAL SIGNS**

3/17/22

Patient presented 3/11/22 for possible UTI, while using ultrasound to obtain a urine sample, a fluid filled structure was noted in the abdomen. Started oral Enrofloxacin and Amoxicillin 3/11/22. Patient returned for full abdominal ultrasound 3/16/22 which showed a possible abscess or necrotizing mass in the mid-abdomen and a large, irregular, hypoechoic nodule in the liver. Both the abscess and liver were aspirated using ultrasound guided method. Fluid from the abscess has been sent for culture. Videos of liver aspirates attached.

**INTERPRETED BY**

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

Abdominal pain 3/11/22. Elevated liver enzymes on bloodwork 3/11/22.

**CYTOLOGY SUBMISSION**

FNA of Liver

**PATIENT**

Remi Williams

**OBSERVATIONS**

Liver: Submitted are 6 excellent videos of moderate collections of cells from the liver in Remi. The hepatocytes are slightly varied with prominent vacuolization and granularity in the cytoplasm. Vacuolization is more prominent in some fields than others. The surrounding red blood cells demonstrate a mixture of inflammatory cells including neutrophils and lymphocytes. The lymphocytes are small mature lymphocytes. Malignant characteristics are not identified in any cells.

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Liver - Mild to moderate hepatocellular vacuolization with mild granularity and chronic inflammation.

**BREED**

LabX

**COMMENTS**

The excellent videos demonstrate a good collection of hepatocellular elements with vacuolization as the major process. This vacuolization is varied. Vacuolar hepatopathy has been suggested in these cases but very likely this change is secondary to other problems. It can be secondary to endotoxic problems from the pancreas or intestine. It can also be secondary to endocrine abnormalities including steroid hepatopathy. There is no suggestion of malignancy or sepsis in this collection. Continued evaluation of other organs in the abdominal cavity is encouraged since this change is likely secondary and not primary.

**AGE**

14Y

**WEIGHT**

83.2#

**HOSPITAL NAME**

Rotterdam Veterinary  
Hospital

**REFERRING VET**

Dr. Anna St Sir

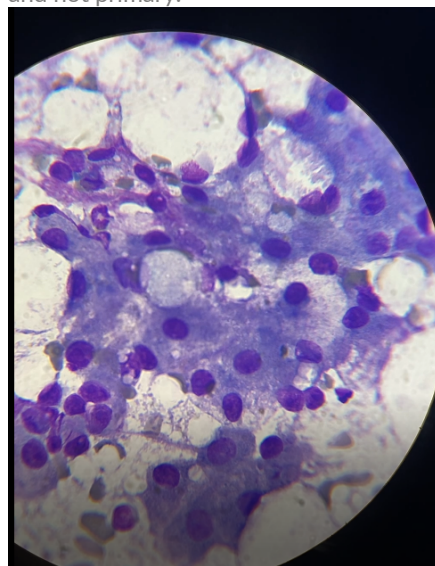


Image demonstrates a good group of hepatocytes with vacuolization and mild granularity collected from Remi. There are scattered inflammatory cells in the surrounding fluid and RBCs.

**INVOICE NUMBER**

40483



**DATE** 3/17/22 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.

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

**L.D. McGill, DVM, Ph.D., DACVP**  
8288 Top of the World Drive  
Cottonwood Heights, UT 84121  
ldmcgill.vetpath@gmail.com  
cell: 801-865-1220

**PATIENT**  
Remi Williams

**SPECIES**  
Canine

**BREED**  
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