



DATE PRESENTING CLINICAL SIGNS

4/18/23

Lymphadenopathy

CYTOLOGY SUBMISSION

Lymph node

INTERPRETED BY

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

OBSERVATIONS

Lymph node: Submitted are 2 excellent videos of excellent collections of cells from the lymph node in Axel. The cellularity consists almost entirely of round cells with prominent large nuclei. These cells are rather uniform. The nuclei are 2 to 4 times the size of red blood cells. There are scattered neutrophils and macrophages in the collection. They are few in numbers. Occasional round cells have nucleoli.

PATIENT

Axel Anderson

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Lymph node - Suggestive of lymphoma

COMMENTS

With the uniformly large nuclei in many of the cells, lymphoma is at the top of the differential list. This could be an extremely reactive lymph node but usually the cells in reactive nodes are much more diverse in size and shape. In this instance 90% or more of the cells are of the intermediate to large cell size. Confirmation of the diagnosis will require immunophenotyping. If chemotherapy is contemplated, then immunophenotyping of the cells to confirm the specific cell type may be beneficial for prognosis. The slides may be submitted for PARR testing or new slides that are not stained can be submitted for immunocytochemistry staining. Flow cytometry can be beneficial but will require a repeat collection of cells prior to submission to the laboratory. Contacting the laboratory to confirm how to submit flow cytometry samples is encouraged. A guarded to unfavorable prognosis is warranted. Further confirmation is encouraged but lymphoma is a likely diagnosis.

SPECIES

Canine

BREED

Rott

SEX

Male Neutered

AGE

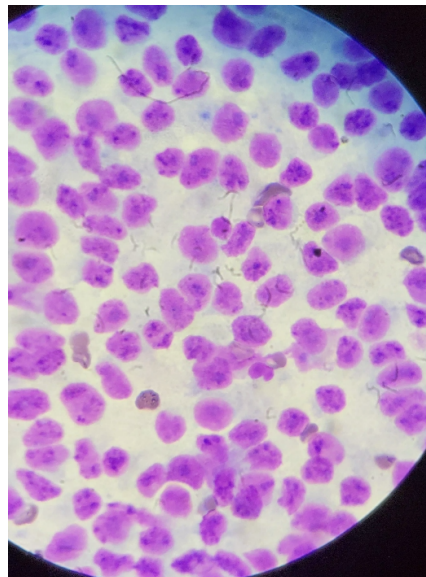
6y

WEIGHT

108

HOSPITAL NAME

Bayshore Veterinary
Hospital



REFERRING VET

Dr. Hunt

Image shows a representative collection of lymphoid cells from the lymph node in Axel. Note the uniform larger lymphoid cells in this image. Some have 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.

INVOICE NUMBER

933



DATE 4/18/23 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.

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