



DATE PRESENTING CLINICAL SIGNS

6/14/22

Pet came in for vomiting. On the abdominal ultrasound section of the small intestine had severely thickened (up to 1.8 cm) hypoechoic walls with loss of normal layering. Mesenteric lymph nodes - slightly enlarged (0.6 cm thickness), hypoechoic with hyperechoic surrounding mesentery. Spleen - slightly enlarged (1 cm thickness), smooth. U/S-guided FNA of the intestinal wall is submitted in this sample.

INTERPRETED BY

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

Vomiting, palpable intestinal mass, BW - NSF.

CYTOLOGY SUBMISSION

FNA of Spleen

PATIENT

Isabelle Allmond

OBSERVATIONS

Intestinal mass: Submitted are 8 excellent videos of excellent collections of cells from the intestinal mass in Isabelle. The cellularity consists of large numbers of round cells with minimal cytoplasm. Some of the cells are aggregated but most of the cells are individualized. There are scattered macrophages and neutrophils in the collection. The round cells are lymphoid cells demonstrating somewhat irregular nuclear characteristics. There are smudged lymphoid cells throughout the collection.

SPECIES

feline

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Intestinal mass - Consistent with high-grade lymphoma of the intestinal wall.

COMMENTS

SEX

Female, Spayed

The cellularity is strongly consistent with lymphoma in the intestinal wall of the cat. The cellularity is slightly irregular but strongly suggests that possibility with the large number of cells present. These types of lesions can respond to excision from the intestinal tissue of the cat and prolong life. In the long term, this process will likely result in further clinical signs and an unfavorable prognosis.

AGE

06-03-2013

WEIGHT

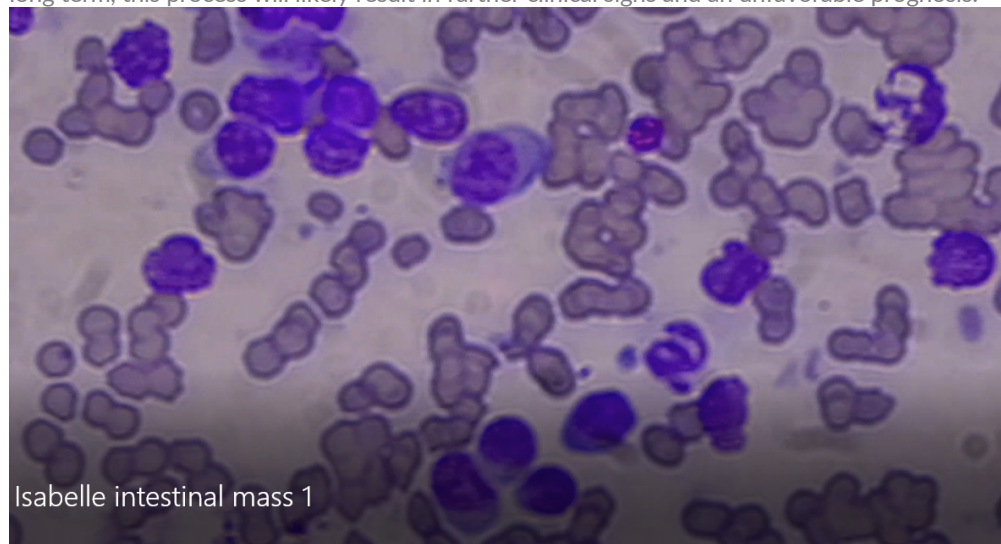
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HOSPITAL NAME

Central Veterinary
Hospital

REFERRING VET

Dr. Anna St. Sir



Isabelle intestinal mass 1

Image shows a large number of lymphoid cells with inflammation. The image is slightly out of focus.

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

40543



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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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