



DATE PRESENTING CLINICAL SIGNS

6/23/22

Patient presented for exam 6/22/22 with a mass with a history of ~1 month. 5x5cm mass, draining serosang. fluid, surface is bruised, fairly firm, irregular, lateral to left inguinal mammary gland and deep subcutaneous tissue. Samples were taken via fine needle aspirate.

INTERPRETED BY

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

CYTOLOGY SUBMISSION

FNA of Dermal, Lateral to left inguinal mammary gland region mass

PATIENT

Rose Hartman

OBSERVATIONS

Lateral to left inguinal mammary gland region mass: Submitted are 6 videos of cells collected from this region in Rose. The cellularity is prominent in five of the six videos. The cellularity is mixed. There are scattered neutrophils and moderate numbers of lymphocytes but many macrophages with foamy cytoplasm are visualized. There are scattered spindloid cells and there is some necrosis and degeneration. Scattered mast cells are identified in the collection. Erythrocytes are prominent. There is a protein background. Malignant characteristics are not identified.

SPECIES

Feline

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Lateral to left inguinal mammary gland region mass - Pyogranulomatous inflammation with necrosis and scattered mast cells.

SEX

SF

COMMENTS

The cellularity is mixed suggesting a chronic inflammatory process. The mast cells are likely part of the inflammatory reaction. A mast cell tumor cannot be completely ruled out. This appears to be an inflammatory process which could be secondary to a bite wound or other traumatic reaction. I did not identify evidence of sepsis or neoplasia. Treatment with anti-inflammatory agents may be beneficial with this process. Excision of course may be required in the future. There is no suggestion of malignancy in this tissue or mammary gland neoplasia and thus emergency surgery to excise the lesion is not encouraged with this collection. A guarded prognosis is warranted since we do not know the specific underlying process. I have seen injection site reactions similar to this and have noted that they have migrated from the original injection site location. This is unusual but it is a possibility.

AGE

8y

WEIGHT

14#

HOSPITAL NAME

Rotterdam Veterinary
Hospital

REFERRING VET

Dr. Melodee Kopa

INVOICE NUMBER

40553



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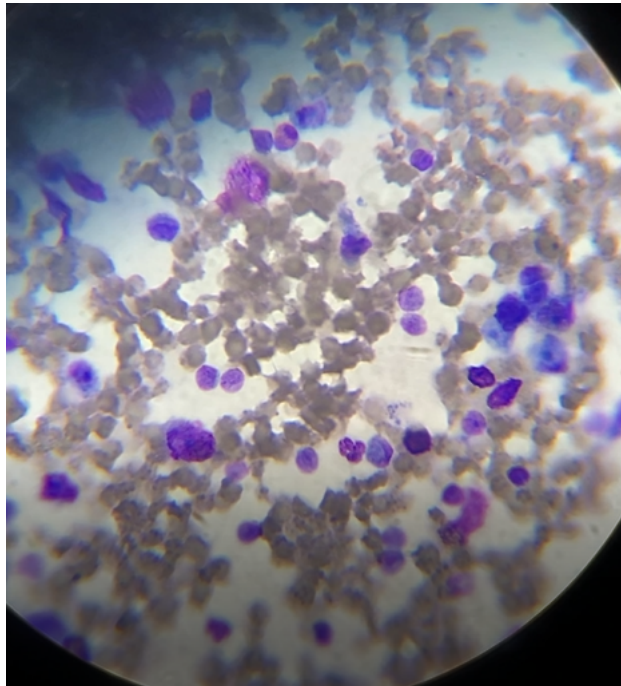


Image shows a mixture of cells with prominent macrophages, neutrophils and lymphocytes collected from the lesion on Rose. There may be mast cells in this image also.

SEX

SF

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.

AGE

8y

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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