



DATE PRESENTING CLINICAL SIGNS

6/30/22 Chronic diarrhea not responsive to metronidazole. 10-12 pound weight loss since 3/2022.
Abdominal U/S Sedated w/ Dexdomitor/Torb 0.35ml x2 IV
Sonopath E-Mail Report: 6/23/2022

INTERPRETED BY

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

Abdominal U/S: All findings considered normal with the following exceptions:
*Mildly dependent to non dependent bladder mineral
*Moderate renal changes; Medullary mineralization; Infarcts
*Small hypoechoic splenic nodule not overtly distorting parenchyma...likely non issue
*Age related liver
*Soft shadowing in stomach

PATIENT

Copper Parker

*RAD: Mildly enlarged and slightly irregular...Not Overtly Neoplastic
*SI: Primarily intact but thickened wall; Prominent Sub Mucosa and Muscularis.
*Mesenteric Ln's: Concerning as are large, irregular and swollen.

IMPRESSION Suspicious of IBD type disease or early Neoplastic. Concerning for IBD vs Emerging SI Lymphoma.

SPECIES

Canine

CYTOLOGY SUBMISSION

FNA of Lymph Node

BREED

Hound X

OBSERVATIONS

Mesenteric lymph node: Submitted are 7 excellent videos of excellent collections of cells from the mesenteric lymph node in Copper. The majority of the cells are round cells, and they are quite large. The round cells have nuclei that are 4 to 6 times the size of red blood cells. Many of the nuclei are pleomorphic in shape. There are scattered structures suggesting mitotic figures. There are scattered small lymphocytes and neutrophils, but the majority of the cells are very large irregular atypical lymphoid cells many of which have multiple to irregular nucleoli.

SEX

Male Neutered

AGE

12 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Mesenteric lymph node - Large numbers of irregular atypical lymphoid cells suggesting high-grade lymphoma.

WEIGHT

65lbs

COMMENTS

The cellularity strongly supports the likelihood of a high-grade lymphoma. There is mild inflammation. I was somewhat surprised to see this atypical lymphoid tissue in the mesenteric lymph node since often when the intestine is involved, the mesenteric lymph nodes are not involved. In this case it appears to be an aggressive high-grade lymphoma. The intestine may or may not be involved. If chemotherapy is contemplated, immunophenotyping of the cells in this collection may be beneficial to identify cell type. This information may contribute to the prognosis. These slides may be submitted for PARR testing or biopsy and immunohistochemistry staining can be undertaken. Re-collection for flow cytometry evaluation will be required if that testing is desired. You may wish to contact the laboratory to confirm the sample required for flow cytometry. An unfavorable prognosis is warranted in my opinion.

HOSPITAL NAME

Franklin Animal Clinic
Inc.

REFERRING VET

Dr. Sam Doverspike

INVOICE NUMBER

40558



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PATIENT

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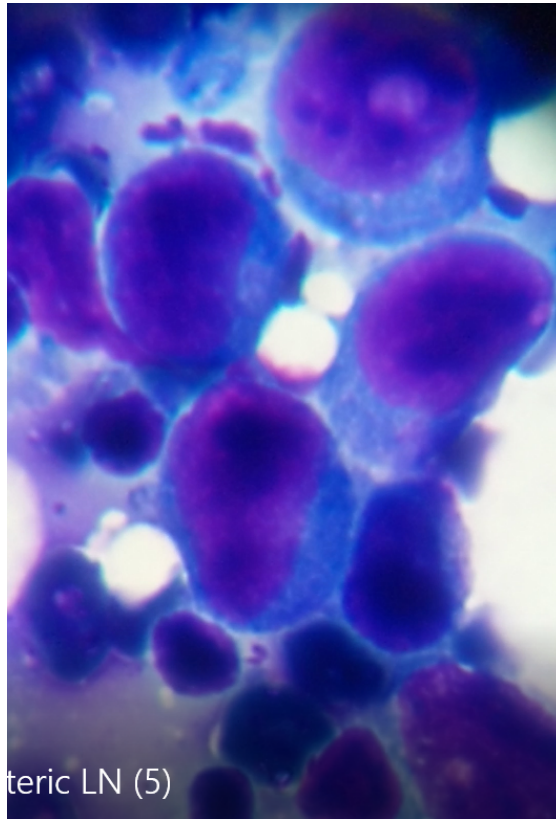


Image shows a representative group of large round cells collected from the lymph node in Copper. There are prominent nucleoli in these cells. They are representative of the large numbers of large cells collected in this excellent submission.

AGE

12 Years

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.

WEIGHT

65lbs

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.

HOSPITAL NAME

Franklin Animal Clinic
Inc.

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