



DATE PRESENTING CLINICAL SIGNS

8/16/23

Patient presented 8/15/23 for new growth on lip that has been present for 4-5 weeks. Mass is 7 x 7 mm on rostral aspect of lower lip, red and ulcerated.

INTERPRETED BY CYTOLOGY SUBMISSION

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

Dermal

OBSERVATIONS

PATIENT

Lucy Pulliam

Lip lesion: Submitted are 10 excellent images of cells collected from the lip lesion on Lucy. Several of the images include inflammatory cells that are neutrophils, lymphocytes and macrophages. The majority of the images consist of packets of apparent epithelial cells. These cells are aggregated and clumped. Some of the cells appear to have vacuolization and others have granularity. The cellularity is not demonstrating malignant characteristics but the inflammation certainly could cause rapid enlargement.

SPECIES

Canine

BREED

Boxer

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Lip lesion - Suggestive of an epithelial proliferation with secondary chronic inflammation.

SEX

Spayed Female

COMMENTS

The cellularity is aggregated in a manner that suggests an epithelial cell proliferative process. This could be a sebaceous gland adenoma with rapid growth occurring as the result of secondary inflammation. I did not identify malignant characteristics but there is a proliferative process. Another possibility would be a group of macrophages due to foreign material or some type of chronic inflammation locally with secondary neutrophilic and granulomatous inflammation. Treatment with anti-inflammatory products and excision may be required to confirm the underlying process.

AGE

4yrs

WEIGHT

60.4lbs

HOSPITAL NAME

Rotterdam Veterinary
Hospital

REFERRING VET

Dr. Kopa

INVOICE NUMBER

808



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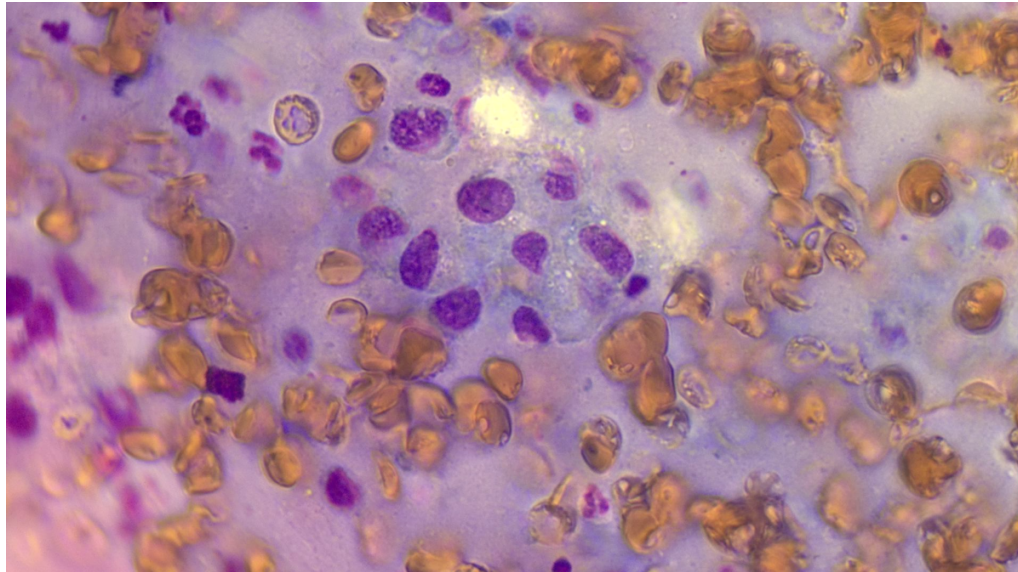
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The image shows inflammatory cells associated with the group of apparent epithelial cells with foamy cytoplasm collected from the lip on Lucy. The vacuolated structures could be the result of sebaceous gland proliferation or possibly an aggregation of macrophages.

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.

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

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