



DATE PRESENTING CLINICAL SIGNS

9/29/22

Patient presented for full work up 9/29/22. Abdominal ultrasound done while under sedation. Small nodule noted during ultrasound. Aspirates taken during ultrasound guided FNA. Bloodwork and radiology consult of chest/joint rads pending.

INTERPRETED BY CYTOLOGY SUBMISSION

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

Spleen

PATIENT

Hazel DeLeonardis

OBSERVATIONS

Spleen: Submitted are 3 excellent videos of excellent collections of cells from the nodule in the spleen in Hazel. The cellularity is mainly lymphocytes and mainly small lymphocytes. These cells have nuclei that are approximately the size of red blood cells. Some of them are slightly larger. There are larger lymphoid cells but they are few in numbers interspersed with neutrophils and rare macrophages. The lymphoid cells are not demonstrating atypia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES Spleen - Lymphoid nodule consistent with lymphoid nodular hyperplasia

Canine

COMMENTS

The cellularity in this excellent collection is mainly that of small lymphocytes. The small lymphocytes are common in lymphoid nodular hyperplasia. This can be a secondary reaction to other problems in the body. I was unable to identify any evidence of neoplasia or sepsis. An outside possibility would be early small cell lymphoma but I did not identify characteristics that would lead me in that direction. At this time it is most characteristic of a lymphoid nodular hyperplasia which is often a secondary change in the spleen and a nonspecific reaction. Occasionally they can grow to be quite large.

BREED

Mastiff

SEX

SF

AGE

8y

WEIGHT

83#

HOSPITAL NAME

Rotterdam Veterinary
Hospital

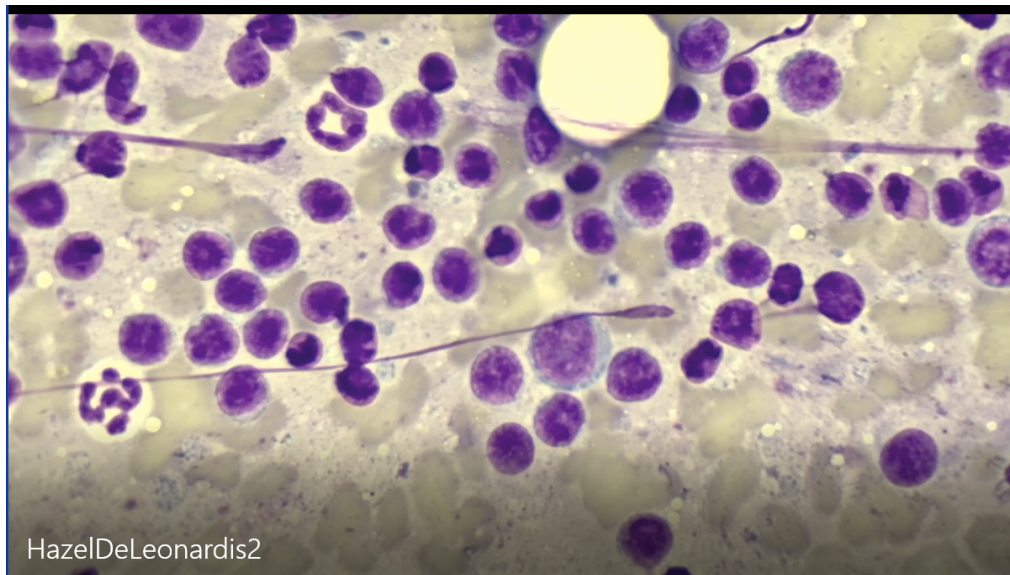


Image shows a large percentage of small to intermediate lymphoid cells with a couple of neutrophils and reactive lymphoid cells collected from the spleen in Hazel. The stringy material is smudged nuclear debris.

REFERRING VET

Dr. St. Sir

INVOICE NUMBER

812

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.



DATE

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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.

INTERPRETED BY

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Ph.D, DACVP

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