



## PATIENT

Tom Maher

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Neutered male

## AGE

11 years

## WEIGHT

13.7 lbs

## INTERPRETED BY

Dr. Lawrence McGill,  
DVM,Ph.D.,Diplomate,  
ACVP

## IMAGING PERFORMED BY

Christine, LVT

## HOSPITAL NAME

Rotterdam VH

## REFERRING VET

Dr. Anna St Sir

## INVOICE

68863

## DATE

11/19/25

## PRESENTING CLINICAL SIGNS

History: Hyporexia for 2 weeks w/ diarrhea. Elevated temperature. UTI (rods and cocci). Abd. U/S- very thick colon wall w/ loss of layering, enlarged L.N. Aspirates taken of colon wall and mesenteric Lymph nodes

## CYTOLOGY SUBMISSION

FNA of the colon and lymph node was submitted

## OBSERVATIONS

Colon: Submitted are 10 excellent images and 5 excellent videos of cells collected from the colonic wall in Tom. There is a background of red blood cells. Intermixed are nucleated cells that are mainly neutrophils with scattered macrophages and a very few lymphoid cells. Malignant characteristics are not suggested. Inflammation is quite prominent.

Lymph node: Submitted are 17 excellent images of moderate to excellent collections of cells from the lymph node in Tom. There is a background of red blood cells interspersed with lymphoid cells that are mainly small lymphocytes with scattered reactive lymphocytes and scattered neutrophils. Malignant characteristics are not suggested in this collection.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Colon - Chronic pyogranulomatous colitis with secondary hemorrhage suggestive of feline infectious peritonitis.

Lymph node - Reactive or stimulated lymph node with chronic suppurative lymphadenitis.

## COMMENTS

The cellularity supports a severe chronic inflammatory process which is commonly associated with FIP in the intestine of the cat. It could be the result of other types of chronic inflammation but there is no suggestion of malignancy. I was originally suspicious of lymphoma but the cellularity does not support that diagnosis. FIP is a common infection in the intestinal wall in particular when there is pyogranulomatous inflammation present. The inflammation in the lymph node is draining from the intestine. Again there is no suggestion of malignancy or sepsis although bacterial infection of the colonic wall cannot be completely ruled out. A guarded to unfavorable prognosis is warranted but further evaluation for coronavirus infection and treatment for that infection, if present, may be beneficial.



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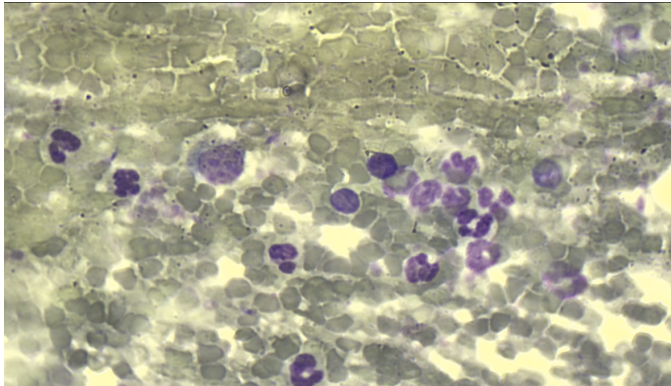
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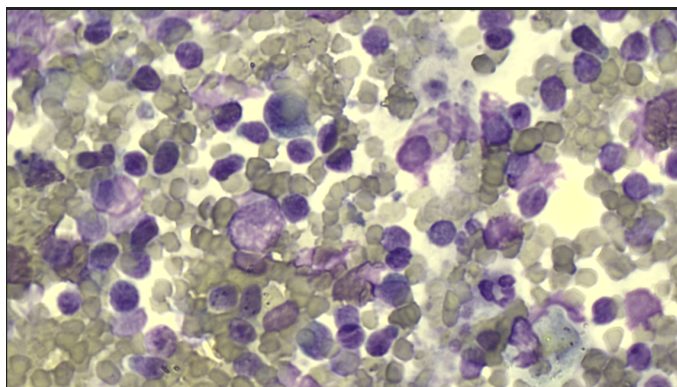
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## CYTOLOGY IMAGE



This is an image of cells collected from the colonic wall in Tom. Note the large number of neutrophils with the macrophages and lymphocytes or two.



This is an image of cells collected from the lymph node in Tom. At least one neutrophil is present with a macrophage and large numbers of small mature lymphocytes with debris and hemorrhage in the background.

**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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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