



## PATIENT

Daisy Pierce

## SPECIES

Canine

## BREED

Lab Cross

## SEX

Spayed female

## AGE

11 years

## WEIGHT

81 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Anna St Sir

## HOSPITAL NAME

Rotterdam VH

## REFERRING VET

Dr. Anna St Sir

## INVOICE

75562

## DATE

5/14/26

## PRESENTING CLINICAL SIGNS

History: Came in on 4/18/26 for limping on LH, then on 4/20/26 came in for sedated x-rays. On examination LH was swollen from thigh to hock with bruising in inguinal region. Over next few weeks P would get better. Presented today for ultrasound, LH leg severely swollen with bruising and pitting edema. Discreet, yet large, mass noted on left lateral hind leg and aspirates taken (pictures). Videos taken of popliteal lymph node that was enlarged.

## CYTOLOGY SUBMISSION

FNA of the mass and lymph node were submitted

## OBSERVATIONS

Mass: Submitted are 5 excellent images of minimal collections of cells from the mass on the lateral hind leg on Daisy. The cells are spindle cells interspersed with red blood cells and fluid. One of the cells could be a macrophage. This cellularity is very minimal to make a diagnosis. The spindle cells could be from many different conditions.

Lymph node: Submitted are 5 excellent videos of moderate to excellent collections of cells from the popliteal lymph node on Daisy. The cellularity is mixed. The lymphoid cells are mainly small lymphocytes with scattered reactive lymphocytes, macrophages, neutrophils and eosinophils. Several mast cells were observed. They appear to be scattered throughout the collection. Lymphoid cells are not malignant.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Mass - Collected are spindle cells which could support a soft tissue sarcoma or secondary granulation tissue.

Lymph node - Reactive lymphoid tissue with chronic suppurative inflammation and scattered mast cells causing concern about mast cell neoplasia.

## COMMENTS

The cellularity collected from the mass is minimal in this submission. The swelling and changes described clinically cause concern about a mast cell tumor but those cells were not present in the cells submitted as the mass. The cells on the images suggest the possibility of a soft tissue sarcoma or possibly granulation tissue responding secondarily to another lesion. I cannot confirm malignancy but it cannot be completely ruled out.

The cellularity collected from the lymph node supports chronic inflammation which you have been describing. My concern is the presence of several mast cells in this lymph node. There were eosinophils in the collection as well. The way the mass reacted brought to mind the possibility of a mast cell tumor and I am not certain we can rule that diagnosis out yet. A guarded prognosis is warranted until we can be certain about the source for the mass. A soft tissue sarcoma can be excised. If this reaction is a secondary response to a mast cell tumor, then more aggressive therapy needs to be considered. Follow-up biopsies may be required to confirm the mass and this is recommended particularly since there are mast cells in the lymph node.

## CYTOLOGY IMAGE



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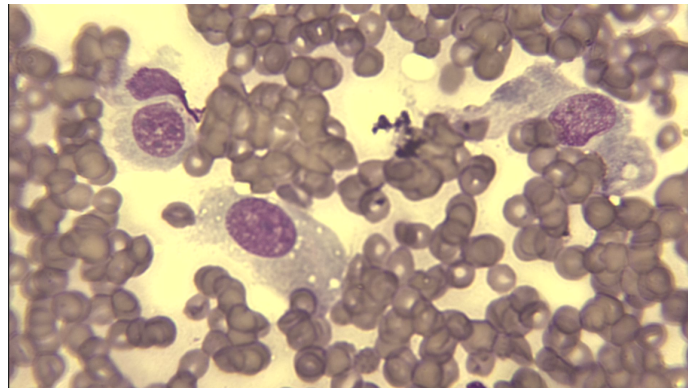
Dr. Anna St Sir

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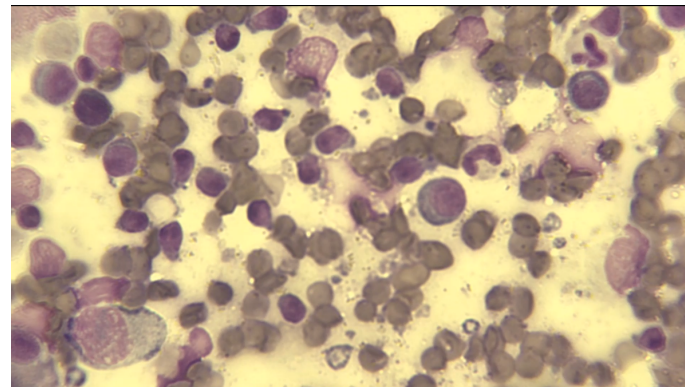
75562

## DATE

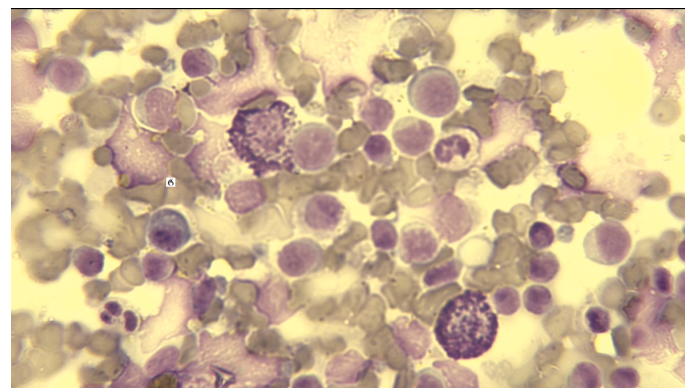
5/14/26



This is an image of some of the cells collected from the mass on Daisy. These cells have large nuclei and may be from a soft tissue sarcoma.



This is an image of cells collected from the popliteal lymph node on Daisy. Note the mixed cell collection with neutrophils and a macrophage or two and reactive lymphoid cells.



This is an image of cells collected from the popliteal lymph node on Daisy. Note the mast cells present with scattered eosinophils.



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**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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