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ANIMAL HOSPITAL OF TIFFIN
 2765 S STATE ROUTE 100
 TIFFIN, OH 44883

419-455-0470

Account: 23414

Owner: **ROCHOTTE**
 Patient: **POKEY**
 Species: **CANINE**
 Breed: **BASSETT HOUND X**
 Age: **11Y**
 Gender: **F**

Requisition #: C971324
 Accession #: W7728629
 Order rec'd: 03/01/2008
 Ordered by: MCCLUNG
 Reported: 03/03/2008

PRIORITY CYTO W/OUT MIC (1 SITE)				
Test	Result	Reference Range	Flag	Bar Graph
SOURCE/HISTORY				
Check for potential bone marrow problems. Source is not provided (assumed to be peripheral blood). Two slides received and examined.				
MICROSCOPIC DESCRIPTION				
Not requested. <i>Jim Sheedy</i>				
CYTOLOGICAL INTERPRETATION				
Pancytopenia				
COMMENTS				
<p>There is severe leukopenia. On my differential, I counted 71% segmented neutrophils, 21% lymphocytes, 5% monocytes, and 3% eosinophils. This patient has a combination of leukopenia, nonregenerative anemia, and thrombocytopenia consistent with pancytopenia. Pancytopenia may be seen with decreased bone marrow production of hematopoietic cells. This may be idiopathic, secondary to drugs or toxins, myeloproliferative disease (myelodysplasia or leukemia), immune mediated destruction of stem cells, or the presence of inflammation, neoplasia, fibrosis or necrosis in the bone marrow. Pancytopenia can be associated with Ehrlichia canis infection, and testing for this is recommended. Continued monitoring of the CBC is recommended to determine if the cytopenias persist and are worsening. Bone marrow aspiration cytology and bone marrow core biopsy and histopathology is also recommended for further evaluation. Bone marrow cytology samples from pancytopenic patients may be of very low cellularity and nondiagnostic, and this is why core biopsy and histopathology are also advisable when evaluating these patients.</p>				
PATHOLOGIST				
<p>STEPHANIE CORN, DVM Diplomat, American College of Veterinary Pathologists (Clinical Pathology)</p>				

ROCHOTTE, POKEY
 03/03/2008

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