

CASE NUMBER: 03F-49-P3-33

DATE: Aug 2, 2003

MORPHOLOGIC DIAGNOSES:

Slide 22, P3-33-1:

There are no overt lesions within the liver, heart, pancreas, spleen, adipose tissue, kidney, pyloric caecae, corpuscle of Stannius, peripheral nerves or peripheral vasculature.

Slide 23, P3-33-2:

There are no overt lesions within the liver, heart, kidney, peripheral nerves, spleen or peripheral vasculature.

Slide 24, P3-33-3:

- 1). Heart, spongy layer: Embolism, septic, moderate, multifocal, random, acute with scattered intracellular bacilli
- 2). Kidney: Nephritis, interstitial, moderate, multifocal, necrohemorrhagic, acute with scattered intrahistiocytic bacilli

There are no significant lesions within the liver, spleen, or peripheral nerves.

Slide 25, P3-33-4:

There are no overt lesions within the liver, heart, kidney, spleen, peripheral nerves or peripheral vasculature.

Slide 26, P3-33-5:

- 1). Kidney: Nephritis, interstitial, moderate, diffuse, necrohemorrhagic, acute

There are no overt lesions within the liver, heart, spleen, peripheral nerves or peripheral vasculature.

Slide 27, P3-33-6:

There are no overt lesions within the spleen, liver, heart, kidney, peripheral nerves or peripheral vasculature.

Slide 28, P3-33-7:

- 1). Liver: Hepatitis, mild, focal, lymphoplasmacytic, chronic
- 2). Kidney: Nephritis, interstitial, mild to moderate, diffuse, necrohemorrhagic, acute
- 3). Spleen: Splenitis, moderate, diffuse, necrotising, acute

There are no overt lesions within the heart, peripheral nerves or peripheral vasculature.

Slide 29, P3-33-8:

- 1). Heart, endocardia: Hyperplasia and hypertrophy, mild to moderate, multifocal, subacute
- 2). Liver, hepatocytes: Individualization and degeneration, mild, multifocal, random, acute (apoptosis)

There are no overt lesions within the spleen, kidney, peripheral nerves or peripheral vasculature.

Slide 30, P3-33-9:

There are no overt lesions within the liver, spleen, heart, kidney, peripheral nerves or peripheral vasculature.

Slide 31, P3-33-10:

Heart: Embolism, septic, mild, multifocal, random, acute

Aside from marked post mortem change, there are no overt lesions within the liver, kidney, peripheral nerves or peripheral vasculature.

COMMENTS:

Although intralesional bacteria were detected in only 2 of 10 sections, the necrohemorrhagic interstitial nephritis, hepatocellular apoptosis, and necrotising splenitis noted in 4 slides are suggestive of an acute septicaemia or possible viremia which would have been sufficiently severe to have contributed at least moderately to antemortem morbidity. Based on the lack of discernible inflammatory infiltrate and morphology of the bacteria, furunculosis (*Aeromonas salmonicida*) is a prime consideration and if fresh tissue is available, follow up culture and sensitivity is recommended. As more severely affected fish were likely shedding bacteria antemortem, additional stock have presumably been exposed and should be closely monitored for possible development of sepsis. In slide 28, the lymphocytic hepatitis is unique and suggests a more long term, non-specific, low grade inflammatory process.

FINAL REPORT