

CASE NUMBER: 03F-25-A3.3-30

DATE: May 6, 2003

MORPHOLOGIC DIAGNOSES:

Slide 46, A3.3-30-1:

- 1). Liver, sinusoids: Hemorrhage, moderate, multifocal, random, acute (peliosis-like)

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

Slide 47, A3.3-30-2:

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

Slide 48, A3.3-30-3:

- 1). Spleen: Congestion and hyperemia, moderate, diffuse, acute

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

Slide 49, A3.3-30-4:

- 1). Heart, compact ventricle: Granuloma, marked, nodular to diffuse, chronic
- 2). Heart, epicardium: Epicarditis, moderate, diffuse, granulomatous, chronic
- 3). Kidney: Nephritis, moderate, multifocal to coalescing, granulomatous, chronic, with occasional central caseonecrosis
- 4). Spleen: Granuloma, moderate, multifocal, chronic

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

Slide 50, A3.3-30-5:

- 1). Liver: Necrosis, coagulative and liquefactive, moderate, multifocal, random, acute

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

Slide 51, A3.3-30-6:

- 1). Heart, compact ventricle: Granuloma, marked, nodular to diffuse, chronic
- 2). Kidney: Nephritis, interstitial, marked, miliary, granulomatous, chronic, with occasional central caseonecrosis
- 3). Spleen: Granuloma, moderate, multifocal, chronic
- 4). Liver: Granuloma, moderate, multifocal, chronic, random

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

Slide 52, A3.3-30-7:

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

peripheral vasculature.

Slide 53, A3.3-30-8:

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

Slide 54, A3.3-30-9:

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

COMMENTS:

There is considerable variation between sections with no apparent or minimal lesions (5 slides) versus, those with intermediate to more severe disease processes. In the latter samples, the multisystemic granulomatous infiltrate would have contributed significantly to impaired homeostasis and is most likely due to a chronic bacterial infection, possibly bacterial kidney disease. Although the nidi are well circumscribed, as these more severely affected fish succumb, there is a possibility of release and dispersal of infective pathogens to other susceptible stock. Prompt removal of mortalities and possible application of antimicrobials is recommended. If fresh tissue is available, culture or molecular studies should be undertaken to confirm the etiology. The hepatic necrosis is likely related to a bacteremia or possible septicemia and the splenic congestion and hyperemia are considered agonal or terminal phenomena.

FINAL REPORT