

CASE NUMBER: 03F-96-A2.4-51

DATE: Dec 19, 2003

**HISTOPATHOLOGY:**

Slide 60, A2.4-51-1:

- 1). Heart: Endocarditis, mild, multifocal, random, lymphohistiocytic, subacute
- 2). Liver: Cholangiohepatitis, mild, multifocal, random, subacute, necrosuppurative

There are no overt lesions within the adipose tissue, peripheral nerve, spleen, peripheral vasculature or kidney.

Slide 61, A2.4-51-2:

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

Slide 62, A2.4-51-3:

- 1). Liver: Hepatitis, moderate, multifocal, random, necrotising, acute with scattered intracellular filamentous bacilli
- 2). Anterior kidney, sinusoids: Histiocytosis, moderate, diffuse

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

Slide 63, A2.4-51-4:

There are no overt lesions within the adipose tissue, liver, peripheral nerve, spleen, peripheral vasculature or kidney.

Slide 64, A2.4-51-5:

- 1). Heart, : Myocarditis, moderate, multifocal, random, necrotising, with florid intralesional accumulation of coccobacilli
- 2). Kidney, interstitium: Embolism, embolic, moderate, multifocal, acute
- 3). Spleen: Lymphocytolysis, mild to moderate, multifocal, acute

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

**COMMENTS:**

The multisystemic bacteria and necrosis with lack of attendant inflammatory infiltrate in slide 5 are consistent with furunculosis (*Aeromonas salmonicida*) which would have been sufficiently severe to have contributed significantly to antemortem morbidity and the loss of this fish; although there were no discernible bacteria in 2 of 4 other sections, the low grade inflammation and necrosis may be associated with the incipient stage of septicemia. Follow up culture of fresh tissue for bacterial speciation and antibiotic sensitivity profile determination is recommended.

**\*FINAL REPORT\***