

Tierdermatopathologie Deisenhofen : Dermatopathology Consultation



Dear Colleague,

We welcome your enquiry and hope you will find our dermatopathology service useful. Please find attached some relevant forms, which include the submission forms for both small animals and horses, a general information form regarding this service and – on the last page - a copy of “tips and tricks for obtaining a better biopsy”.

In order to gain the best possible service, please follow these steps:

1. Complete the submission form as fully as possible. There is also the possibility to complete this fully “on-line” and send only the “cover details” with the sample.
2. Ensure that the formalin volume is 10 x the volume of the tissue and that the container is sealed tight.
3. Check before sending that we are not away at a conference. The dates for 2011 when Dr Bettenay will be away are listed below:

April 4-8 (*Conference, Austria*);

April 18 - May 7 (*Family vacation & 2 x CVE conference*);

August 22 - Sept 2 (*Conference: University of Zagreb & Family vacation*)

September 8-10 (*ESVD/ECVD annual conference*);

November (*CVE conference*)

4. We will send a confirmatory fax when the sample arrives, but please contact us* if this confirmation notice has not arrived within 1 week of shipping.
5. Finally, please file this information for future reference.

The submission address is:

Tierdermatologie Deisenhofen

Schaeftlarnner Weg 1a

82041 Deisenhofen.

Tel 49-89-67905039 & Fax 49-89-67905038 or 49-89-95464200

An invoice will be submitted with the report and payment of 50- € can be made by credit card or bank transfer.

We hope this assists you in your submission and look forward to working with you in the future,

Sonya Bettenay, for Tierdermatologie Deisenhofen.

Tierdermatopathologie Deisenhofen : Dermatopathology Consultation



Practice Name: _____
 Contact Vet: _____

Animal Name _____ Owner _____
 Dog ___ Cat ___ Horse ___ Other _____
 Breed _____ Age _____
 F ___ FS ___ M ___ MC ___

Telephone _____
 Fax _____

Current Problem:

e-mail _____

History:

How & when did the dermatosis begin? _____

What were the earliest lesions? _____

Systemic illness? no yes diagnosis _____

Previous skin / Ear problems? no yes further info: _____

Other animals or humans affected? no yes further info: _____

*further info.. please supply only the abnormal results with the diagnosis.

Distribution and type of lesions:

Pruritus*? no yes **Seasonality** no yes

Symmetric? no yes

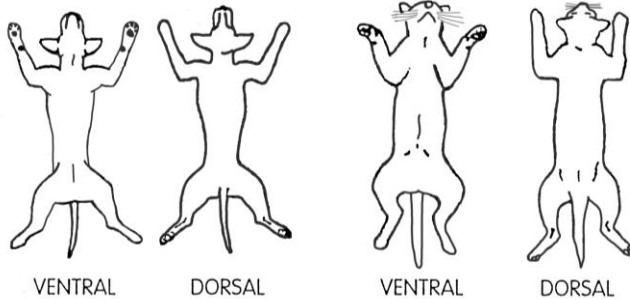
***Degree** -please circle:(mild) **1 2 3 4 5 6 7 8 9 10 (severe)**

Localisation:

- Face Feet Body Abdomen Neck Ears Legs Tail Flanks Footpads

Circle affected Areas if that helps:

Please cross the lesions which are present:



- Alopecia
- Callous
- Comedone
- Crusts
- Depigmentation
- Erosion
- Erythema
- Excoriation
- Epidermal collarettes
- Hyperpigmentation
- Lichenification
- Claw changes
- Macules
- Nodules
- Papules
- Plaque
- Pustule
- Scale
- Scar
- Ulcers
- Vesikel
- Other

Previous diagnostic Tests (please write relevant results briefly):

Skin scraping no yes _____
 Cytology no yes _____
 Bacterial Culture no yes _____
 Fungal culture no yes _____
 Elimination diet no yes _____
 Wood's Lamp no yes _____

Serumallergy test no yes _____
 CBC, serum Biochem no yes _____
 Thyroid evaluation? no yes _____
 Cushings evaluation? no yes _____
 Skin Biopsy no yes _____
 Other _____

Previous Therapy:

When yes, please complete the other questions:

Please circle:

Antibiotic	<input type="checkbox"/> no* <input type="checkbox"/> yes	Type _____	Improvement? _____ %	#Relapse/Recurrence
Glucocorticoid	<input type="checkbox"/> no <input type="checkbox"/> yes	Type _____	Improvement? _____ %	
Shampoo therapy	<input type="checkbox"/> no <input type="checkbox"/> yes	Type _____	Improvement? _____ %	
Fleatreatment	<input type="checkbox"/> no <input type="checkbox"/> yes	Type _____	Improvement? _____ %	
Mite-therapy	<input type="checkbox"/> no <input type="checkbox"/> yes	Type _____	Improvement? _____ %	

Other _____

*AB - No = No (or very limited) improvement in the clinical lesions or pruritus, even during AB treatment

Relapse/Recurrence = complete remission during therapy BUT : Relapse = return within 2 weeks of therapy end;

Recurrence = return 2 weeks +

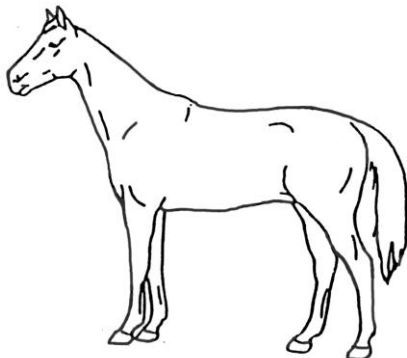
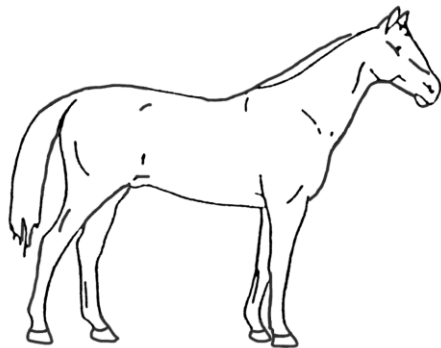
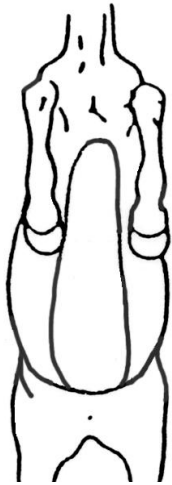
List your clinical differential diagnoses (really important!!!): _____



Equine Dermatopathology Submission Form

Name of animal

Referring veterinarian



What did it look like at the start?

 Are people or other animals affected? Yes No

Is pruritus present ? Yes No
 Is the pruritus seasonal in summer spring
 autumn winter OR is it nonseasonal ?

Which clinical lesions are present?
 erythema, pustules scaling crusts
 epidermal collarettes papules cyst
 hyperpigmentation depigmentation
 erosions excoriations ulcers

Previous In-House tests: (please attach results)
 skin scraping fungal cultures
 bacterial cultures

Previous Diagnostic Laboratory tests: (please attach results)
 fungal culture bacterial C & S
 histopathology allergy testing (serum or IDST)



Seven tips to obtain a better skin biopsy result:

1. do not prepare the skin surface (exceptions, nodule excision & when the biopsy is undertaken for a deep tissue culture)
2. spend 5 minutes looking for primary lesions and thinking about the differential diagnoses. Then list these differentials on the submission form. This list may make or break the pathologists interpretation of your sample! The time taken to select the range of lesions present on the animal and to look for pustules, if present, may also make or break a diagnostic biopsy result.
3. select multiple samples (**6** is a good rule of thumb) so that they represent the range of lesions - from normal skin to worst affected
4. if possible, always include a normal sample from the dorsal or dorso-lateral trunk, not from the ventral trunk.
5. Use 6 to 8mm punches or an elliptical / excisional biopsy except on noses and feet.
6. Handle the biopsy specimen carefully, treat it like *wet* tissue paper even when excising.
7. give the pathologist a complete history and physical findings report as well as your differential diagnosis list