Case 1. Tissue from a cat.

MORPHOLOGIC DESCRIPTION: Haired skin: The epidermis is focally and markedly thickened by a poorly demarcated, moderately cellular, unencapsulated, verrucous, and infiltrated neoplasm (1pt). The neoplasm is composed of cords and islands of keratinizing polygonal epithelial cells (1pt) on a moderately dense fibrous stroma (1pt). Neoplastic epithelial cells have distinct cell borders and abundant eosinophilic granular to fibrillar cytoplasm (1pt). Nuclei are irregularly round with 1-2 large magenta nuclei (1pt). Nuclei exhibit moderate anisocytosis and anisokaryosis. Mitoses are rare (1pt). Centrally, islands often exhibit central areas of keratinization (1pt). The surrounding epithelium is markedly thickened up to 10-12 cells layers thick and thrown into prominent folds (1pt). Epithelial cells within all levels of the epidermis have a monomorphic appearance, have abundant eosinophilic cytoplasm which occasionally contains melanin granules (hyperpigmentation), large nuclei with prominent nucleoli and mitotic figures are present within all levels (2pt) (dysplastic) (1pt) - this change extends downward along the outer root sheath of follicles. The dysplastic epithelium is multifocally eroded with a serocellular and hemorrhagic crust, subjacent to this, there is prominent intercellular edema. (1pt) The superficial dermis is expanded by varying combinations and concentrations of lymphocytes, plasma cells, neutrophils, and macrophages, numerous mast cells, edema, hemorrhage, and prominent fibroblasts. (1pt)

MICROSCOPIC DIAGNOSIS: 1. Haired skin: Squamous cell carcinoma. (3pt)

2. Haired skin: Bowenoid in situ carcinoma (Bowen's disease, in situ SCC, marked epithelial dysplasia all ok). (3pt)

Case 2. Tissue from a cat.

MORPHOLOGIC DESCRIPTION: Ear pinna (1pt). Adjacent to the pinnal cartilage (1pt), there is abundant granulation tissue (1pt), containing large numbers of neutrophils (2pt) admixed with lesser numbers of macrophages (1pt), lymphocytes (1pt) and plasma cells (1pt), cellular debris, and multifocal hemorrhage. Multifocally, the perichondrium and rarely the outermost edges of the pinnal cartilage is infiltrated by low numbers of neutrophils (2pt). The pinnal cartilage is curled, multifocally thickened, and diffusely eosinophilic. (2pt) There is multifocal disorganization of chondrocytes at the border of the pinnal cartilage in areas of heavy inflammation, and rare necrotic chondrocytes. (1pt)

MICROSCOPIC DIANGOSIS: Ear, pinna: Cellulitis, chronic-active, diffuse, moderate, with mild neutrophilic chondritis. (3pt)

Name the condition: Auricular chondritis (2pt)

Name another affected species: Rats, humans, dog. (1pt)

Case 3. Tissue from a cat.

(NOTE: Not really a good descriptive slide – note the changes, and move on.)

MORPHOLOGIC DESCRIPTION: Haired skin: Diffusely, the upper third (2pt) of hair follicles are markedly abnormal and are devoid of hair shafts (3pt). Many follicles contain broken or poorly formed hair shafts (3pt), and ostia are occasionally dilated. Adnexa and hair bulbs are normal (3pt). There is mild parakeratotic hyperkeratosis of the overlying epidermis (2pt), and there are rare neutrophils, lymphocytes, and plasma cells in the superficial dermis (2pt).

MICROSCOPIC DIAGNOSIS: Haired skin, follicles: Trichodysplasia and trichomalacia, diffuse, severe. **(4pt)**

Case 4. Tissue from a puppy.

MORPHOLOGIC DESCRIPTION: Haired skin: Within the multifocally moderately hyperplastic (acanthotic) (1pt) epidermis, there are shrunken, round, eosinophilic (necrotic) (1pt) keratinocytes within all layers of the epidermis (2pt), often with one to several lymphocytes and/or neutrophils in close association (1pt). Within the basal epithelium, there is moderate intercellular edema, necrotic cells, an increased mitotic rate, (1pt) and occasional epithelial cells contain enlarged hyperchromatic nuclei which occasionally contain rectangular to rhomboidal viral inclusions that peripheralize chromatin (2pt). Similar degenerating cells with viral inclusions are also present with hair follicle epithelium (1pt). There are large numbers of neutrophils within the superficial epidermis (1pt) which often infiltrate the overlying epithelium, forming clusters (1pt), often in association with necrotic keratinocytes. There is moderate inter- and intracellular edema primarily within the stratum spongiosum, and there is marked overlying orthokeratotic hyperkeratosis (1pt). Within the overlying crust, there are numerous degenerate neutrophils and cellular debris, often forming small pustules (1pt). The superficial epidermis contains numerous neutrophils with lesser histiocytes, lymphocytes, and plasma cells, abundant mast cells, and vessels are lined by reactive endothelium (1pt).

MICROSCOPIC DIAGNOSIS: Haired skin, epidermis and follicles: Keratinocyte necrosis, multifocal, moderate, with marked neutrophilic dermatitis and epidermitis, parakeratotic hyperkeratosis, pustule formation, and intranuclear viral inclusions. (3pt)

CAUSE: Canine parvovirus-2 (2pt)