

ANTECH Dermatopathology Service

Our experienced team offers advanced evaluation of skin biopsies for cats, dogs, and horses.

Antech is proud to have a team of board-certified anatomic pathologists with dermatopathology specialization. Our experienced team offers advanced biopsy evaluations and interpretations for cases of dermatologic disease with inflammatory, infectious, endocrine, immune-mediated, and idiopathic causes.

All biopsy submissions are reviewed by a pathologist on this team, who will provide detailed, comprehensive reports on every case, including description, interpretation and comments, with a standard turnaround time of 3 to 5 business days. And because the pathologist's direct contact information is included with every report, doctor-to-doctor connections are just an email or phone call away.

This service is available only for dogs, cats, and horses with non-neoplastic dermatologic disease.

To order a biopsy for evaluation specifically by a member of the dermatopathology service, select **DERMPATH** in the US or **CDERMPATH** in Canada, and submit samples with a completed Dermatopathology Submission Form (see reverse).

To receive these benefits **plus** treatment recommendations made by a board-certified veterinary dermatologist, order **DERM** in the US or **CDERM** in Canada, and submit samples with a completed Dermatopathology Submission Form (see reverse). The dermatologist's treatment recommendations will follow the pathologist's final biopsy report.

If your skin biopsy has already been read by an Antech pathologist, you can still request a review by our dermatopathology team and receive clinical recommendations from a dermatologist. To do so, contact Customer Service (1-800-872-1001 in the US or 1-800-341-3440 in Canada) and request test code **DERMUP**.

DERMATOPATHOLOGY TEAM



Jessica Hanlon
MS, DVM, DACVP



Erin Locke, Chair
DVM, DVSC, DACVP



Cesar Piedra-Mora
DVM, DACVP



Carl Myers
DVM, DACVP



Melissa Sanchez
VMD, PhD, DACVP



Courtney Sweeney
DVM, DACVP



Bradley Turek
VMD, DACVP



Whitney Zoll
DVM, DACVP

Treatment	Recommended Washout Period Before Biopsy
Cyclosporine (ex: Atopica), Antihistamines, NSAIDs	1 Week
Antibiotics, Shampoos	2 Weeks
Topical and Oral Steroids	3 Weeks
Injectable Steroids	6 Weeks

Modified from Joyce J. Notes on Small Animal Dermatology. Wiley-Blackwell; 2010

Dermatopathology Submission Form

- DERMPATH/CDERMPATH (no dermatologist treatment recommendations)
 DERM/CDERM (with dermatologist treatment recommendations)
 STAT (additional charges apply)

Please complete this form to the best of your ability. Photos are always appreciated and can enhance the results. Email photos to antechphotos@antechmail.com and include: 1. clinic name; 2. Antech account number; 3. patient name; 4. pet owner name; and 5. accession (if available).

Patient Info			
Species: <input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Horse The dermatopathology biopsy service is available only for canines, felines and equines.	Sex: <input type="checkbox"/> M <input type="checkbox"/> FS <input type="checkbox"/> F <input type="checkbox"/> MC	Date:	Antech account #
Breed(s)/suspected breed(s):		Owner first and last name:	Age:
Coat color(s):		<input type="checkbox"/> Photos submitted (recommended)	
Clinical Information			
Where are the lesions located? Any oral or other mucosal surfaces affected, or paw pad/ hoof involvement?			
Are lesions seasonal? <input type="checkbox"/> No <input type="checkbox"/> Yes: (circle) Spring / Summer / Fall / Winter	Are others in the home affected? <input type="checkbox"/> No <input type="checkbox"/> Yes, other animals <input type="checkbox"/> Yes, people		
Duration? <input type="checkbox"/> Days <input type="checkbox"/> Weeks <input type="checkbox"/> Months <input type="checkbox"/> Years	Time outside? <input type="checkbox"/> None (Indoor Only) <input type="checkbox"/> Some (Ex: leash walks, dog parks) <input type="checkbox"/> Mostly or Always	Pruritus? <input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe	
Type of lesions (Check all that apply) <input type="checkbox"/> Papules <input type="checkbox"/> Vesicles <input type="checkbox"/> Plaques <input type="checkbox"/> Scales <input type="checkbox"/> Alopecia <input type="checkbox"/> Pustules <input type="checkbox"/> Crusts <input type="checkbox"/> Erythema <input type="checkbox"/> Hyperpigmentation <input type="checkbox"/> Depigmentation <input type="checkbox"/> Nodules <input type="checkbox"/> Lichenification <input type="checkbox"/> Other (Specify)			
Clinical History, Diagnostic Tests, and Treatments			
Please summarize the travel history and clinical history, with relevant test results (EX: skin scrapes, T4, etc.), and treatments including response (none, some, etc.).			
Key Questions			
What are your clinical differentials? Do you have questions or concerns you'd like the pathologist to answer?			