

Referrals for Masses, Lumps, Bumps, and Sores:

In order to assist the referral of animals with lumps, bumps, and sores and possibly save your client money, we would like to encourage pre-referral consultation by the referring veterinarian to determine which service would be most appropriate for the case.

If a referring veterinarian wants to send in a **skin/muscle/subcutaneous “mass on something”** and does not have a definitive diagnosis, our recommendation is that the referring veterinarian gets an aspirate and submits it for cytology (unless the cytologic diagnosis is obvious to them; e.g. mast cell tumor). Based on the results:

- If the cytology result is **pyogranulomatous**, Dermatology recommends biopsy for histopathology and a separate, sterile biopsy for bacterial, fungal, and sometimes mycobacterial culture. The referring veterinarian can call Dermatology if they have questions about this and should call before considering referring in the case.
- If the result is suspect **neoplasia**, Oncology recommends getting a punch biopsy and then calling for a consultation once results are known. That will determine whether the referral should go to Oncology or whether it might be prudent to send the case straight to the Surgery Service for amputation or resection. If referring to Soft Tissue Surgery, we recommend veterinarians call to speak with a Soft Tissue surgeon for consultation or send photos through utvetsofttissue@utk.edu for some initial direction, since we are limited in anesthesia slots.
- If it is diagnosed as a **mast cell tumor**, referred animals will undergo a workup for metastatic disease, including abdominal radiographs and ultrasound +/- spleen and liver aspirates. Recent bloodwork (less than one month old) done by the primary/referring veterinarian will not be repeated unless results are abnormal. If the veterinarian is referring from a practice that has the capability for performing staging, then that staging can be performed before the animal is referred. Mast cell tumor resection often requires removal of margins 2 cm wide and 1 fascial plane deep; if veterinarians are unsure as to resectability, they could call the Soft Tissue Surgery service for guidance before referring.
- If it is a **lipoma**, the veterinarian can call to get an estimate of surgical costs. Many owners decide against surgery once they learn the cost or find out that surgery is not essential for many animals.
- If the result is diagnosed as **some other type of neoplasm**, the referred animal will undergo a workup for metastatic disease (usually thoracic radiographs +/- abdominal imaging). Resectable tumors can be referred to Soft Tissue Surgery; nonresectable or marginally resectable tumors can be referred to Oncology. The referring veterinarian can call for a Surgery or Oncology consultation to discuss these options. Also, Oncology is happy to see animals with resectable tumors for staging and discussion of treatment options if referring veterinarian refer directly to them. Consults and tumor photos can be sent to utoncology@utk.edu. Our services work together in the event that a patient needs to be managed by the other service.

If the mass is an open “sore”, wound, or ulcerated region, we recommend calling for a consultation first or sending photos in for evaluation with the oncology, dermatology or soft tissue surgery services so the owners can be directed to the correct service. For consultation with medicine cases, please call prior to sending any photos.

Examples of cases:

- **Draining tracts between toes** are usually initially evaluated by Dermatology.
- **Ulcerated hygromas** can be managed by referring veterinarians using wound recommendations from Soft Tissue surgeons (e.g., surgical prep with sterile biopsy for culture and histopath, plus appropriate bandaging), bandaging options from Orthopedics or Soft Tissue Surgery, and long term solutions (e.g., Dog Leggs) from the Physical Therapy service. Please call for a consult to determine the appropriate service.
- Dogs that have **nonhygroma pressure sores over bony prominences** often have underlying systemic, neurologic, and/or orthopedic conditions that will need to be addressed to assist in healing and prevent recurrence. Consultations for patients with suspected neurologic conditions should be sent to Neurology for help with diagnosis/treatment or the Physical Therapy Service for help with improving mobility. Consultations for metabolic weaknesses (e.g., hypothyroidism, Addison's) should be made through telephone consultations with Internal Medicine. Questions regarding wound management options can be directed to Soft Tissue Surgery (send photos to utvetsofttissue@utk.edu).
- For **chronic, nonhealing wounds** that do not have apparent underlying causes (neoplasia, fracture) or have a traumatic cause, we recommend getting a sterile tissue sample for culture and biopsy and then call Soft Tissue Surgery or Dermatology for a consult to determine the next course of action. Photographs submitted to utvetsofttissue@utk.edu by the veterinarian are helpful during these consults.

THANK YOU FOR YOUR REFERRAL!

2407 River Drive – Room C247 | Knoxville, TN 37996-4544

Clients and/or Veterinarians: 865-974-8387 | Fax: 865-974-0174

Referring Veterinarians ONLY: Referral Coordinator: 865-974-3939 | utvetref@utk.edu

vetmed.tennessee.edu/vmc

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