



<b>DATE</b>	<b>PRESENTING CLINICAL SIGNS</b>
12.23.2022	Enlarged Lymph Nodes. In 2020 pet had lymphadenopathy w pyogranulomatous inflammation.
<b>PATIENT</b>	Current Medications: Feline Heartgard, 3/2021 – present. GS 441524 for 84 days in 2020 (obtained from Canada)
Gizmo Spalt	Lab Results: 12/14/2022: Superchem,CBC,T4,UA,FeLV,FIV CBC- mild leukophilia (16,400), monocytosis (2,246), basophilia (Baso: 164). Chem- Mild increase in amylase- 1,390IU/L (Not considered significant). All other chem values are normal. Feline leukemia FIV negative.
<b>SPECIES</b>	
Feline	Date of Previous IntraPet Ultrasound: No previous.
<b>BREED</b>	Sedation: Ketamine, Valium IV. Stat Report: Not requested.
Maine Coon	Imaging Performed By: Stephanie Warga RDCS, RVT.
<b>SEX</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Neutered Male	<b>Urinary System</b> The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is mildly distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.
<b>AGE</b>	
11/19/2018	
<b>WEIGHT</b>	The left kidney is normal size (4.73 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. The cortex is isoechoic relative to the spleen. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.
20.2 lbs	
<b>INTERPRETED BY</b>	The right kidney is normal size (5.04 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. The cortex is isoechoic relative to the spleen. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.
Andrea Nicastro, DMV, Diplomate DACVIM (Small Animal Internal Medicine)	
<b>HOSPITAL NAME</b>	<b>Adrenal Glands</b> The left adrenal gland is normal size (0.36 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.
Bel Air Veterinary Hospital	The right adrenal gland is normal size (0.35 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.
<b>REFERRING VET</b>	<b>Spleen</b> The spleen is normal in size (0.98 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.
Dr. Schmidt	
<b>INVOICE</b>	<b>Liver</b> The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.
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The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

### ***Gastrointestinal***

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio in most segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.

### ***Pancreas***

The left limb is visible with normal curvilinear peripheral contours. The parenchyma is slightly hypoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is not overtly dilated.

### ***Free Abdomen***

There is no obvious evidence of free fluid. An approximately 5.00 cm hypoechoic, rounded to irregular lymph node is observed in the right cranial quadrant. In addition, an approximately 3.28 cm hypoechoic, rounded lymph node is observed in the caudal abdomen. Finally, several smaller lymph nodes are seen throughout the abdomen. The larger nodes are surrounded by large vessels inhibiting safe aspiration.

## **ULTRASONOGRAPHIC FINDINGS**

### **Primary Findings**

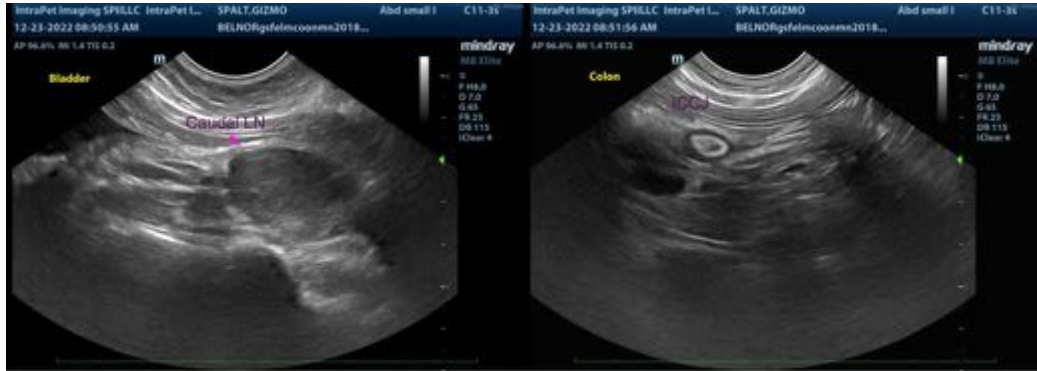
- The abdominal lymphadenopathy could be consistent with lymphadenitis (i.e., pyogranulomatous), infiltrative neoplasia (i.e., round cell tumor) or less likely, lymphoid hyperplasia.

### **Secondary Findings**

- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended.
- The small intestinal wall changes are most consistent with inflammatory bowel disease with some potential for emerging lymphoma.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- If the submandibular lymph node cytology results are inconclusive, surgical biopsies of the enlarged abdominal lymph nodes may be warranted, as aspiration of these nodes was not feasible at the time of this study (due to adjacent vasculature and lack of a safe window to perform the procedure).
- Also consider further testing for feline infectious peritonitis.



**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

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