**DATE PRESENTING CLINICAL SIGNS**

5/12/2022

**PATIENT**

Othello Bunting

History: Presented to rDVM 4/29/22 for annual wellness, owner reported altered appetite (grazing rather than finishing full meal, preference for canned over dry). PE-weight loss of 1#, dental disease, muscle atrophy. Labs-ALT of 312, AST 113, other liver enzymes normal, IRIS CKD stage II, borderline proteinuric, unknown BP status, questionable thrombocytopenia. Indoor/outdoor. BUN 42. Creatinine 2.5. Normal T4

**SPECIES**

Feline

Current Medications: none listed.

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**BREED**

DSH

Imaging Performed By: Andi Parkinson, RDMS.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****SEX**

Neutered Male

**Urinary System**

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately 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.

**AGE**

5/4/2004

The left kidney is normal size (4.16 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

**WEIGHT**

10.8 lbs

The right kidney is small in size (2.35 cm in length); with an irregular shape. There is a normal 1:3 cortex to medulla ratio with poor corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

**INTERPRETED BY**

Andrea Nicastro,  
DMV, Diplomate  
DACVIM (Small  
Animal  
Internal Medicine)

**Adrenal Glands**

The left adrenal gland is normal size (0.47 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.38 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

**HOSPITAL NAME**

Nexus Veterinary  
Specialists

**Spleen**

The spleen is normal in size (0.79 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.

**REFERRING VET**

Dr. Steele

**Liver**

The liver is subjectively prominent in size with irregular peripheral contours. A 3.16 x 2.01 cm irregular, isoechoic to heterogenous, vascular mass is observed in the region of the right medial lobe. The mass causes capsular expansion. In addition, a 4.19 cm thin-walled cyst is observed approximately mid-liver. The cyst contains echogenic fluid. The remaining hepatic parenchyma is relatively homogenous in appearance. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. the portal vein to caudal vena cava ratio is approximately 1: 1.

**INVOICE**

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The gall bladder lumen is moderately distended. The wall is normal in thickness. A small to moderate amount of partially dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are visible but not overtly dilated. The common bile duct measure 0.26 cm in diameter. The duodenal papilla is normal in size (0.38 cm in width).

### ***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. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

### ***Pancreas***

The pancreas is diffusely enlarged with minimal deviation from the normal peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is diffusely dilated (up to 0.51 cm in diameter).

### ***Free Abdomen***

Trace free fluid is observed. Several enlarged, rounded hypoechoic lymph nodes are observed adjacent to the ileocecolic junction. Surrounding mesentery is hyperechoic.

## **ULTRASONOGRAPHIC FINDINGS**

### **Primary Findings**

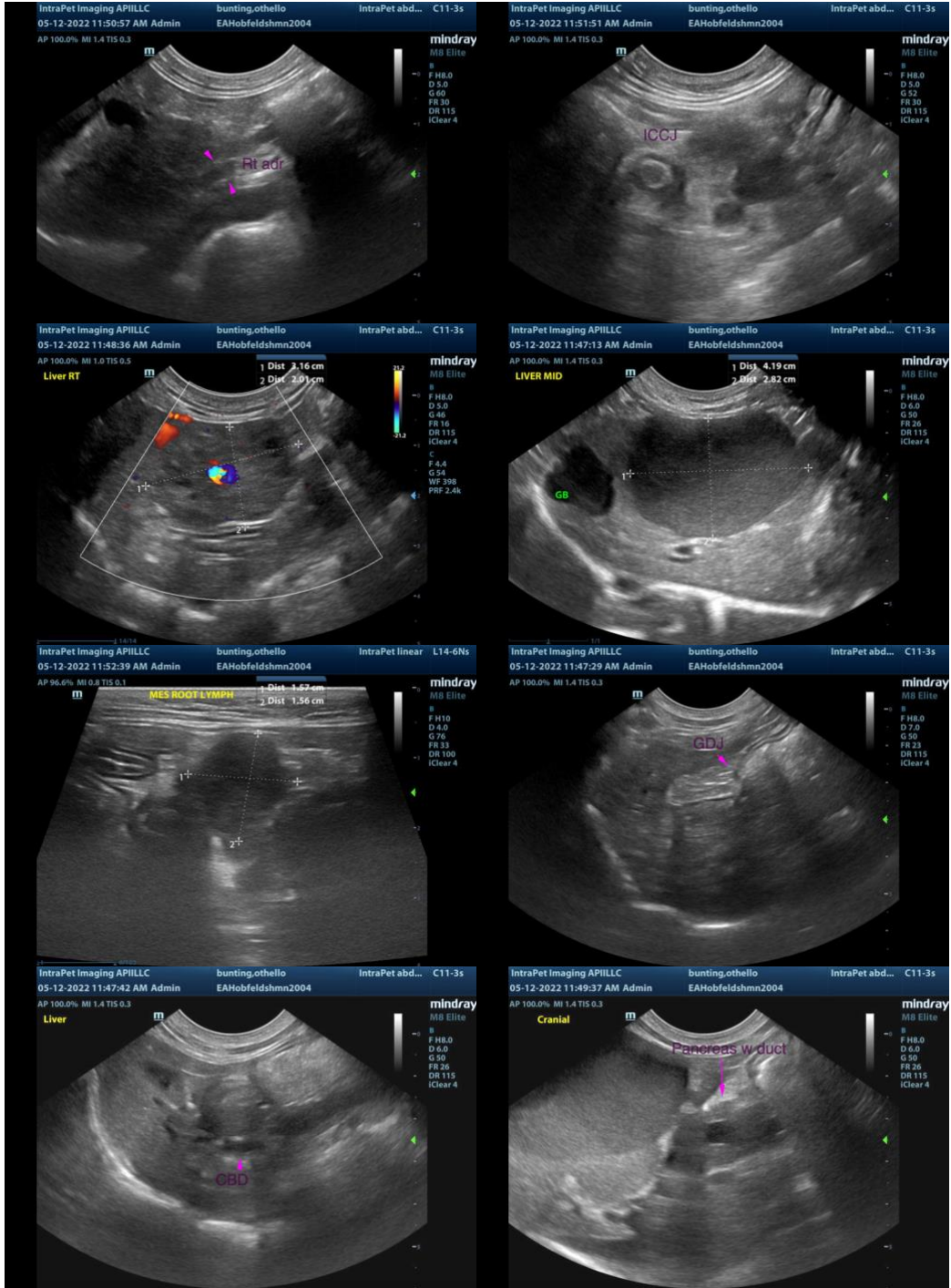
- Hepatic mass in the region of the right medial lobe. Neoplasia (i.e., round cell tumor, adenocarcinoma, other) is suspected with a lower possibility of a benign process (i.e., inflammatory focus). Large hepatic cyst, likely incidental.
- The colic lymphadenopathy is concerning for infiltrative neoplasia (i.e., lymphoma) with a lower possibility lymphadenitis or lymphoid hyperplasia.
- Trace ascites

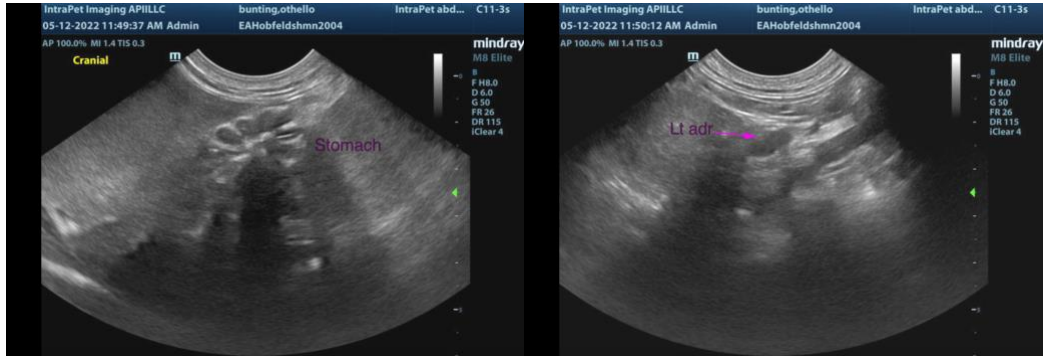
### **Secondary Findings**

- The pancreatic changes are consistent with chronic pancreatitis.
- Bilateral age-related renal changes, more pronounced on the right side.

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

- Recommendations regarding this exam to be implemented by Dr. Cara Steele.





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.

**Andrea Nicastro, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
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