



**PATIENT**

Halibut Obley

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

1 Year

**WEIGHT**

12.2 Pounds

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Dr. Michelle Bartus

**HOSPITAL NAME**

Valley Vet Service

**REFERRING VET**

Dr. Michelle Bartus

**INVOICE**

35675

**DATE**

2/15/22

**PRESENTING CLINICAL SIGNS**

Another vet office saw cat for vomiting. Took x-rays during work up, saw enlarged spleen. Cat is no longer ill.

Abnormal PE/Chem/CBC/UA Results: No abnormalities on bloodwork done by original vet office.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

Urinary bladder is moderately distended. It has a normal uniform wall thickness (<0.2 cm). Contents include primarily anechoic fluid combined with suspended echogenic non-shadowing debris within the fluid. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

The right kidney is normal in size (4.6 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

The left kidney is normal in size (4.2 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**Adrenal Glands**

The right adrenal gland is normal in size (0.36 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (0.24 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

**Spleen**

Spleen is subjectively enlarged in size with rounded margins but intact capsule. Parenchyma is homogeneously coarse/mottled in echotexture and normal to hypoechoic in echogenicity. On the tail of the spleen, there is a 2.7 cm round homogeneous, iso- to hyperechoic mass that causes a rounded appearance to the spleen. Splenic vasculature appears normal.

**Liver**

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

**Gastrointestinal**

The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions



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per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

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The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

**Pancreas**

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

**BREED**

DSH

**Free Abdomen**

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

**SEX**

Neutered Male

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

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- Urinary bladder sediment – Urine changes are most consistent with incidental suspended lipid in a cat, however, cellular debris or crystalluria cannot be ruled out and should be interpreted in combination with urinalysis results.
- Splenomegaly with a homogeneous, isoechoic bulge/mass on the tail of the spleen – Benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis, etc. can cause splenomegaly. However, given the mass-like appearance and capsular bulge, infiltrative neoplasia such as round cell neoplasia has to be considered.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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DACVIM

Recommendations include a fine needle aspirate of the spleen (which is reportedly already pending) as well as urinalysis and urine culture, if indicated based on urinalysis results, due to the urinary bladder debris in these images.

**IMAGING PERFORMED BY**

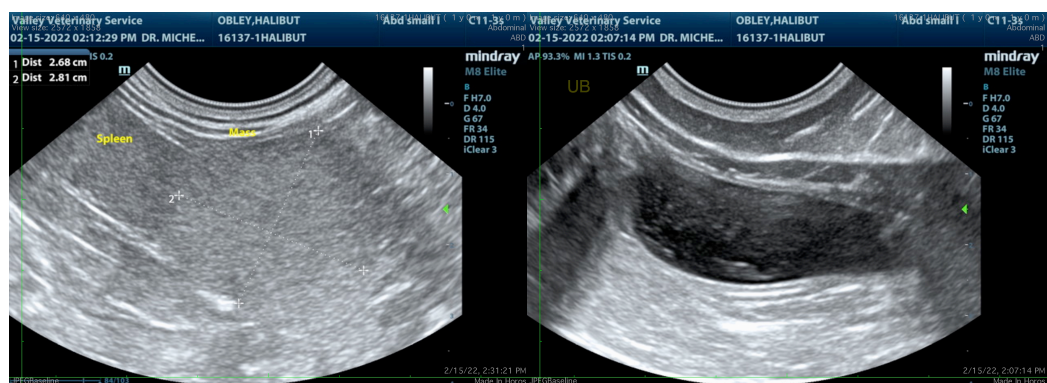
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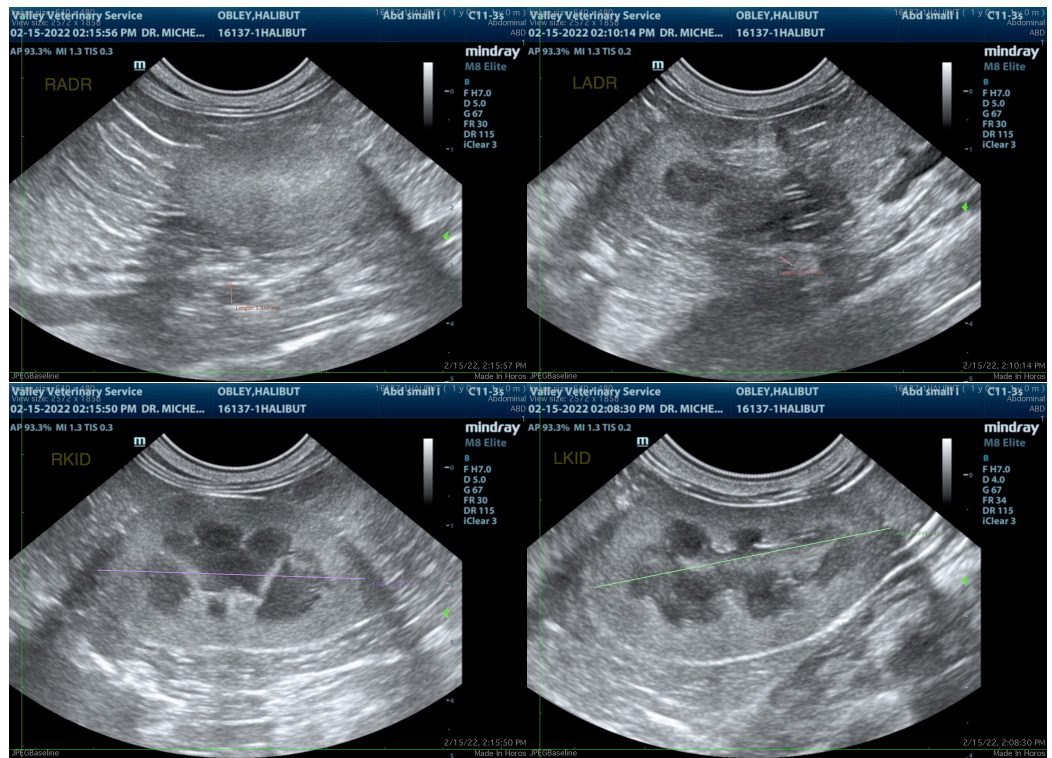
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Beth Johnson, DVM, DACVIM**  
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