



**PATIENT PRESENTING CLINICAL SIGNS**

Zelda Zachary Rule out IBD vs. lymphoma.

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Feline

**Urinary System**

The urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

**BREED**

DSH

The right kidney is normal in size (4.0 cm). 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. There is a well-defined, anechoic structure surrounded by thin echogenic wall in the cortex.

**SEX**

Spayed Female

The left kidney is normal in size (4.36 cm), with normal overall echogenicity. It has an irregular peripheral margination caused by a 1.2 cm round, iso- to hypoechoic nodule creating a bulge in the capsule, as well as a hypoechoic perinephric rim. There is a normal 1:3 cortex/medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia or mineral observed. Perinephric scant free fluid and hyperreactive mesentery is present around the left kidney.

**AGE**

13 Years

**Adrenal Glands**

**WEIGHT**

9.9 Pounds

The region of the right adrenal was evaluated with evident pathology.

The left adrenal gland is normal in size (0.75 cm long x 0.28 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**Spleen**

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

**IMAGING PERFORMED BY**

Kelly Vazquez

**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.

**HOSPITAL NAME**

New Bridge VP

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.

**REFERRING VET**

Dr. Glennon

**Gastrointestinal**

The stomach wall has been replaced by a thick (2.3 cm) hypoechoic, heterogeneous, irregular mass causing complete loss of normal layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease.

**INVOICE**

35498

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

**DATE**

2/8/22



**PATIENT**

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

**SPECIES**

**Pancreas**

Feline

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**

**Free Abdomen**

DSH

There is no evidence of peritoneal effusion. No appreciable lymphadenopathy noted in these images.

**SEX**

**ULTRASONOGRAPHIC FINDINGS**

Spayed Female

- Gastric mass – most concerning for infiltrative neoplasia such as lymphoma versus carcinoma versus other.

**AGE**

13 Years

- Hypoechoic perinephric rim in left kidney as well as a hypoechoic nodule – Top differential is lymphoma. Benign change is also possible. However, the perinephric rim combined with the perinephric inflammation is suggestive of renal or retroperitoneal pathology, and benign disease is considered less likely.

**WEIGHT**

9.9 Pounds

- Right kidney cortical lesion – most consistent with cortical cyst. However, given the other changes, early or cystic infiltrative neoplasia has to be considered.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Recommendations include a fine needle aspirate of the gastric mass as well as a fine needle aspirate of the left kidney nodule and/or the hypoechoic perinephric rim around the left kidney is patient’s coagulation status is appropriate. 3-view thoracic radiographs are recommended if not already evaluated to further assess metastatic disease.

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

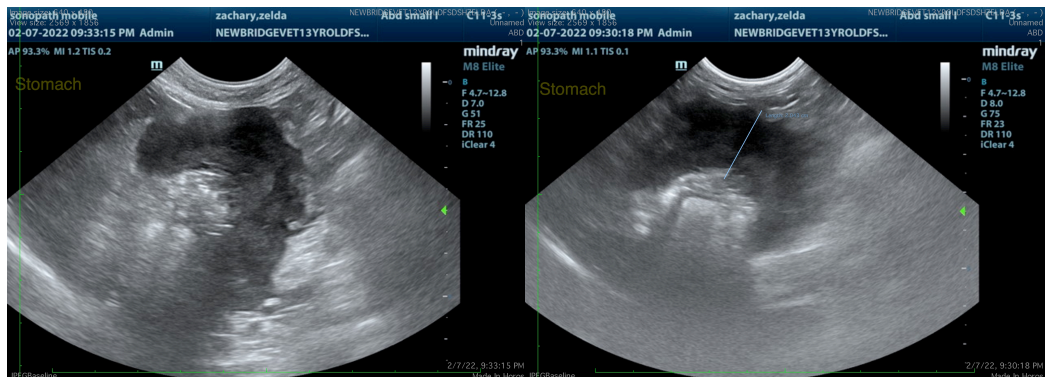
Kelly Vazquez

**HOSPITAL NAME**

New Bridge VP

**REFERRING VET**

Dr. Glennon



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**PATIENT**

Zelda Zachary

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

13 Years

**WEIGHT**

9.9 Pounds

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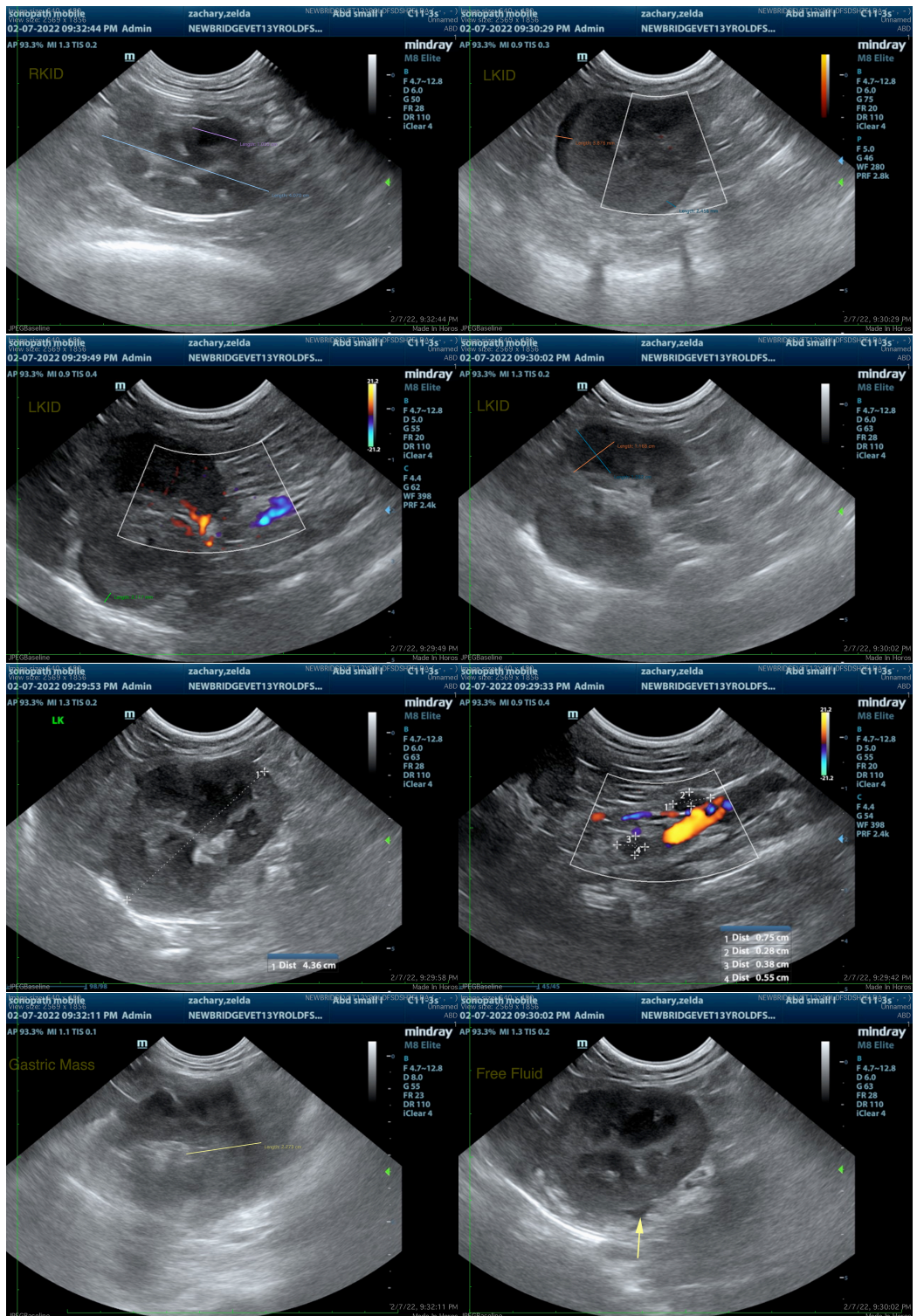
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**PATIENT**

Zelda Zachary

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.

**SPECIES**

Feline

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**  
Beth.Johnson@sonopath.com

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

13 Years

**WEIGHT**

9.9 Pounds

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