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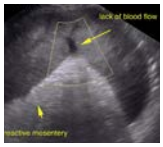
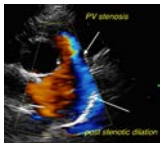
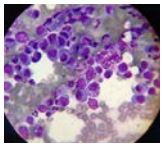
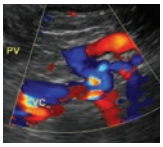

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1-800-838-4268 info@sonopath.com

PATIENT

Kenji Allen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years 11 Months

WEIGHT

8.5 Pounds

INTERPRETED BY

Beth Johnson, DVM DACVIM

IMAGING PERFORMED BY

Dr. Aaron Deml

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr. Aaron Deml

INVOICE

46438

DATE

4/5/23

PRESENTING CLINICAL SIGNS

Presented initially for strange behavior (not eating wet food, still eating dry food). P is otherwise doing well. Upon cystocentesis for a UA, ascites was noted, and a fluid cytology was ran (full results listed in lab work section of report). Fluid cytology revealed suspicion for malignant neoplasia (carcinoma/adenocarcinoma most likely). Abdominal ultrasound done to search for primary tumor. Abnormal PE/Chem/CBC/UA Results: CBC/Chem: Leukocytosis: 22.8 (3.5-20.7) Neutrophilia: 20.72 (1.63-13.37) Anemia: 31% Chem: WNL T4: 2.3 Fluid cytology: USG: 1.025 WBC: 7550 (0-3000) RBC: 620,000/ul 12-13-year-old cat.

MICROSCOPIC FINDINGS: ABDOMINAL EFFUSION: EXUDATE WITH MIXED INFLAMMATION AND ATYPICAL EPITHELIAL/MESOTHELIAL CELLS. HIGHLY SUSPICIOUS OF MALIGNANCY.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

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 (3.49 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 (0.48 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (0.41 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

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.

Liver

Liver is subjectively enlarged with mildly irregular margins. Parenchyma is mottled by multifocal discrete hypoechoic nodules of varying sizes “moth-eaten”. 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.

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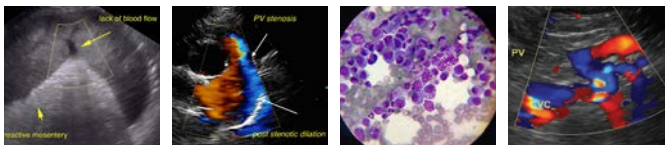

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The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

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.

Free Abdomen

A large amount of free fluid and clumped, almost nodular appearing enhanced hyperechoic mesentery is noted.

There is no apparent lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- **Nodular Liver -** This finding is concerning for infiltrative disease such as round cell neoplasia or metastatic neoplasia. Benign disease cannot be ruled out but is considered less likely, especially given the reported free fluid analysis results.
- **Free fluid and clumped nodular mesentery** – concerning for carcinomatosis, as is suspected based on fluid analysis results.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Consultation with a veterinary oncologist is recommended with fluid analysis results for treatment/therapeutic recommendations. If further diagnosis confirmation is elected, a fine needle aspirate of the liver could be considered if patient's coagulation status is appropriate.

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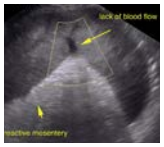
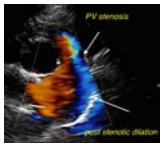
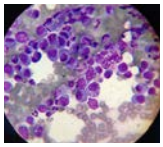
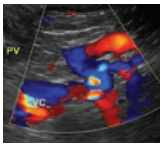

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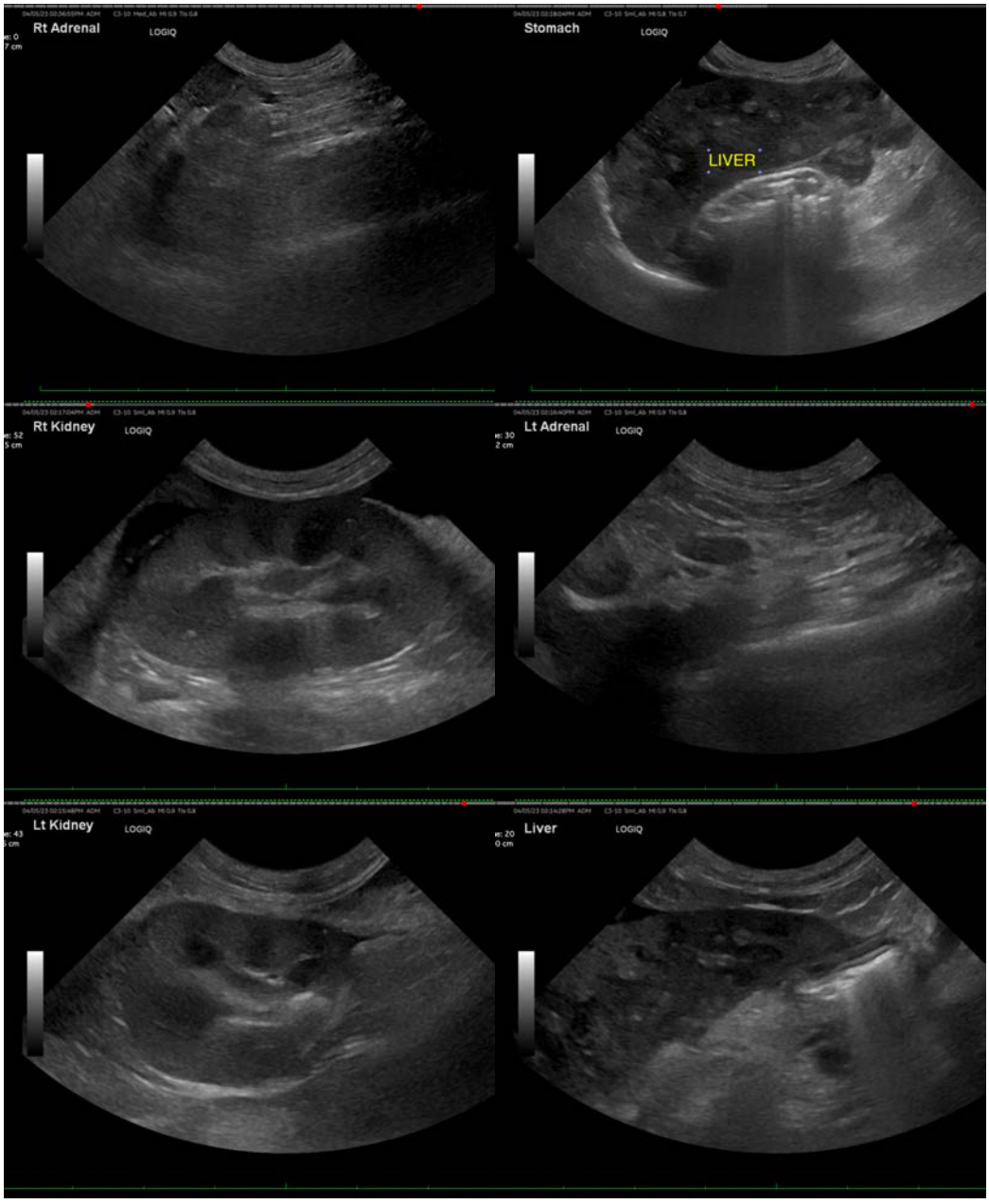

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Beth.Johnson@sonopath.com