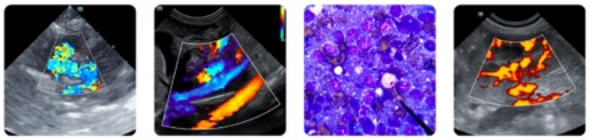


PATIENT

Apollo Smith

SPECIES

Feline

BREED

Sphynx

SEX

Neutered male

AGE

8 years

WEIGHT

4.8 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Massett

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Massett

INVOICE

69760

DATE

1/1/26

PRESENTING CLINICAL SIGNS

History: P presented as a transfer from AEHPC for hospitalization, AUS and blood cytology. He presented to AEHPC for being lethargic and wobbly/falling over when walking. Hiding recently. Decreased appetite and not eating well for the last few days; eating litter. No vomiting or diarrhea. Actual o (this o's daughter) noticed p looked yellow two days ago.
Abnormal PE/Chem/CBC/UA Results: Bloodwork: CBC - WBC 2.84, Neutropenia, Lymphocytopenia, Monocytosis, HCT 25.4, HGB 7.6, RBC 4.94, MCHC 30, PLT 41, PCT 0.05 PCV/TS - 26%/6.4; icteric serum Chem - TP 5.3, ALP 235, TBIL 5.5, Ca 8.3 EPOC - BE 5.3, Lactate 4.75, HCT 18% FIV/FeLV - NEG x 3 FPLi - Normal SEE ATTACHED RADIOLOGY REPORT & BLOODWORK

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed thickened, irregular cortices with corticomedullary striations. The kidneys had swollen contour. The left kidney measured 4.0 cm. The right kidney measured 4.4 cm.

Adrenal Glands

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 0.5 cm. The right adrenal gland measured 0.6 cm.

Spleen

The **spleen** revealed severe enlargement measuring 4.1 cm with micronodular changes.

Liver

The **liver** was hypoechoic and swollen with irregular contour and subtle, isoechoic nodular changes. Severe hepatomegaly was present with isoechoic to hypoechoic nodules and masses. This is strongly suggestive for infiltrative disease. The gallbladder was deviated ventral caudally. Hepatic lymphadenopathy was noted.

PATIENT

Apollo Smith

SPECIES

Feline

BREED

Sphynx

SEX

Neutered male

AGE

8 years

WEIGHT

4.8 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Massett

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Massett

INVOICE

69760

DATE

1/1/26

Gastrointestinal

The **gastrointestinal tract** was deviated caudally. However, the gastrointestinal tract itself revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

Free Abdomen

Slight free fluid was noted between the liver lobes owing to lymphatic congestion.

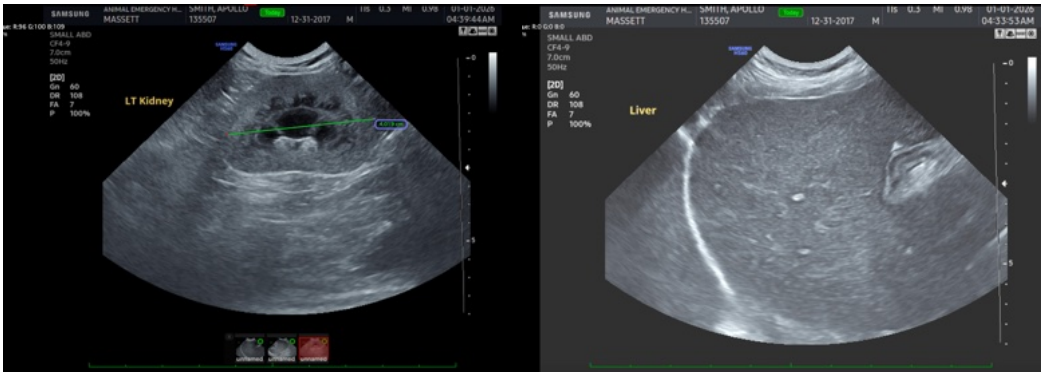
ULTRASONOGRAPHIC FINDINGS

Severe infiltrative splenohepatic pattern, strongly consistent with round cell neoplasia.

Free fluid.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver is indicated for further definition.



PATIENT

Apollo Smith

SPECIES

Feline

BREED

Sphynx

SEX

Neutered male

AGE

8 years

WEIGHT

4.8 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Massett

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

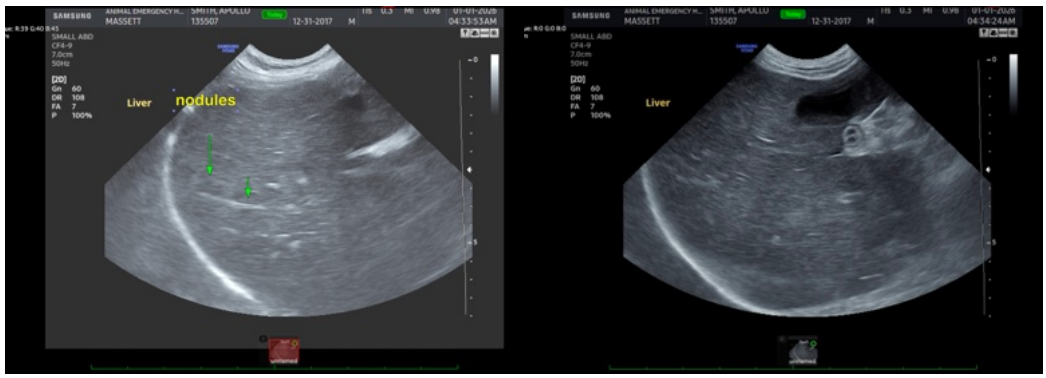
Dr. Massett

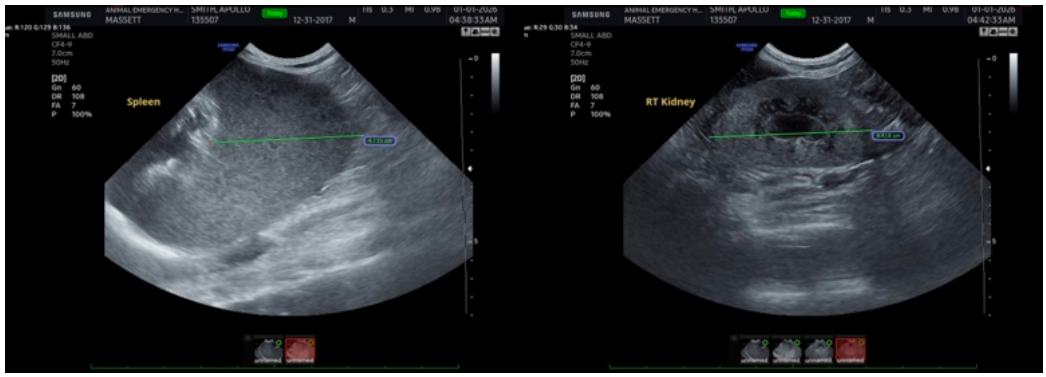
INVOICE

69760

DATE

1/1/26





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.

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com