



DATE PRESENTING CLINICAL SIGNS

1/13/26

Patient History: Presented 11/14/25 for small BMs. Hx of insulinoma. On PE, splenomegaly, mod dental calc appreciated. Rads showed splenic mass at head of spleen, spondylosis L3-4.

PATIENT

Minnie Ochrymowicz

Current Medications: Prednisone: 0.3 cc po bid (3 mg/ml), Diazoxide: 0.3 cc po bid (50 mg/ml), lactulose (0.5ml/kg) - 0.5ml PO q12h PRN for constipation, gabapentin (3mg/kg) - 0.06ml (50mg/ml) PO q12h PRN for pain.

SPECIES

Ferret

Labwork Results: Labwork submitted. Reported as *2V full body rads - soft stool in colon, empty stomach, small amount of ingesta in GIT, kidneys of uniform size and appearance, liver tucked under ribcage, splenomegaly w/ small soft tissue opacity mass/irregularity at tail of spleen, urine-distended bladder, spondylosis L3-4, normal lung patterning, no cardiomegaly *CBC/comp/lytes - RBC 11.63, hct 48.5%, lymph 0.38, mono 0.16, eos 0.03, tp 8.6, glob 5.3, BG 102

BREED

Ferret

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

SEX

Spayed Female

Imaging Performed by: Andi Parkinson, BS, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

4/4/20

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 were noted. Ureteral papillae were normal.

WEIGHT

0.997 kg

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. Anechoic cysts noted in both kidneys. Right measured 3.0 cm. Left measured 3.0 cm.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

Adrenal Glands

The **left adrenal gland** was visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. Left measured 0.50 cm.

HOSPITAL NAME

Chadwell Animal
Hospital

The **right adrenal gland** was mineralized yet normal in size at 0.39 cm.

REFERRING VET

Dr. Mengers

Spleen

The **spleen** was folded upon itself and was slightly heterogeneous with minor scalloping contour.

INVOICE

72181

Liver

The **liver** revealed a left-sided cavitated cystadenomatous or biliary carcinoma type mass measuring 4.0 cm, occupying the majority of the left liver. There is a mild inflammatory pattern around the left liver mass. The right liver was unremarkable. The gallbladder and common bile duct were unremarkable. Slight increased portal markings noted.

Gastrointestinal

Examination of the **gastrointestinal tract** 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

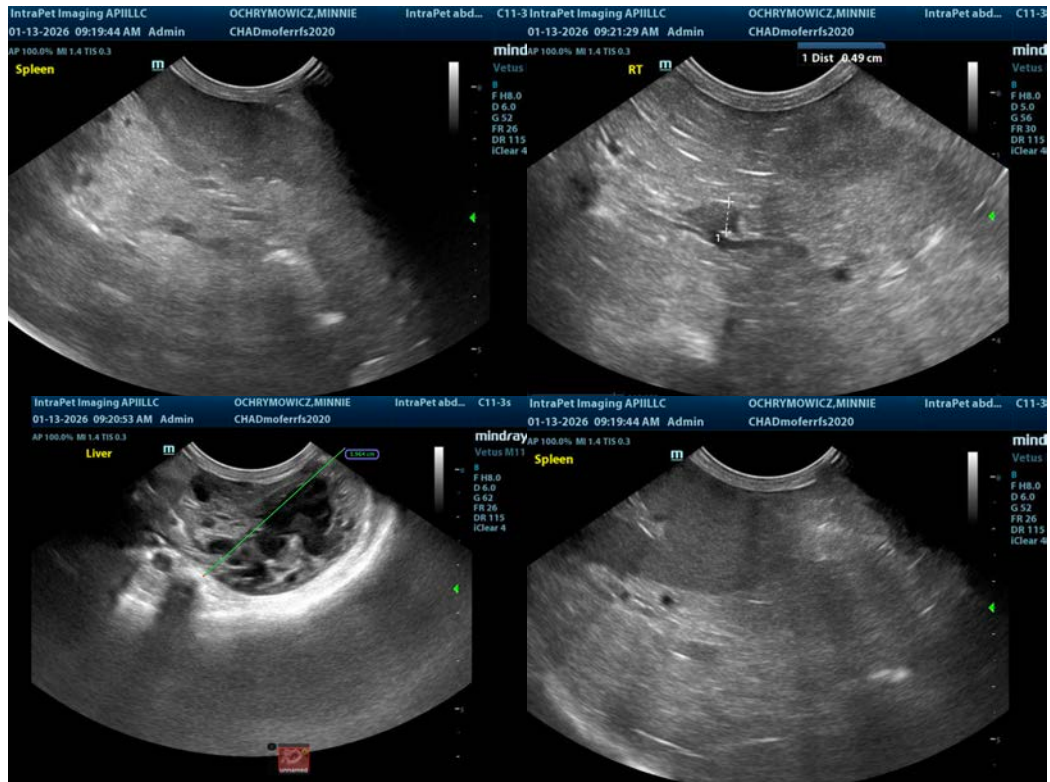
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

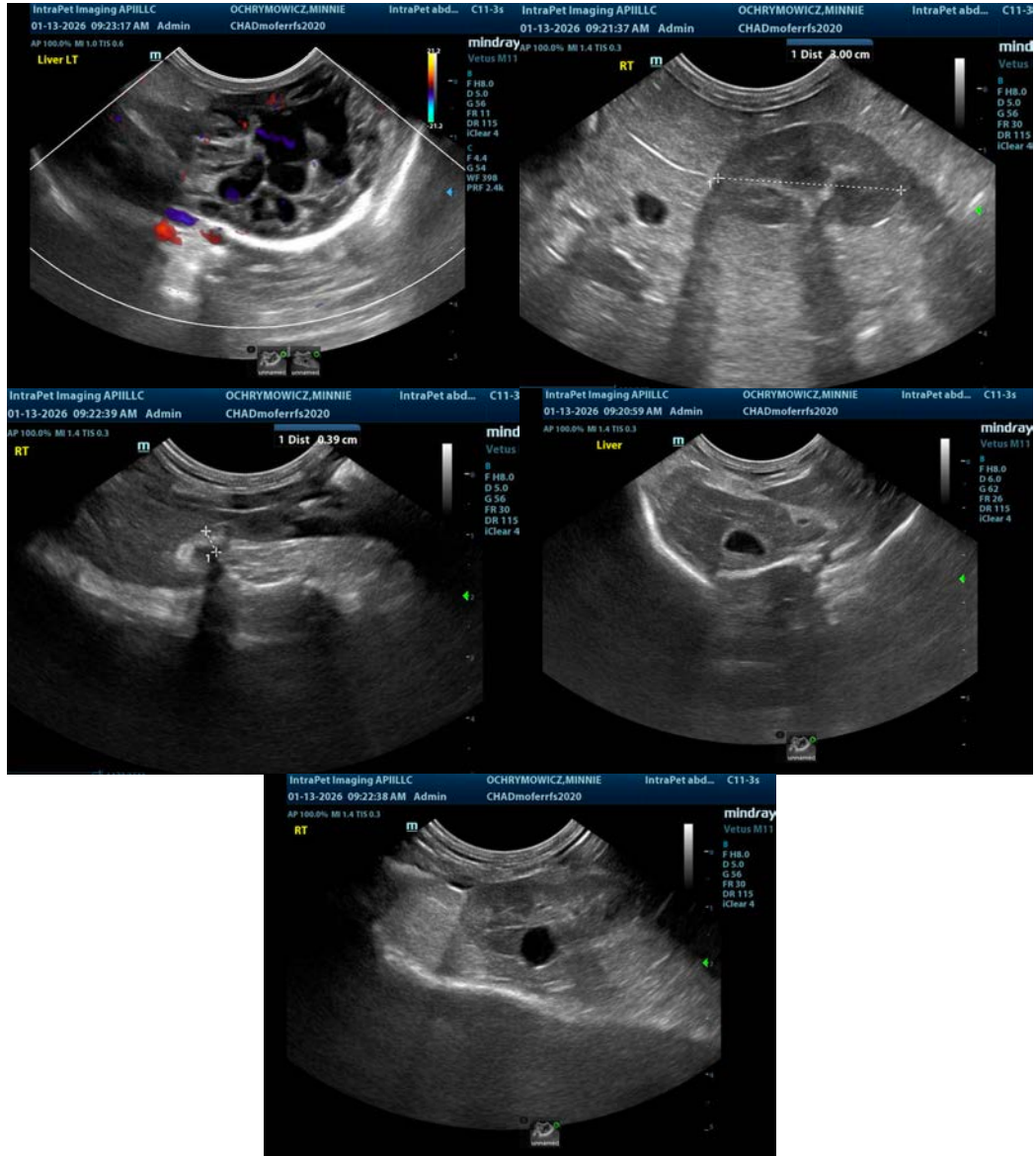
ULTRASONOGRAPHIC FINDINGS

- Cystic left-sided liver mass – cystadenoma versus biliary carcinoma. Potentially resectable.
- Polycystic kidneys.
- Mineralized right adrenal gland – likely small carcinoma.
- Hypersplenism (typical for this species).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen would be appropriate. Potential left liver lobectomy would be appropriate.





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.

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