



**PATIENT**

Dusty Durante

**SPECIES**

Feline

**BREED**

Persian

**SEX**

Spayed Female

**AGE**

15 Years

**WEIGHT**

Not Provided

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Andover AH

**REFERRING VET**

Dr. Bihlear

**INVOICE**

44250

**DATE**

1/16/23

**PRESENTING CLINICAL SIGNS**

Hx V+ 24h duration; on exam distended abdomen-Lg amt. FF. noted on cursory in house aus. and arrhythmia auscultated (no murmur). Hyperthyroid 5/2022- Not on medication. No current meds. Abnormal PE/Chem/CBC/UA Results: Fluid cyto/analysis pending. wbc 26.94; mchc 36, plt 641; mono 1.32; neut 24.18; alt 228; glu 168

**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 were noted. Ureteral papillae were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Cortical infarcts noted in the left kidney. The left kidney measured 3.0 cm. The right kidney measured 3.58 cm.

**Adrenal Glands**

The **adrenal glands** were uniform, yet bilaterally swollen and hypoechoic. This is most consistent with stress-induced hyperplasia. The left adrenal gland measured 0.59 cm.

**Spleen**

The **spleen** was enlarged and irregular with micronodular changes. The spleen measured 1.18 cm in width.

**Liver**

The **liver** presented multifocal nodular changes and irregular contour. No evidence of passive congestion.

**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 pancreas was mildly heterogeneous and irregular, primarily in the left limb.

**Free Abdomen**

A large amount of echogenic free fluid noted throughout the abdomen. Nodular omental changes noted. Coalescing mesenteric nodules also noted.



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**ULTRASONOGRAPHIC FINDINGS**

- Abdominal carcinomatosis/lymphomatosis type presentation
- Geriatric renal changes
- Stressed adrenal gland

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Abdominocentesis and cytospin of the free fluid with immediate slide preparation recommended to confirm underlying neoplasia. Prognosis is poor.





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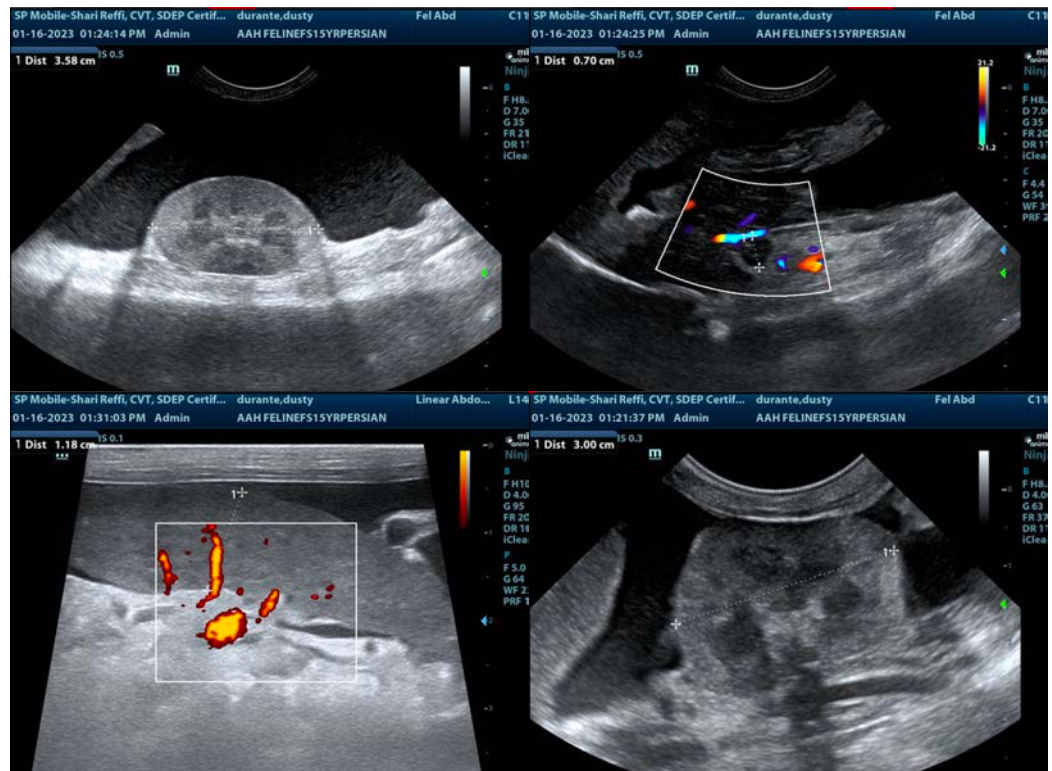
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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