

IMAGING PERFORMED BY

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SonoPath

Clinical Sonography & Telectology

EDUCATIONAL TELECONSULTATION SERVICES™

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DATE PRESENTING CLINICAL SIGNS

1/2/22 Losing Weight. Lethargic. Not Eating. Drinking Less.

PATIENT

Wolfie Cavert

History: Date: 01-01-2022 Notes: Wolfie is a 12 y/o MN DSH who presents for weight loss, lethargy, decreased eating and drinking - 3 mo ago started on diet - in the last month starting losing more weight than reasonable for his diet - rapid weight loss within the last week - in the last week more lethargic, not running to the food bowl like usual - not interested in eating or drinking, O does think is eating some - within the last 2-3 days started hacking like trying to bring up a hairball, producing white/yellow foam - No V/D/C/S - indoor only - UTD on rabies Medications: - none, no preventatives

SPECIES

Feline

BREED

Medications while hospitalized attached.

DSH

Labs: attached.

SEX

Neutered Male

Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

AGE

2009

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

WEIGHT

11.6 Pounds

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The **right kidney** presented an expansive hypoechoic nodule, strongly suggestive for metastatic disease. Trace pyelectasia noted in the right kidney. The right kidney measured 4.57 cm.

IMAGING PERFORMED BY

Rachel Brillhart RDMS

Th caudal pole of the **left kidney** revealed a 1.0 cm hypoechoic mass with capsular expansion. The left kidney measured 4.18 cm.

HOSPITAL NAME

Animal Emergency
Hospital

Adrenal Glands

Both **adrenal glands** were 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.

REFERRING VET

Spleen

The **spleen** revealed a 1.61 cm hypoechoic mass with multifocal coalescing hypoechoic nodular changes.

INVOICE

33930

Liver

The **liver** revealed multifocal nodules and masses up to 1.98 cm, strongly suggestive for round cell neoplasia. The liver was diffusely hyperechoic in addition to the masses. Some level of lipidosis likely. However, the masses are the primary concern. The gallbladder and common bile duct were unremarkable.

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

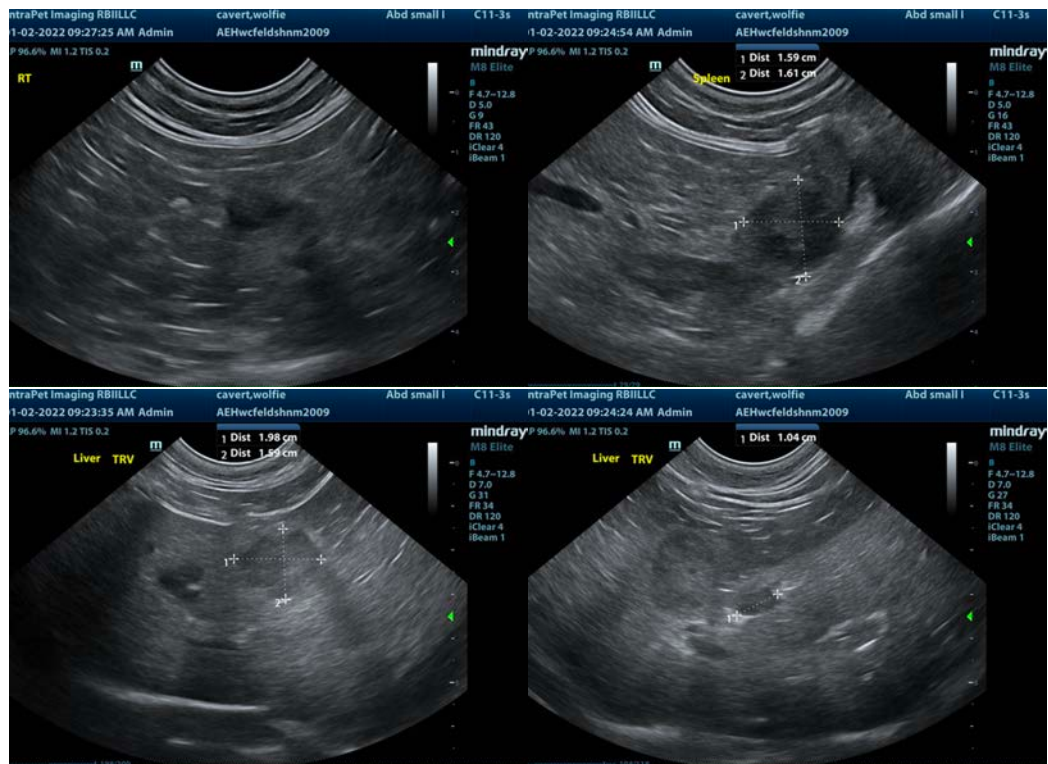
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

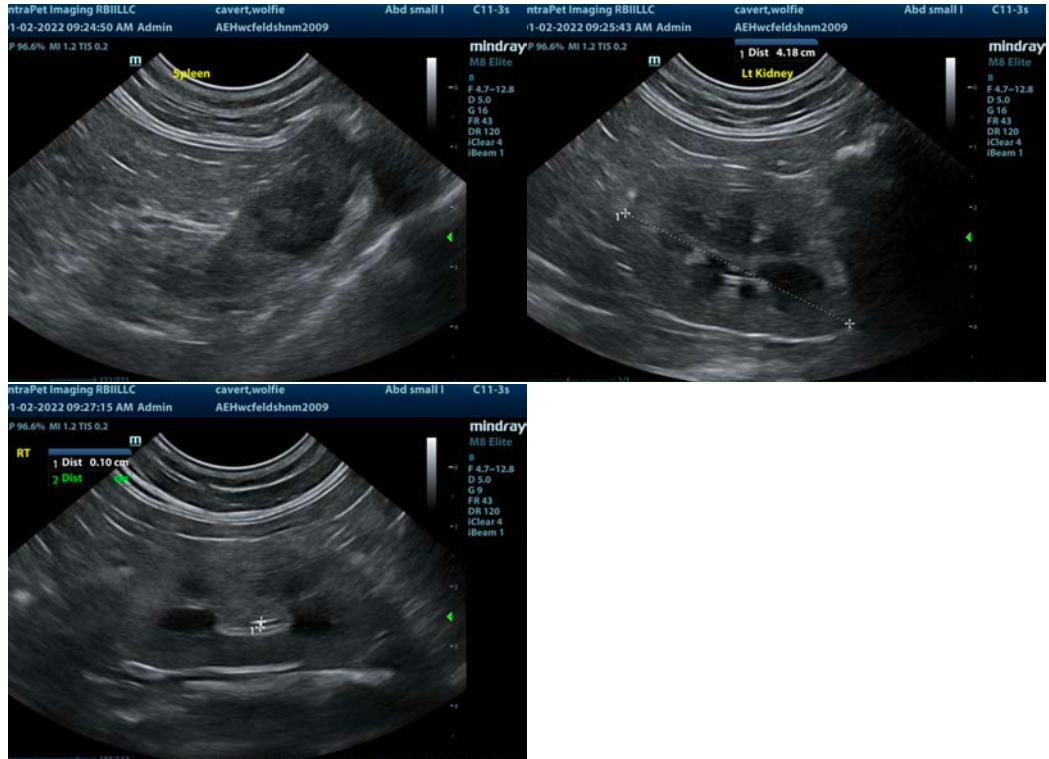
ULTRASONOGRAPHIC FINDINGS

- Multicentric Splenohepatic and renal masses and nodules – round cell neoplasia or hemangiosarcoma suspected.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the renal, splenic and hepatic lesions recommended, as these may be responsive to chemotherapy.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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