



## PATIENT

Francesca Brower

## SPECIES

Feline

## BREED

DSH

## SEX

Spayed Female

## AGE

8 Years 8 Months

## WEIGHT

7.8 Pounds

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

## IMAGING PERFORMED BY

Dr. Melissa Rosen

## HOSPITAL NAME

South Bellmore VG

## REFERRING VET

Dr. Melissa Rosen

## INVOICE

35253

## DATE

1/5/26

## PRESENTING CLINICAL SIGNS

History: Weight loss noticed at home was 10.6lbs in August for wellness exam today 7.8lbs no appreciable vomiting or diarrhea no diet change at home acting normal.

Abnormal PE/Chem/CBC/UA Results: Palpable mass effect(s) in abdomen r/o lymph nodes vs thickened bowel vs other chem 17/cbc/T4- pending no previous labwork to attach.

## 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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 this age patient. Medullary structure differed distinctly from that of the cortex, and no evidence of pelvic dilation was present. The left kidney measured 3.7 cm. The right kidney measured 3.7 cm.

### *Adrenal Glands*

The regions of the **adrenal glands** revealed no evident pathology.

### *Spleen*

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

### *Liver*

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.

### *Gastrointestinal*

Minor chyme was noted in the **stomach** The pylorus was patent. The gastric wall was unremarkable. Some portions of intestine appeared to be thickened with loss of detail in the distal small intestine. The colon was unremarkable.

### *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.



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## Free Abdomen

The mesenteric **lymph nodes** were enlarged, a grouping of which measured 3.3 cm x 1.04 cm. Ultrasound guided FNA, cytology, and culture are indicated.

An undifferentiated mixed hypoechoic **mass** was noted, measuring 4.4 cm x 2.4 cm, with areas of mineralization. The mass appears to be of lymph node origin; however, intestinal origin could not be completely ruled out.

Hepatic lymph nodes were also enlarged, even though the liver appears normal. An example of hepatic lymph node measured 1.6 cm x 1.0 cm.

## ULTRASONOGRAPHIC FINDINGS

- Undifferentiated mid abdominal mass with regional lymphadenopathy- Multifocal lymphoma or carcinoma with metastatic disease is likely. Granulomatous disease is less likely.
- Some portions of distal intestine appeared to be thickened with loss of detail.
- Minor chyme in the stomach
- Age-related renal changes

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the primary mass and accessible lymph nodes is indicated. Chest radiographs are warranted to assess for metastatic disease. Multicentric round cell neoplasia is suspected. Granulomatous disease is less likely. This is not a surgical presentation.





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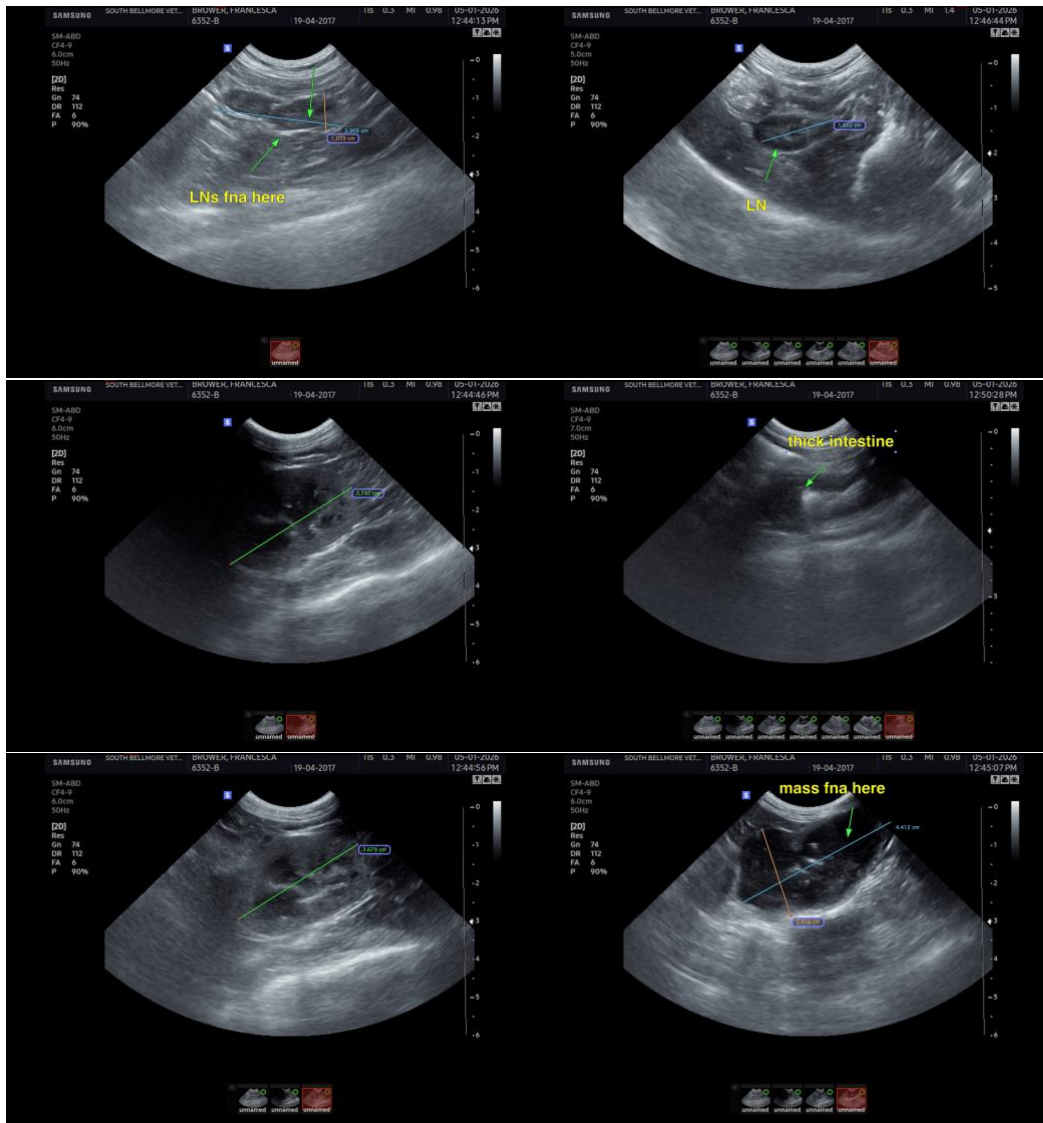
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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(CFM), Cert. IVUSS,  
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