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DATE

1/6/23

PATIENT

Tim Diamond

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

8/12/08

WEIGHT

12.75 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Rock Spring Vet Clinic

REFERRING VET

Dr. Gibson

INVOICE

44055

PRESENTING CLINICAL SIGNS

Tim was seen for an annual exam. Weight loss was noted on his annual exam. Bloodwork was done at that time. His calcium was elevated. A malignancy blood panel was submitted MSU lab to determine if calcium elevation was a true elevation. " The malignancy panel confirmed calcium elevation. With notes from with normal MSU: The low concentration of parathyroid hormone does not provide support for primary hyperparathyroidism as the cause of hypercalcemia. The normal, or negative, parathyroid hormone-related protein (PTHrP) result decreases the likelihood for a diagnosis of hypercalcemia of malignancy. However, malignancy remains a possibility as the hypercalcemic effects of some tumors are mediated by means other than production of PTHrP. The results of this profile could also occur with the condition in cats currently called "idiopathic hypercalcemia".

Current Medications: None.

Lab Results: Glucose 261, Calcium 12.9, Spec FPL, Fructosamine 352. At home glucose curve normal.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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. The left kidney measured 4.0 cm with slight pyelectasia at 0.16 cm. The right kidney measured 3.83 cm with slight pyelectasia at 0.35 cm.

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. The right adrenal gland measured 0.46 cm.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed. A focal nodule was noted at the cranial pole measuring 5.0 mm. Minor heterogeneous changes noted in the spleen otherwise.

Liver

The **liver** presented coarse architecture and minor heterogeneous parenchymal changes. Size and vascularity were normal. The gallbladder, cystic duct, and common bile duct were unremarkable. Minor cystic duct tortuosity, which is largely an age related change.

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

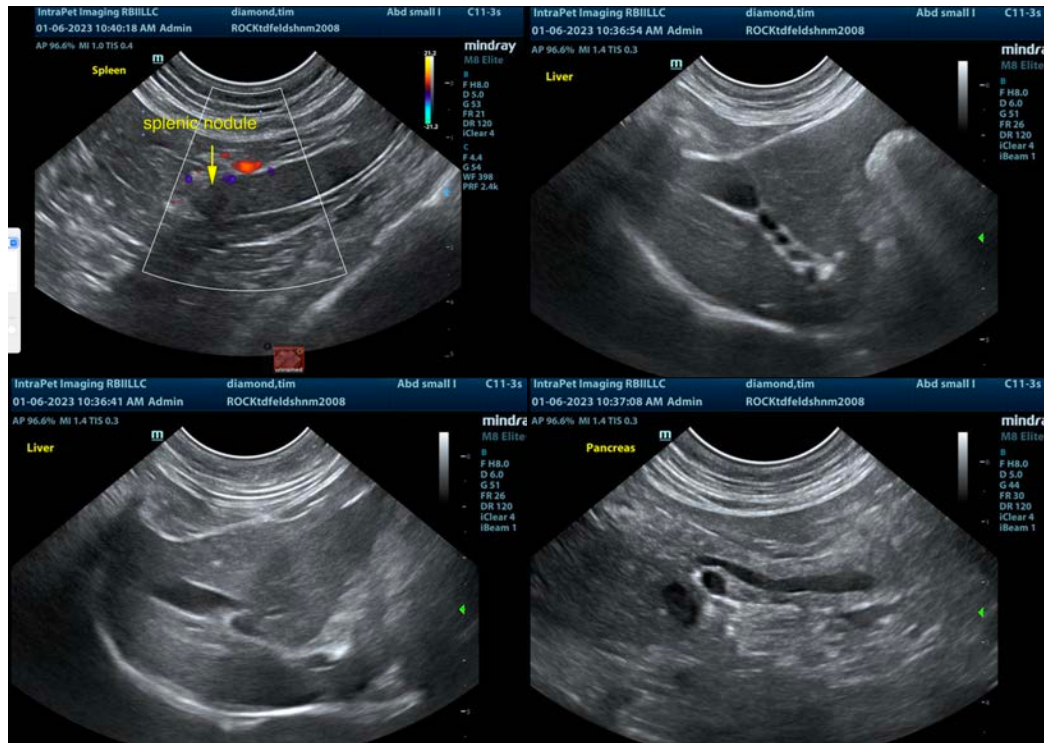
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. Duct dilation noted at 0.24 cm. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected. The right limb was mildly enlarged at 1.01 cm.

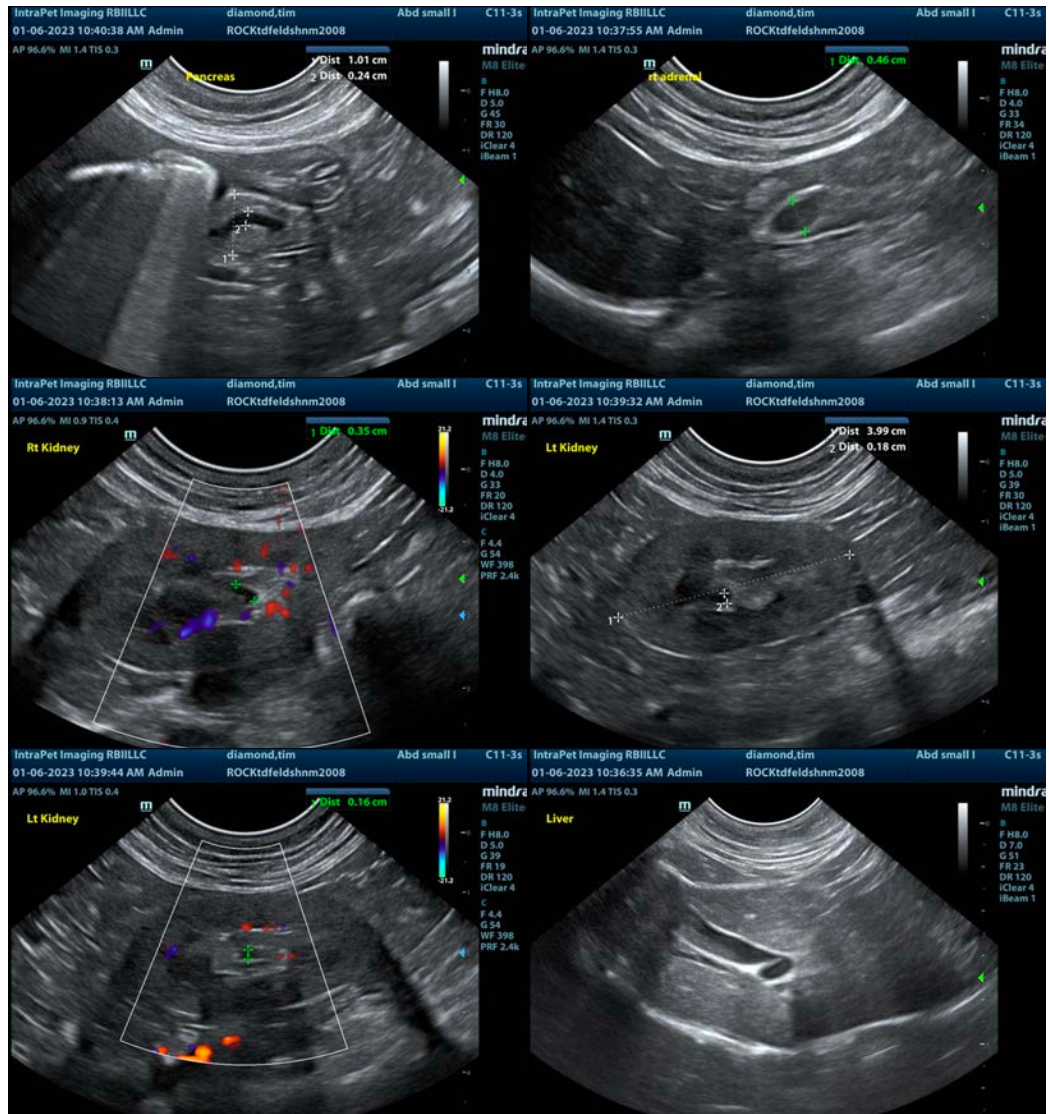
ULTRASONOGRAPHIC FINDINGS

- Minor hepatic remodeling
- Minor pancreatic remodeling
- Subtle mild heterogeneous splenic changes
- Age related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient history, screening FNA of the splenic nodule and liver warranted to assess for occult neoplasia, yet the remainder of these changes are consistent with expected changes for this age and species.





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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