



PATIENT

Lil Bear DeBlock

PRESENTING CLINICAL SIGNS

History: Lethargic, poor appetite.
Abnormal PE/Chem/CBC/UA Results: Mass palpated on exam in mid abdomen.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Domestic Shorthair

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. 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.

SEX

Spayed Female

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.85 cm and the right kidney measured 4.28 cm.

AGE

10 years

WEIGHT

8.9 lbs

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

IMAGING PERFORMED BY

JK

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 was noted.

HOSPITAL NAME

Hamburg VC

Liver

REFERRING VET

Dr. DenHeyer

The **liver** was mildly swollen in this patient and uniform. This may be involved in an infiltrative process. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

INVOICE

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Gastrointestinal

DATE

10/4/21

The midabdomen revealed a non-differentiated 2.2 x 2.0 cm intestinal mass with regional inflammation and localized free fluid. Hyperechoic, ill-defined fat was noted around the mass. Variable intestinal thickening was noted elsewhere.



PATIENT

Pancreas

Lil Bear DeBlock

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.

SPECIES

Feline

Free Abdomen

BREED

Domestic Shorthair

Free fluid was noted throughout areas of the abdomen with heterogenous omental and pancreatic changes.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

Intestinal mass and possible hepatic involvement.

Regional inflammation, emerging lymphomatosis type presentation.

AGE

10 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the intestinal mass and liver is recommended along with immediate chemotherapeutic intervention.

WEIGHT

8.9 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

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HOSPITAL NAME

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REFERRING VET

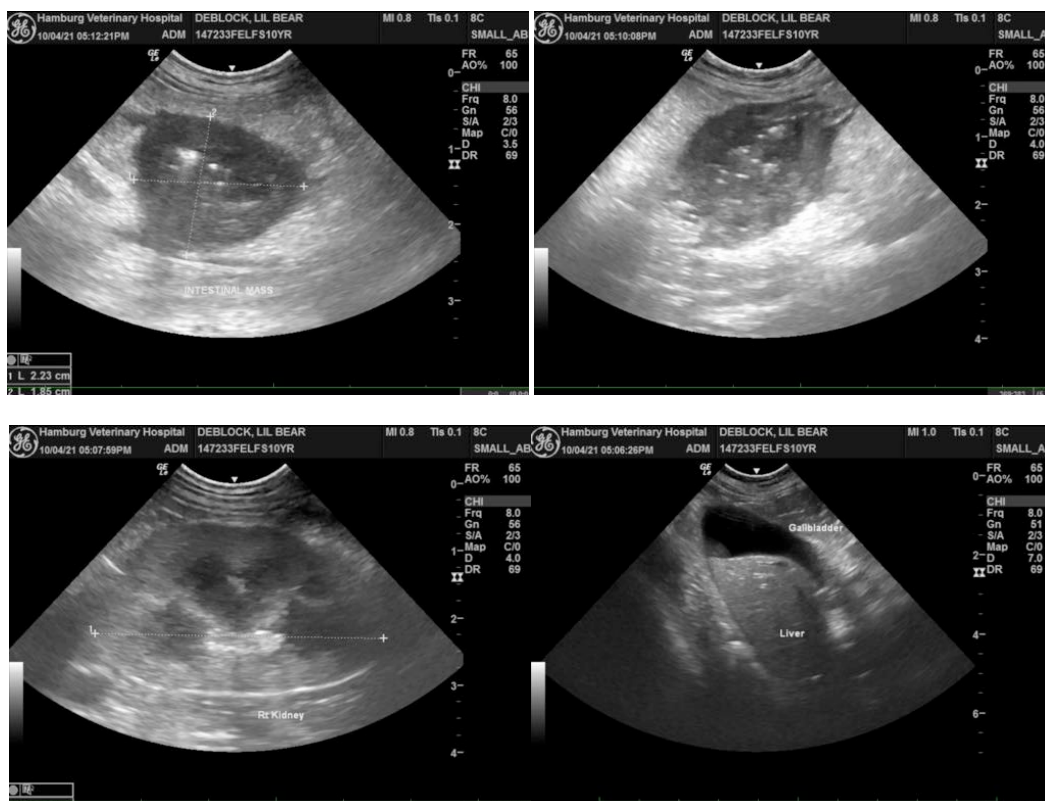
Dr. DenHeyer

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SPECIES

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BREED

Domestic Shorthair

SEX

Spayed Female

AGE

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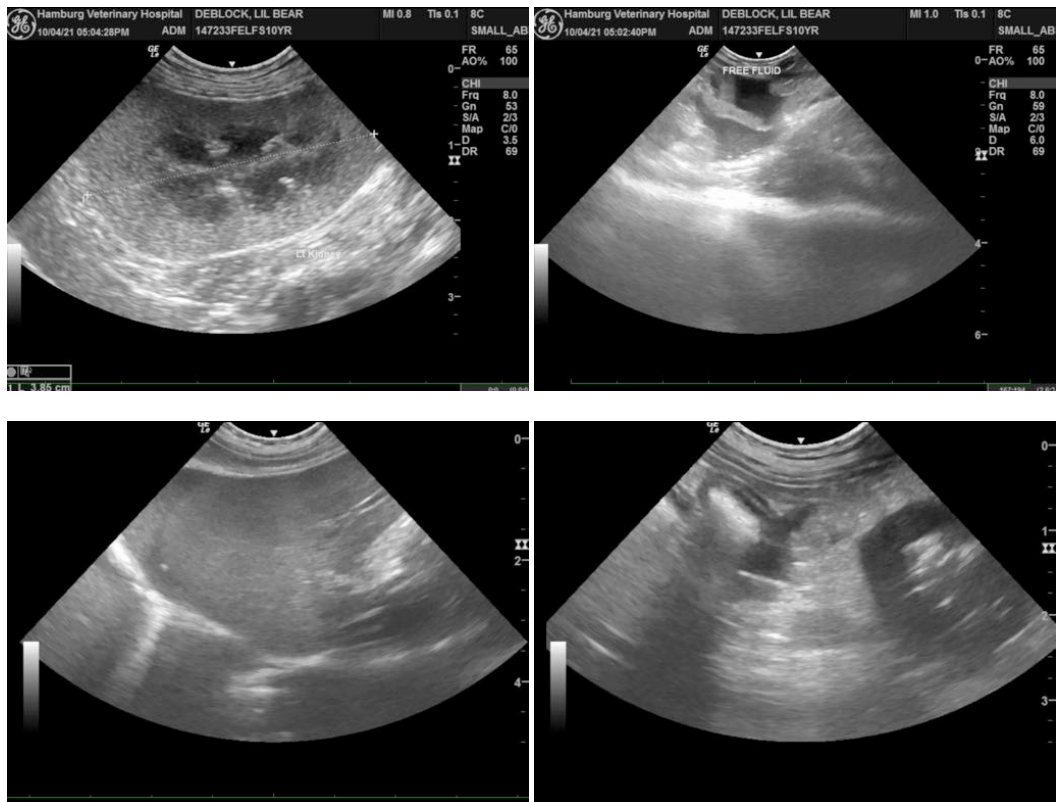
Dr. DenHeyer

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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.

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