



DATE PRESENTING CLINICAL SIGNS

11/29/22

Around 1 week ago: stopped eating as much, by around half - no other clinical signs Appetite worsened throughout the week This Saturday: took to rdvm due to eating much less - did try appetite stimulant lat night but no effect Today: more lethargic but was still a bit playful, did not really eat at all today - intermittent hiding Presented to rdvm 11/26: - Bw: Wbc 2.8, Neu 0.476, Mono 0.028, Plt 56 (platelet clumping), Glob 2.9, Alt 2327, Ast 448, Alp 137, Total Bili 0.6, Unconjugated Bili 0.3, Conjugated Bili 0.3, Chol 350 - T4: 3 (0.8-4.7) - Felv (+) - was first dx Sept 2020

PATIENT

Nala Peacock

Current Medications: Gabapentin, Buprenorphine, Vitamin B.

SPECIES

Feline

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

BREED

Domestic Shorthair

Imaging Performed By: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Spayed female

Urinary System

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 and appeared normal. 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.

AGE

12/11/18

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.64 cm. The right kidney measured 3.93 cm with minor pyelectasia in the right kidney measuring 0.36 cm.

WEIGHT

8.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

Both **adrenal glands** were mineralized. This is idiopathic. The left adrenal gland measured 0.54 cm. The right adrenal gland measured 0.69 cm.

HOSPITAL NAME

Animal Emergency
Hospital

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner. The spleen measured up to 1.2 cm.

REFERRING VET

Dr. Nacke Horney

Liver

The **liver** revealed increased portal markings. The liver was subnormal in size with irregular contour. The portal vein The gallbladder and common bile duct were unremarkable. The right cranial abdomen revealed a round, hypoechoic, 1.46 cm lymph node. This is consistent with hepatic lymphadenopathy.

INVOICE

42771

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 distinctly hypoechoic and relatively normal in size, yet undulating contour was noted. Minor duct dilation was noted and measured 0.14 cm.

Free Abdomen

A slight amount of free fluid was noted adjacent to the spleen.

ULTRASONOGRAPHIC FINDINGS

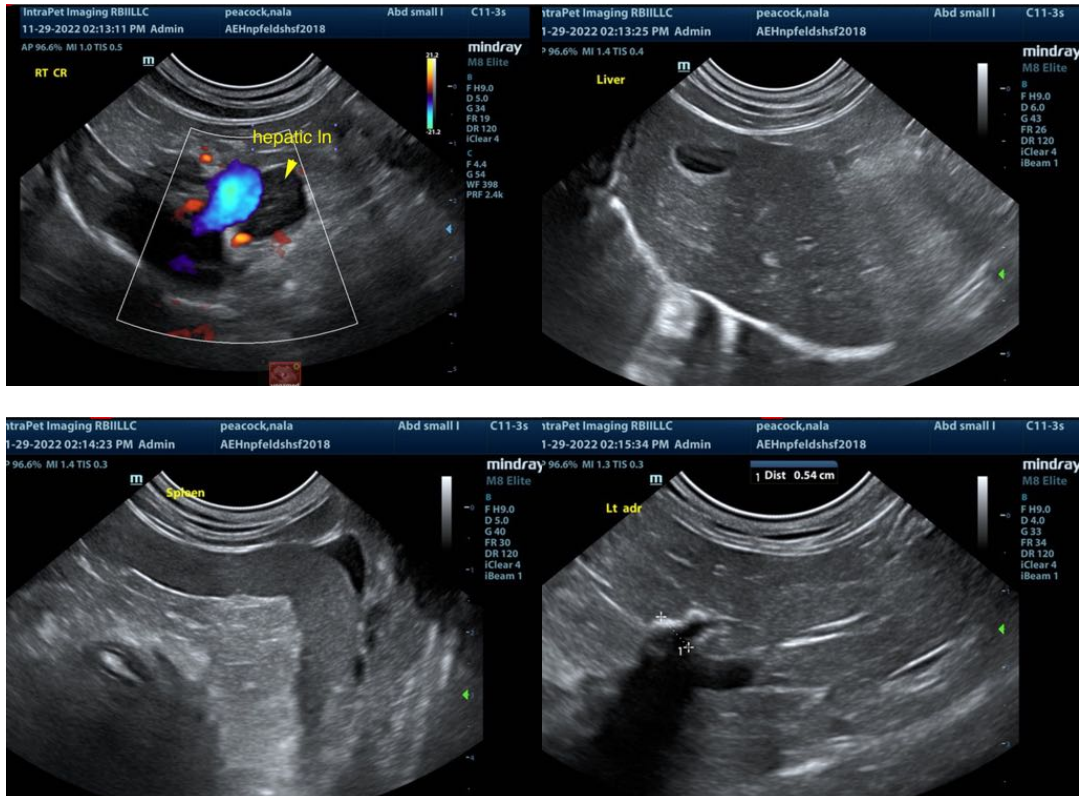
Hepatic lymphadenopathy strong concern for splenohepatic infiltrative disease.

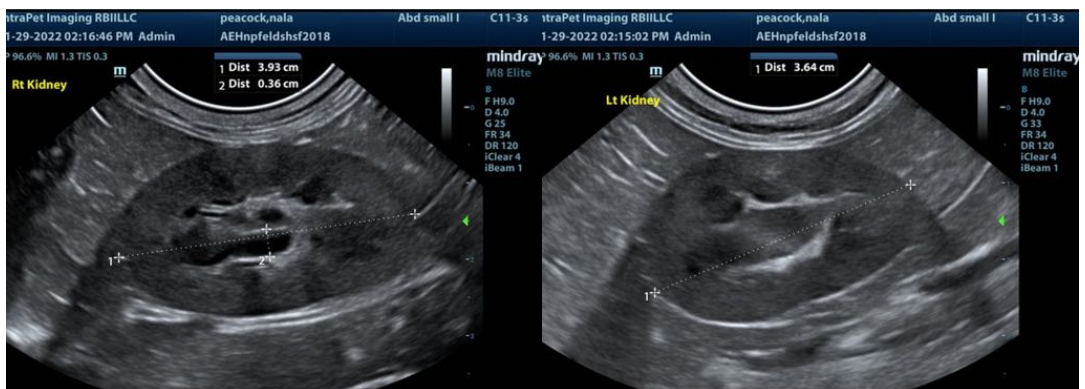
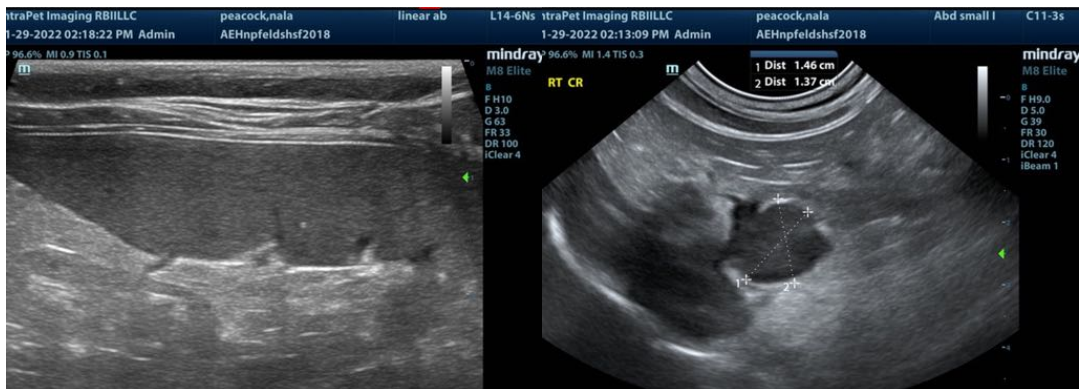
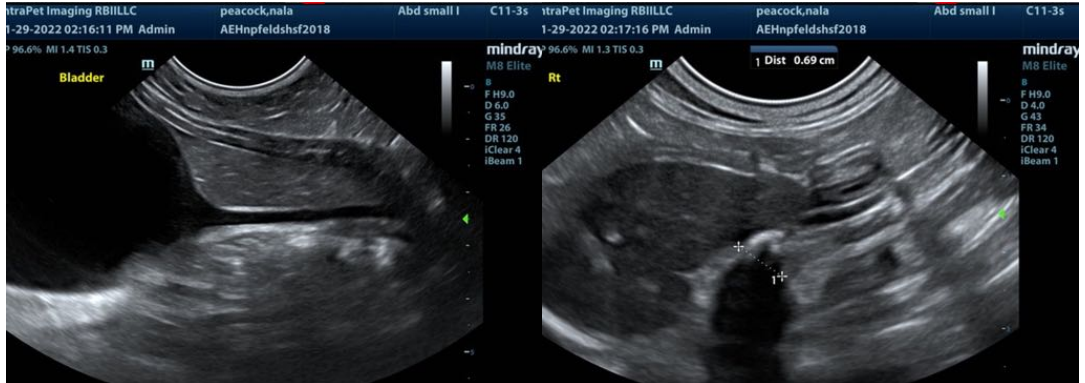
Minor renal pyelectasia and distal pelvic urethral dilation. I cannot rule out distal urethral obstruction.

Splenitis with inflammatory hepatopathy owing to infectious or toxin exposure.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver are recommended. Round cell neoplasia is possible, especially given the slight pleural effusion. Chest radiographs are indicated if not already performed to assess for level of pleural effusion.





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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