

**DATE**

11/5/21

PRESENTING CLINICAL SIGNS

History: Patient has severe dental disease, bloodwork showed hypercalcemia and lymphocytosis, controlled thyroid disease (on Y/D), concern for neoplasia.

PATIENT

Lab Results: bloodwork showed hypercalcemia and lymphocytosis, controlled thyroid disease (on Y/D).

Mia Nachodsky

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required for a diagnostic ultrasound.

Stat Report: Not requested.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

DSH

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.

SEX

Spayed Female

The **right kidney** was subnormal in size, measuring 0.76 cm. Pelvic mineralization, interstitial nephrosis and cortical infarcts were noted.

AGE

2006

The **left kidney** revealed mild to moderate degenerative changes, measuring 3.0 cm in length with corticomedullary mineralization.

WEIGHT

6.88 Pounds

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 left adrenal gland measured 0.4 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** was enlarged with scalloping contour. The spleen measured up to 1.4 cm.

IMAGING PERFORMED BY

Stephanie Pearce
RDCS, RVT

Liver

The left liver revealed an anechoic cyst, measuring 1.79 cm x 1.42 cm. Increased portal markings were noted. Separate cystic changes were noted in the right cranial liver as well. 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.

HOSPITAL NAME

Festival

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some moderate parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. 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.

REFERRING VET

Dr. Beron

INVOICE

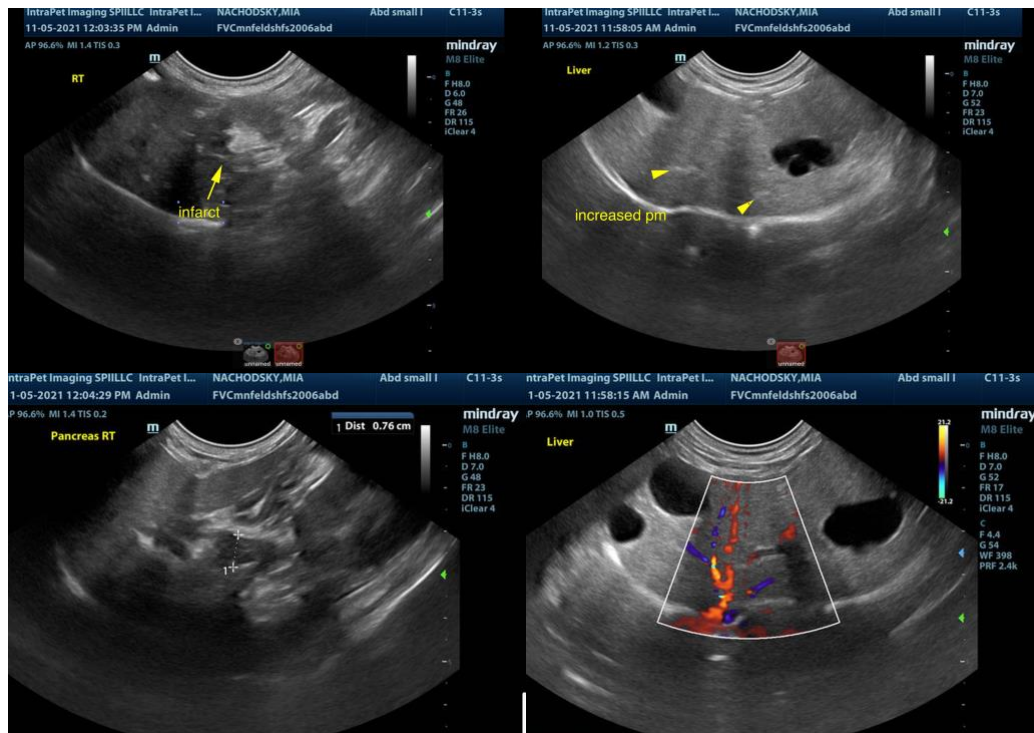
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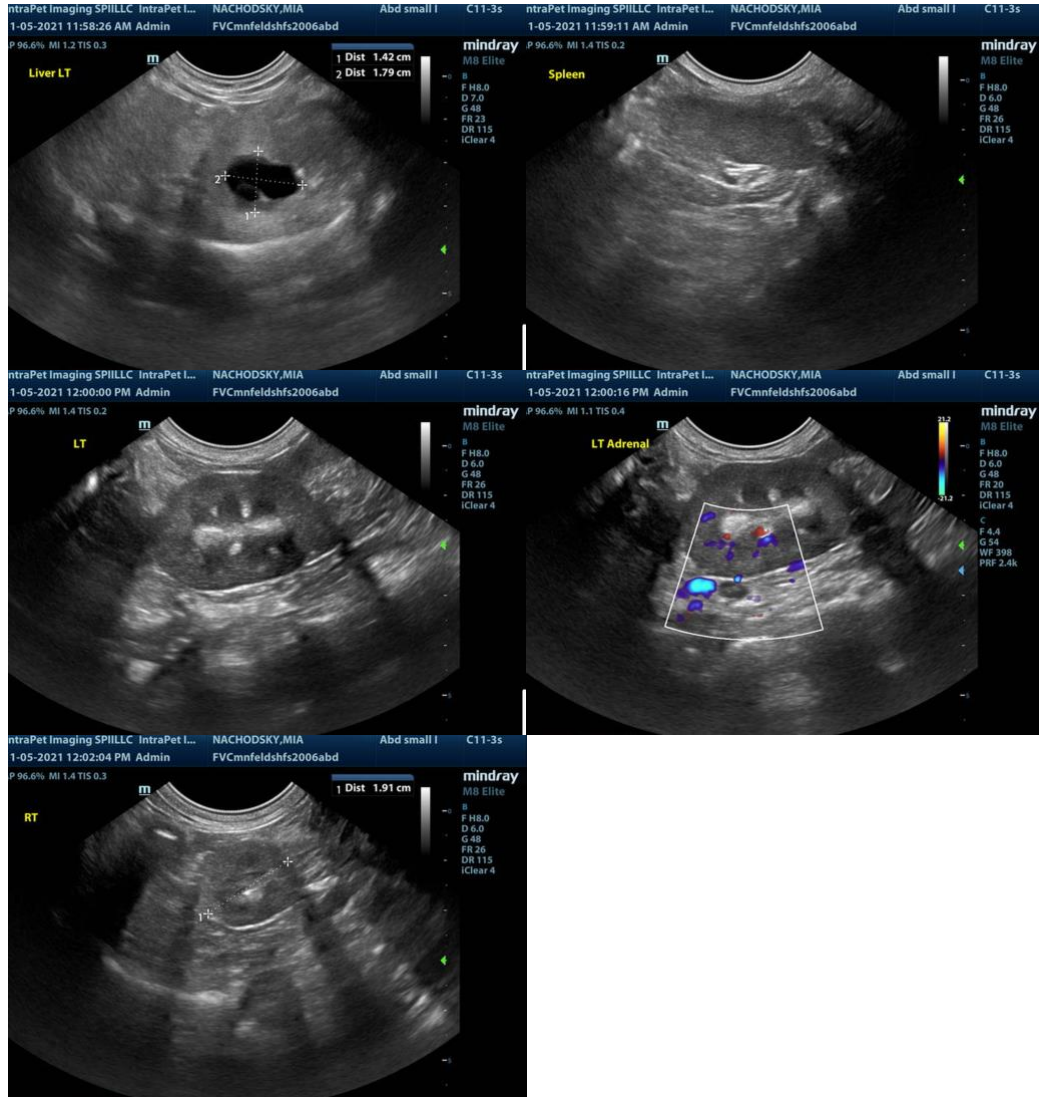
ULTRASONOGRAPHIC FINDINGS

- Chronic cholangitis/cholangiohepatitis liver pattern with benign cyst. Separate cystic changes noted in the right cranial liver as well.
- Prominent pancreas
- Enlarged irregular spleen. Strong concern for round cell neoplasia.
- Dystrophic right kidney. Mild degenerative left renal changes with mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver recommended in this patient to assess for round cell neoplasia versus reactive spleen and cholangiohepatitis. Urinary work-up warranted, if not already performed.





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
Eric.Lindquist@SonoPath.com