



**PATIENT**

Athena Roosa

**SPECIES**

Feline

**BREED**

Scottish Fold

**SEX**

Spayed Female

**AGE**

4 Years

**WEIGHT**

6.6 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Debbie White

**HOSPITAL NAME**

Lone Mountain AH

**REFERRING VET**

Dr. Debbie White

**INVOICE**

42567

**DATE**

11/5/22

**PRESENTING CLINICAL SIGNS**

chronic vomiting, usually hair. weight loss of 2 pounds in 1 year PE: BCS 2.5/5. Midabdominal mass 5cm

Abnormal PE/Chem/CBC/UA Results: 11/4/22 cbc/chem increased TP=11.1, incr glob=8.1, normal albumin 3.0 T4 midrange 2.5ug/dl. low normal hemogram (hct=36%, hb-11.1, rbc-10.39) UA sg 1.071 ph-6.5, 2+ protein, 0-1 wbc/hpf, 2-3 rbc/hpf Chest/abdomen xrays- unremarkable thorax. reduced serosal detail/mass effect mid abdomen

**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** presented mild increased cortical thickness. The left kidney was normal in size at 3.8 cm. The right kidney was mildly subnormal in size at 3.0 cm.

**Adrenal Glands**

The regions of the **adrenal glands** were unremarkable.

**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** presented increased portal markings. The gallbladder was mildly echogenic, yet not overdistended. History of cholangitis likely.

**Gastrointestinal**

The **stomach** was unremarkable. An overt mixed hypoechoic undifferentiated mass was noted that appeared to be deriving from the ileocecal region and intestinal wall. However, it appeared to blend into regional lymph nodes and definitive origin could not be determined.

**Pancreas**

The **pancreas** was prominent, hypoechoic, and irregular.

**Free Abdomen**

Mesenteric lymph nodes were enlarged and round, measuring up to 1.0 cm.

**ULTRASONOGRAPHIC FINDINGS**

- Lymph node or ileocecal mass
- Other enlarged mesenteric lymph nodes
- Cholangitis liver pattern



**PATIENT**

Athena Roosa

- Increased cortical thickness both kidneys
- Prominent, hypoechoic pancreas

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SPECIES**

Feline

FNA of the mesenteric mass and liver recommended. Round cell neoplasia versus granulomatous disease/FIP. Chronic lymphadenitis possible yet less likely. 25 and 22 gauge FNA samples and culture of the mesenteric mass indicated.

**BREED**

Scottish Fold

**SEX**

Spayed Female

**AGE**

4 Years

**WEIGHT**

6.6 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

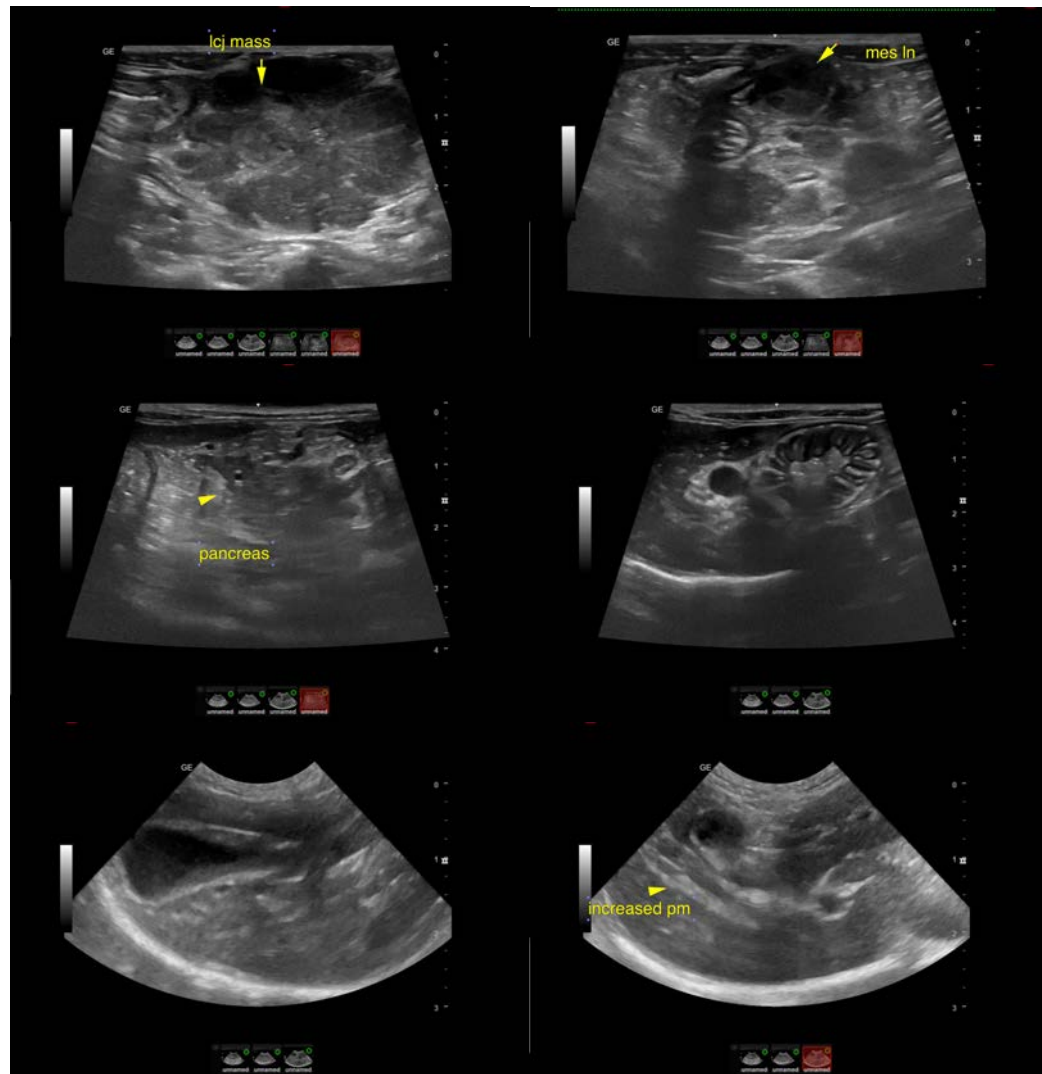
Dr. Debbie White

**HOSPITAL NAME**

Lone Mountain AH

**REFERRING VET**

Dr. Debbie White



**INVOICE**

42567

**DATE**

11/5/22



**PATIENT**

Athena Roosa

**SPECIES**

Feline

**BREED**

Scottish Fold

**SEX**

Spayed Female

**AGE**

4 Years

**WEIGHT**

6.6 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Debbie White

**HOSPITAL NAME**

Lone Mountain AH

**REFERRING VET**

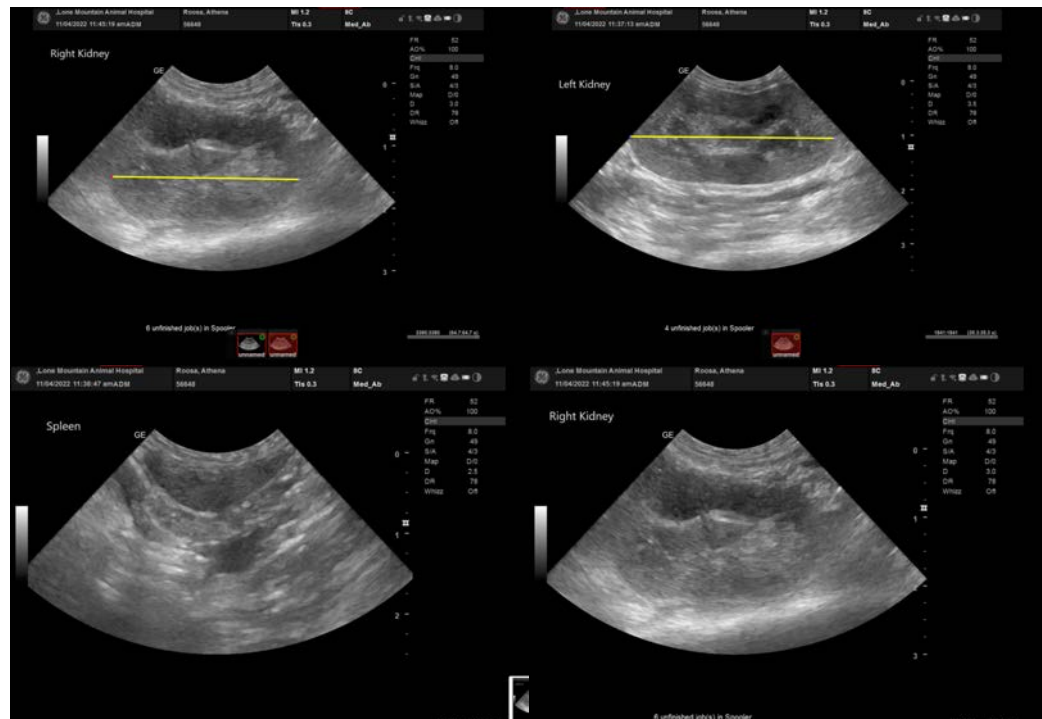
Dr. Debbie White

**INVOICE**

42567

**DATE**

11/5/22



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, Cert. IVUSS, CEO of SonoPath.com**

[info@SonoPath.com](mailto:info@SonoPath.com)