

**DATE**

12/17/21

**PRESENTING CLINICAL SIGNS**

History: History: Date: 12-15-2021 Notes: PC: lethargic, not eating, not urinating ATO: about 1 week ago noticed a bald spot on his back; has gotten larger and now has a sore. he does not lick at it or scratch it Very lethargic over the last few days; o found him curled up in the closet hasn't been talkative, o has not seen him use the litter box in last couple of days Is known to lick the litter Is on urinary diet. Assessment: Anorexia, Lethargy. Plan: Recommend to Owner BW, Xrays, Hospitalization, IV catheter, fluid therapy, GI meds and further treatment as needed.

**PATIENT**

Jack Wilson

**SPECIES**

Feline

**BREED**

Main Coon

Current Medications: Cerenia, Doxycycline, Pantoprazole.

Lab Results: Attached separately.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**SEX**

Neutered Male

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****AGE**

7/4/12

**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.

**WEIGHT**

28.3 Lbs.

The **left kidney** was mildly enlarged with thickened irregular contour. The left kidney measured 5.3 cm.

The **right kidney** was mildly enlarged and revealed dystrophic cortical mineralization and infarcts. The right kidney measured 3.14 cm.

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**Adrenal Glands**

The regions of the **adrenal glands** were imaged and revealed no evident pathology.

**Spleen**

The **spleen** revealed multifocal nodular changes with a 4.3 cm mixed hypoechoic mass.

**IMAGING PERFORMED BY**

Rachel Brillhart RDMS

**Liver**

The **liver** in this patient revealed multifocal mixed hypoechoic masses. The gallbladder and common bile duct were unremarkable.

**HOSPITAL NAME**

Animal Emergency H

**Gastrointestinal**

The **stomach** itself was unremarkable. An infiltrative mass was noted in the colon with wall thickness up to 1.41 cm. The mass extended for 5.3 cm. Regional inflammation and lymphadenopathy noted.

**REFERRING VET**

Dr. Ruby

**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. 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.

**INVOICE**

13103

### Free Abdomen

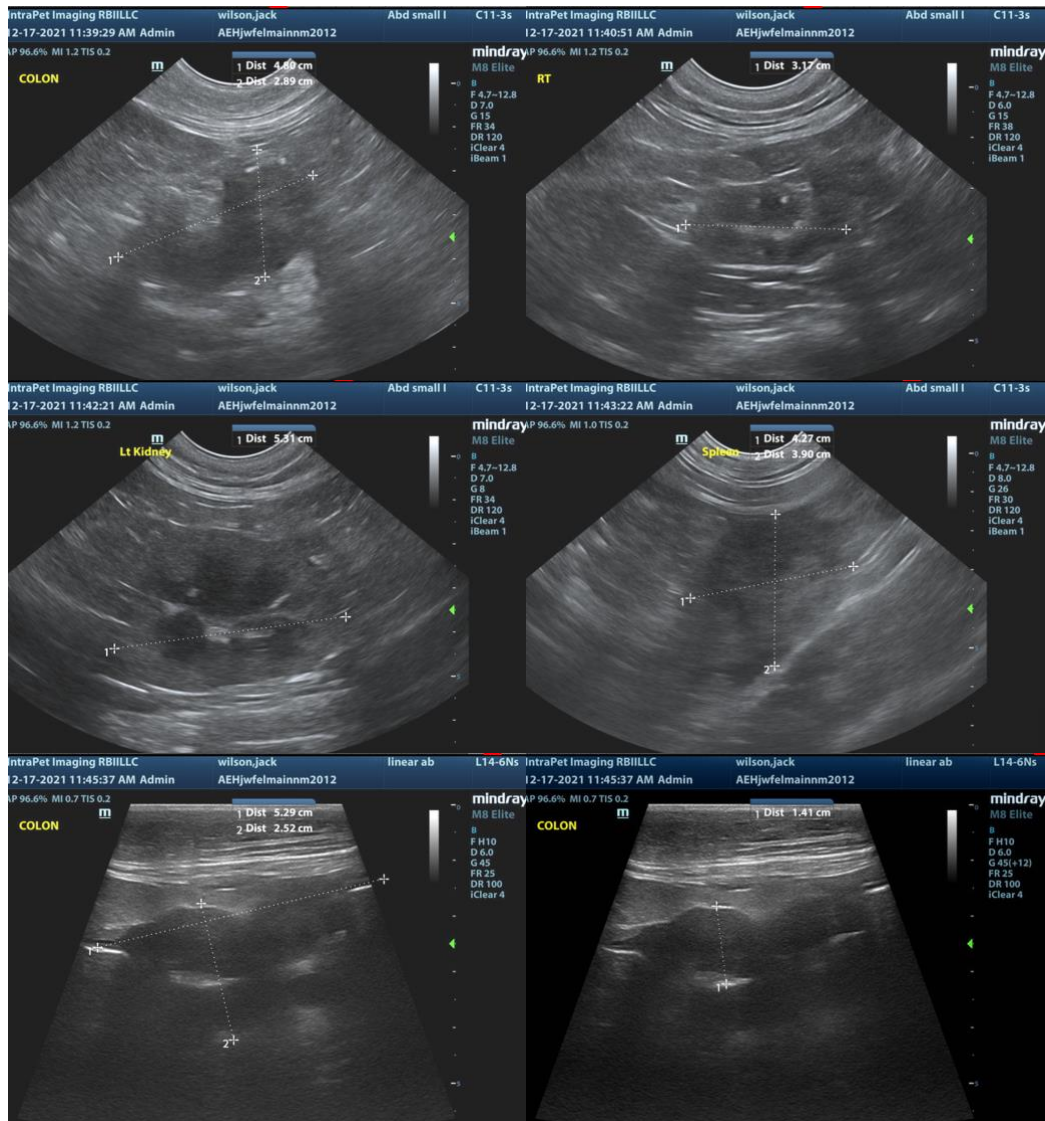
A moderate amount of **free fluid** noted, likely owing to lymphatic obstruction.

### ULTRASONOGRAPHIC FINDINGS

- Multicentric neoplasia involving colon, spleen and liver
- Dystrophic right kidney, compensatory hypertrophy changes in the left kidney
- Free fluid
- Age-related pancreatic changes

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the splenic, hepatic and colonic lesions could be considered after transfusion with adjunctive chemotherapy but bone marrow involvement is suspected given the anemia.





**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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