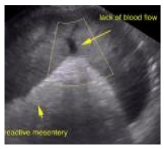
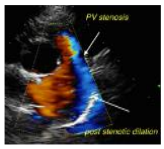
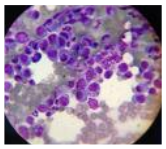
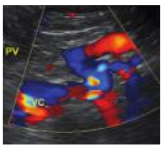
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Rusty Cicotto

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Year

WEIGHT

19.71 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

ACC Flanders

REFERRING VET

Dr. Casulli

INVOICE

13162

DATE

12/27/21

PRESENTING CLINICAL SIGNS

History: Not eating x 3 days, diabetic (dx today), CKD.

Abnormal PE/Chem/CBC/UA Results: Glu 549, Creat 3.8, BUN 62, Na 178, Cl 137, MCV 56.6, wbc 17.29, lym 12.21, mono 1.09, USG 1.030, Prot +++, Blod ++, Glucose ++++, trace ketones.

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 3.75 cm. Slight pyelectasia was noted in the right kidney. The right kidney measured 4.36 cm. Minor infarcts were noted in both kidneys.

Adrenal Glands

The **right adrenal gland** was 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 right adrenal gland measured 0.66 cm.

The region of the **left adrenal gland** revealed no evident pathology.

Spleen

The **spleen** was mildly enlarged (0.88 cm) with uniform, but subtly micronodular parenchyma, and minor 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.

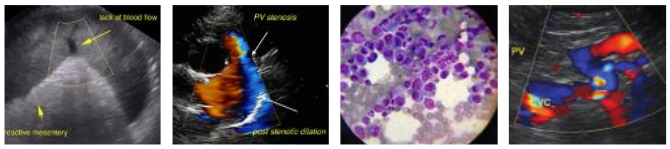
Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. Slight free fluid was noted between the liver lobes.

Gastrointestinal

The **stomach** was overdistended and filled with chyme. The small intestine and colon revealed minor thickening with regional omental inflammation.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Rusty Cicotto

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Year

WEIGHT

19.71 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

ACC Flanders

REFERRING VET

Dr. Casulli

INVOICE

13162

DATE

12/27/21

Pancreas

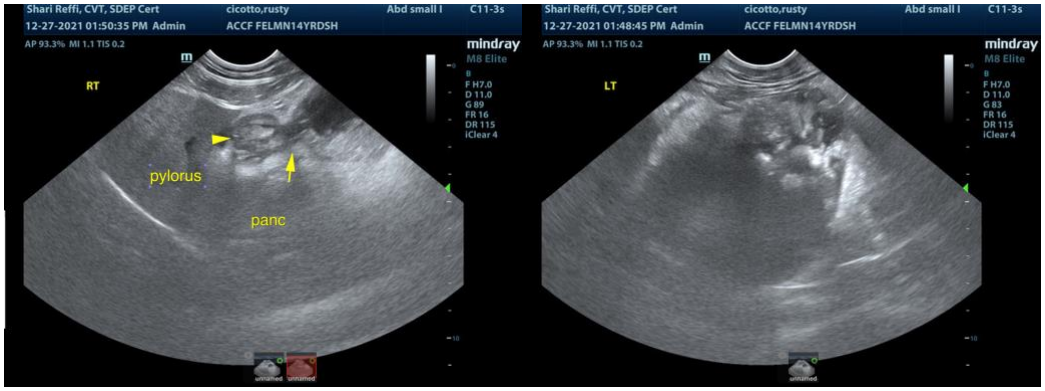
The **pancreas** revealed a large cyst or abscess (approximately 3 cm, approximately half of which was parenchyma). Ultrasound guided drainage and FNA warranted. Regional inflammation noted. Underlying pancreatic neoplasia is a possibility. Heterogeneous pancreatic tissue continued into the right pancreatic base enveloping the pylorus.

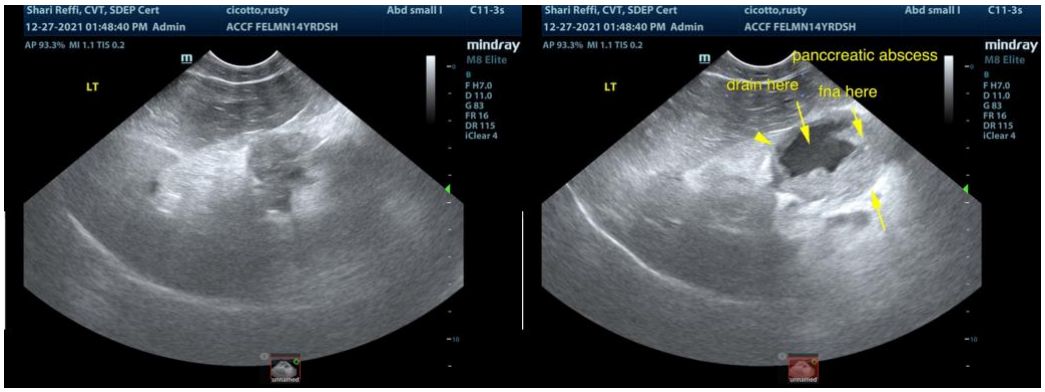
ULTRASONOGRAPHIC FINDINGS

- Pancreatic abscess/pancreatitis pattern
- Stomach overdistended with chyme. The small intestine and colon revealed minor thickening and regional omental inflammation.
- Scalloping spleen
- Age-related renal changes with infarcts. Right renal pyelectasia.

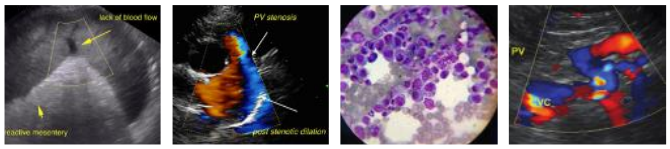
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the parenchymal portion of the pancreatic lesion as well as drainage of the suspected abscess all indicated. Aggressive medical therapy warranted in the meantime. Prognosis is guarded, depending upon cytology results. Otherwise, exploratory surgery could be justified with expectations of removal of the pancreatic lesion at the pancreatic base, however, clean resection may be difficult.





SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Rusty Cicotto

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Year

WEIGHT

19.71 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

ACC Flanders

REFERRING VET

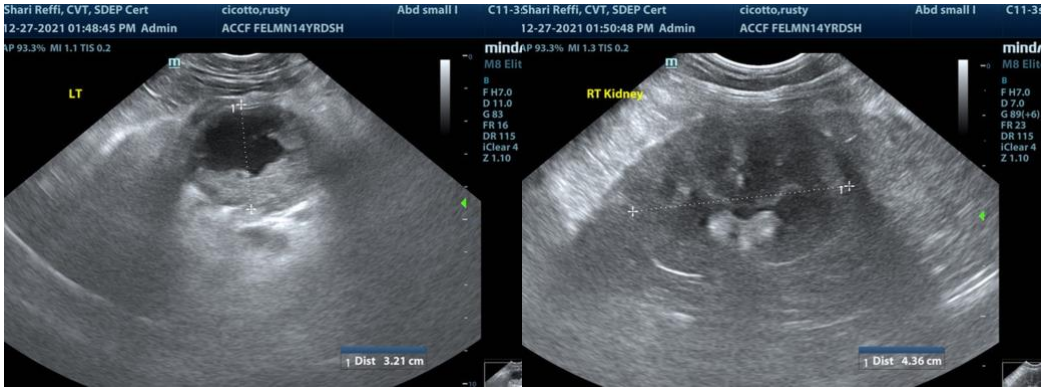
Dr. Casulli

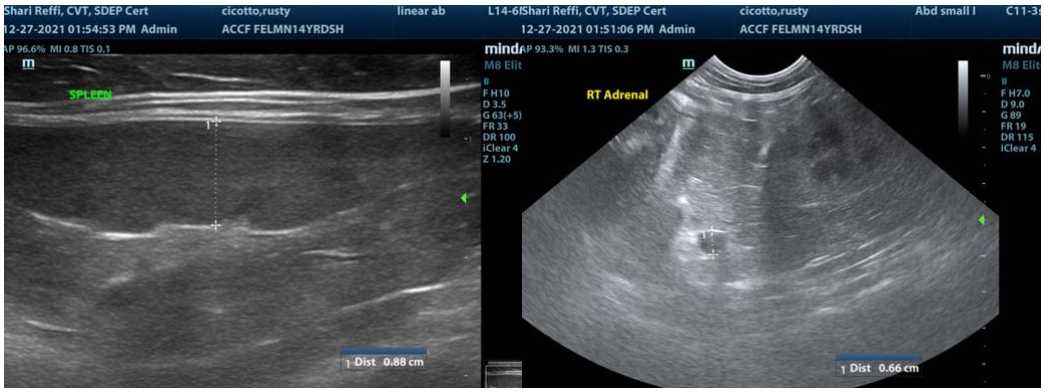
INVOICE

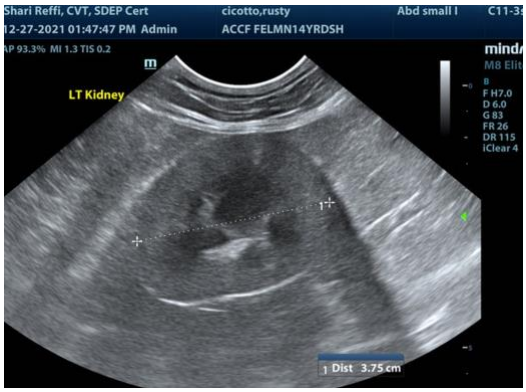
13162

DATE

12/27/21







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
info@SonoPath.com