



PATIENT

Lily Thompson

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

8 Years

WEIGHT

9.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Hess

HOSPITAL NAME

Petmedic UCVC

REFERRING VET

Hess

INVOICE

18970

DATE

12/3/22

PRESENTING CLINICAL SIGNS

History: Several weeks vomiting intermittently and decreased appetite, lethargy

Abnormal PE/Chem/CBC/UA Results: BW and radiographs unremarkable.

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** 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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.5 cm.

Adrenal Glands

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

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed. The spleen measured 7.0 mm.

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.

Gastrointestinal

The **stomach** was empty. Variable intestinal thickening was noted with areas of loss of mural detail. Wall thickness measured up to 6.0 mm. This is not resectable. Variable minor areas of free fluid were noted adjacent to the thickened intestine, as well as reactive mesentery.

Pancreas

The **pancreas** was hypoechoic and irregular, measuring 2.0 cm in the left limb. Minor enhanced mesentery was noted.

Free Abdomen

The **mesenteric lymph nodes** were enlarged and irregular, measuring up to 2.5 cm x 1.4 cm, encompassing the mesenteric artery.



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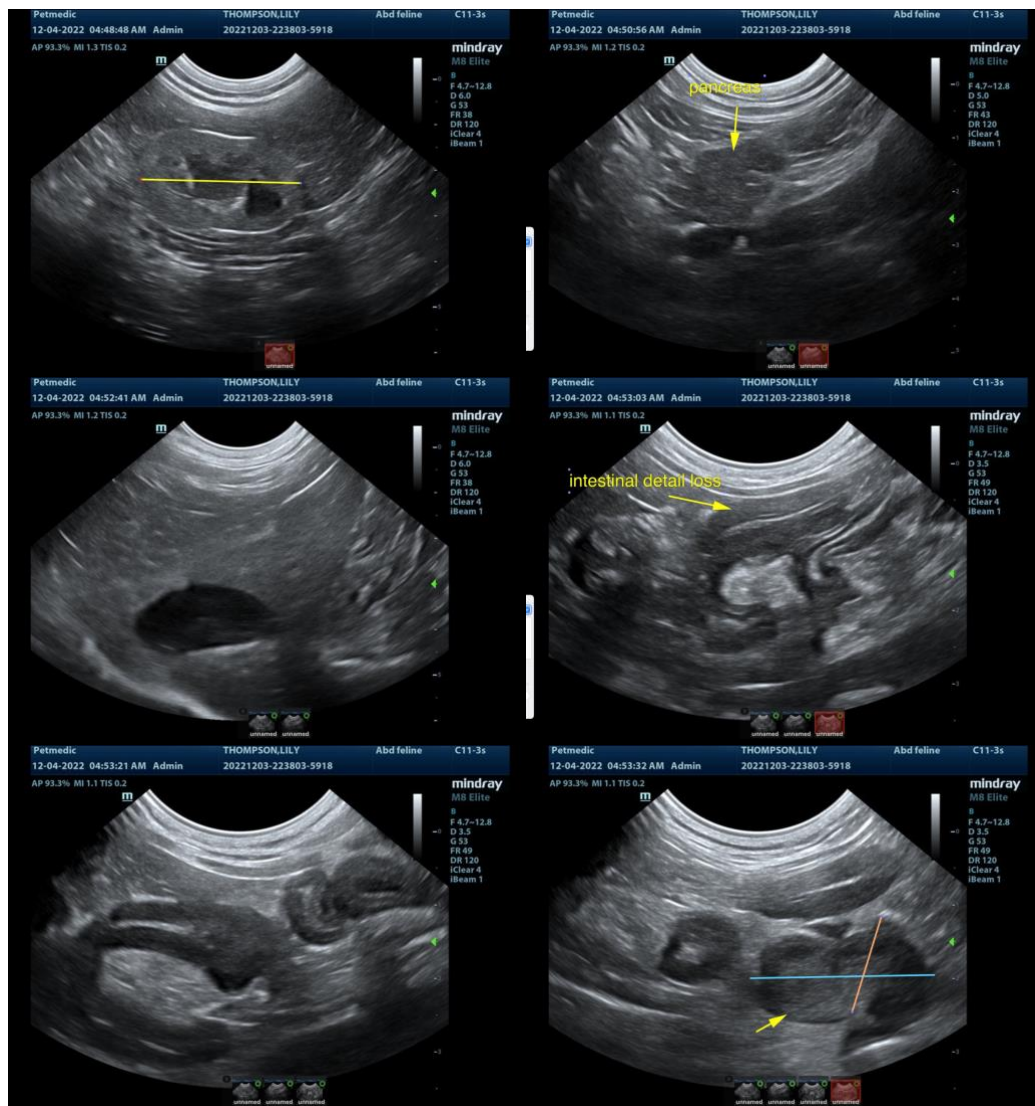
12/3/22

ULTRASONOGRAPHIC FINDINGS

- Diffuse intestinal thickening with loss of mural detail. Strong concern for emerging round cell neoplasia/lymphoma. FIP is also a potential.
- Mesenteric lymph nodes were enlarged and irregular encompassing the mesenteric artery
- Volume contracted spleen
- Hypoechoic and irregular pancreas
- Enhanced mesentery
- Free fluid

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full thickness intestinal biopsies and/or ultrasound guided FNA of the mesenteric lymph nodes with cytology and culture is indicated. Prognosis is guarded. When sampling the mesenteric lymph nodes, attention should be paid towards avoiding the mesenteric artery.





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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.

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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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Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

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