



## PATIENT

Chia Megna

## SPECIES

Ferret

## BREED

Ferret

## SEX

Spayed Female

## AGE

4 Years

## WEIGHT

1.2 Pounds

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

## IMAGING PERFORMED BY

Julia Bakker, DVM

## HOSPITAL NAME

Orange Blossom VI

## REFERRING VET

Ashley McNamee,  
DVM

## INVOICE

35742

## DATE

12/4/25

## PRESENTING CLINICAL SIGNS

History: Presented for acute onset of inappetence. Cachexia and loss of 31% body weight was noted, along with firm structure in mid-ventral abdomen, paraparesis. Radiographs appeared relatively unremarkable. Chemistry/CBC showed hypocalcemia, low Alb/glob ratio (0.5), elevated ALT/ALP and lipase. Neutrophils are elevated and have toxic appearance. Urinalysis (collected from cage) suggests infection and specific gravity may be inappropriate (1.017). Patient has history of adrenal gland disease (Suprelorin implant on 3-7-25), coronavirus and helicobacter (treated with triple therapy on 9-19-24).

## 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 2.68 cm. The right kidney measured 2.88 cm.

### *Adrenal Glands*

Both the right and left **adrenal glands** were visualized. The right adrenal gland measured approximately 0.3 cm. The left adrenal gland measured 0.4 cm.

### *Spleen*

The **spleen** was enlarged and folded upon itself in horseshoe shape fashion. Generalized splenomegaly was noted with subtle micronodular changes. Ultrasound guided 25-gauge FNA is indicated to assess for hyperplasia versus round cell neoplasia. The spleen was buttressed up against and folded against the liver.

### *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.

### *Gastrointestinal*

The **stomach** itself was unremarkable. Variable intestinal thickening was noted with soft stool in the colon.

### *Pancreas*

Nodular **pancreatic** changes were noted, measuring up to 0.47 cm.

### *Free Abdomen*



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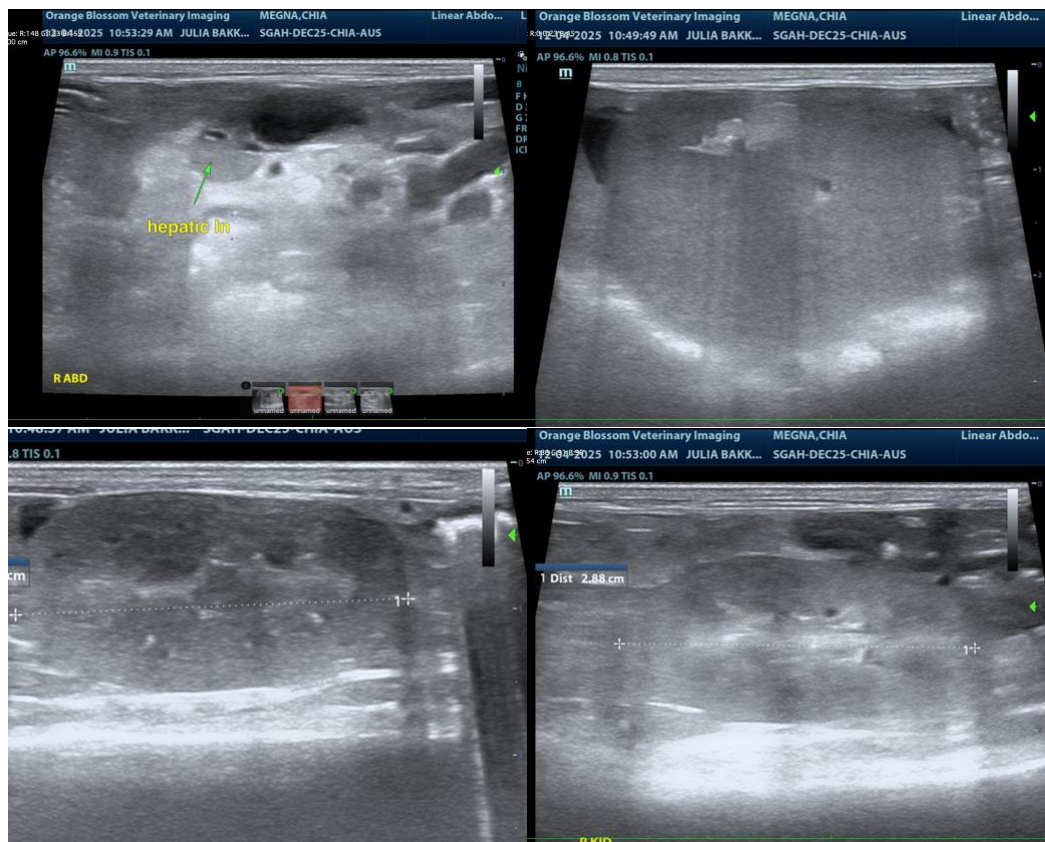
The mid abdomen revealed a rounded hypoechoic 1.14 cm x 0.8 cm **lymph node**. Other smaller lymph nodes were also enlarged. Hepatic lymph nodes were also enlarged. Slight areas of free fluid were noted.

## ULTRASONOGRAPHIC FINDINGS

- Severe splenomegaly
- Lymphadenopathy
- Free fluid
- Nodular pancreatic changes
- Variable intestinal thickening with soft stool in colon

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the spleen and accessible lymph nodes and abdominocentesis are indicated, or direct exploratory surgery with splenectomy and multiple lymph node biopsies would also be a valid approach.





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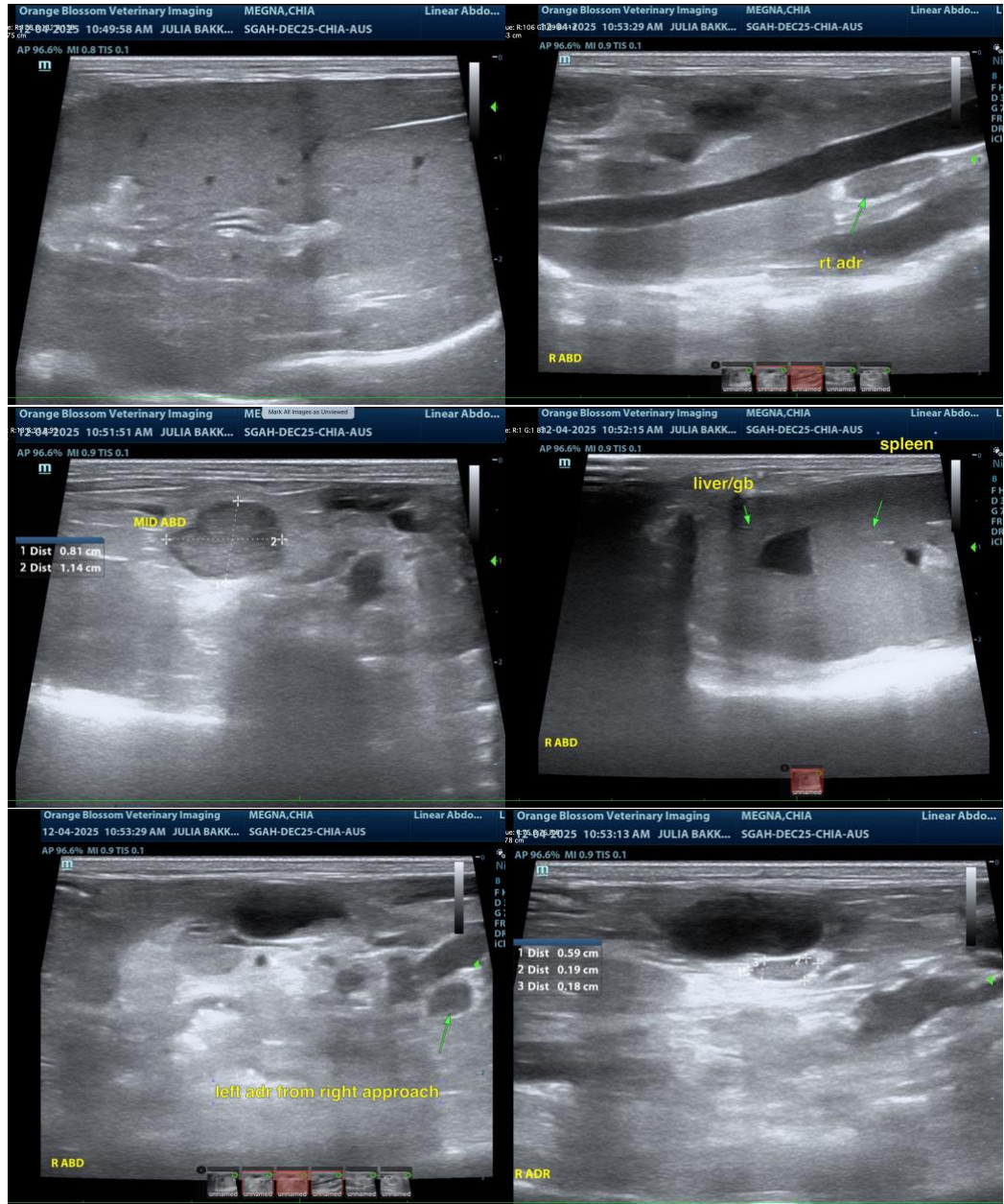
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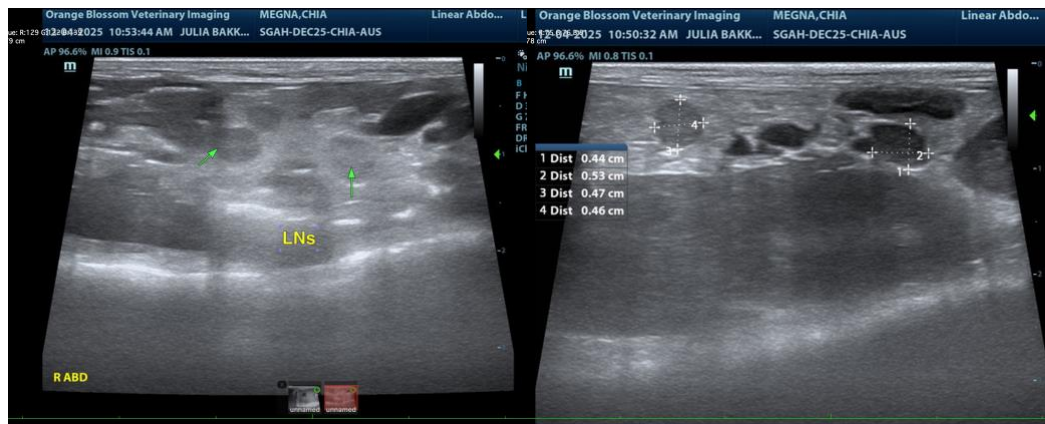
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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(CFM), Cert. IVUSS,**  
CEO, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)