



PATIENT

Eve Forsyth

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

8 years

WEIGHT

9.9 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Rodriguez

HOSPITAL NAME

Foxfield VS

REFERRING VET

Dr. Rodriguez

INVOICE

94423

DATE

12/7/21

PRESENTING CLINICAL SIGNS

History: Prev dx with lymphoma based on Mesenteric lymph node aspirates. Has been doing well on pred. Recently began to vomit and have some hind end ataxia as well as decreased appetite and lethargy
Abnormal PE/Chem/CBC/UA Results: WNL

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 was noted. Ureteral papillae were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.19 cm. The right kidney measured 4.03 cm.

Adrenal Glands

Both **adrenal glands** were 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 left adrenal gland measured 0.37 cm.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed. The spleen measured 0.4 cm.

Liver

The **liver** revealed slight coarse architecture with increased portal markings and mild irregular contour. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. The hepatic lymph nodes were slightly enlarged.

Gastrointestinal

There was retention of ingesta noted in the **stomach**. Hyperperistalsis was noted throughout the small intestine. The mesenteric lymph nodes were reactive and measured 1.0 x 0.5 cm. Minor, variable intestinal thickening was noted. There were slight areas of free fluid and enhanced mesentery was noted. This is suggestive for an active pathological process.



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Pancreas

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The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

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ULTRASONOGRAPHIC FINDINGS

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Variable intestinal thickening and minor mesenteric lymphadenopathy with slight, reactive mesentery and slight free fluid.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Escape from remission is a strong potential in this patient; however, an inflammatory lymphadenitis presentation can also present in this manner. Supportive care for GI upset is recommended with IV fluid support, broad spectrum antibiotics and reassessment of the sonogram. However, adjustment of the lymphoma therapy may also be appropriate.

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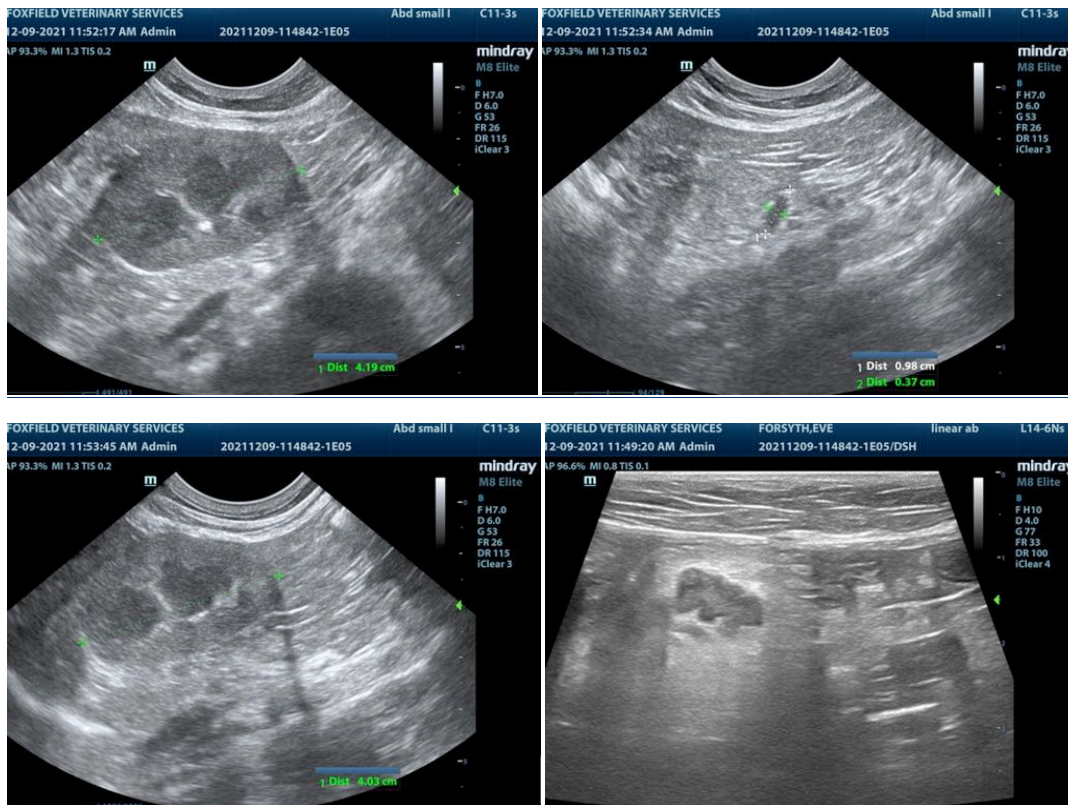
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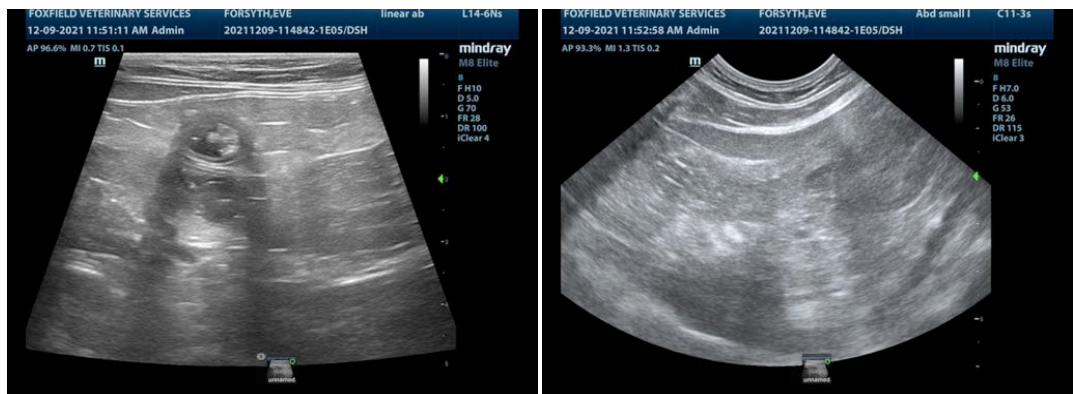
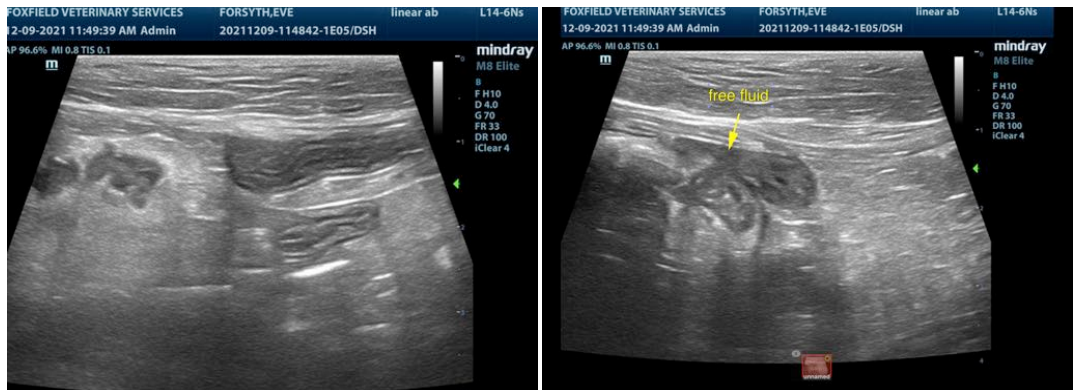
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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