



**PATIENT**

Mortimer Simonet

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

7.8 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Tyler Totman, LVT

**HOSPITAL NAME**

Adana Vet Clinic

**REFERRING VET**

Dr. Wildenstein

**INVOICE**

45134

**DATE**

2/14/23

**PRESENTING CLINICAL SIGNS**

Presented early January w/ concerns of frequent vomiting and weight loss. Began trial period of daily Prednisolone (and currently still taking 5mg SID), which has resolved vomiting. The past few weeks he has not been eating well, is maintaining weight. On palpation his liver feels firm and enlarged.

Abnormal PE/Chem/CBC/UA Results: Normal Chem, CBC, and T4 late Dec 2022 2/9/23 UA revealed hematuria and bacteriuria- resolving by 2/13 w/ abs and Class IV laser therapy

**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 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.16 cm. The left kidney measured 4.22 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 right adrenal gland measured 0.37 cm. The left adrenal gland measured 0.32 cm.

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

**Liver**

The **liver** presented slight coarse architecture. Minor increased portal markings noted. The gallbladder and common bile duct were unremarkable. Portal vein to vena cava ratio was 1:1.

**Gastrointestinal**

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropey" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. Some retention of ingesta was noted in the stomach. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. Regional thickening of the small intestine noted just cranial to the urinary bladder measuring 1.2 cm in thickness x 1.5 cm. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.



**PATIENT**

Mortimer Simonet

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

7.8 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Tyler Totman, LVT

**HOSPITAL NAME**

Adana Vet Clinic

**REFERRING VET**

Dr. Wildenstein

**INVOICE**

45134

**DATE**

2/14/23

**Pancreas**

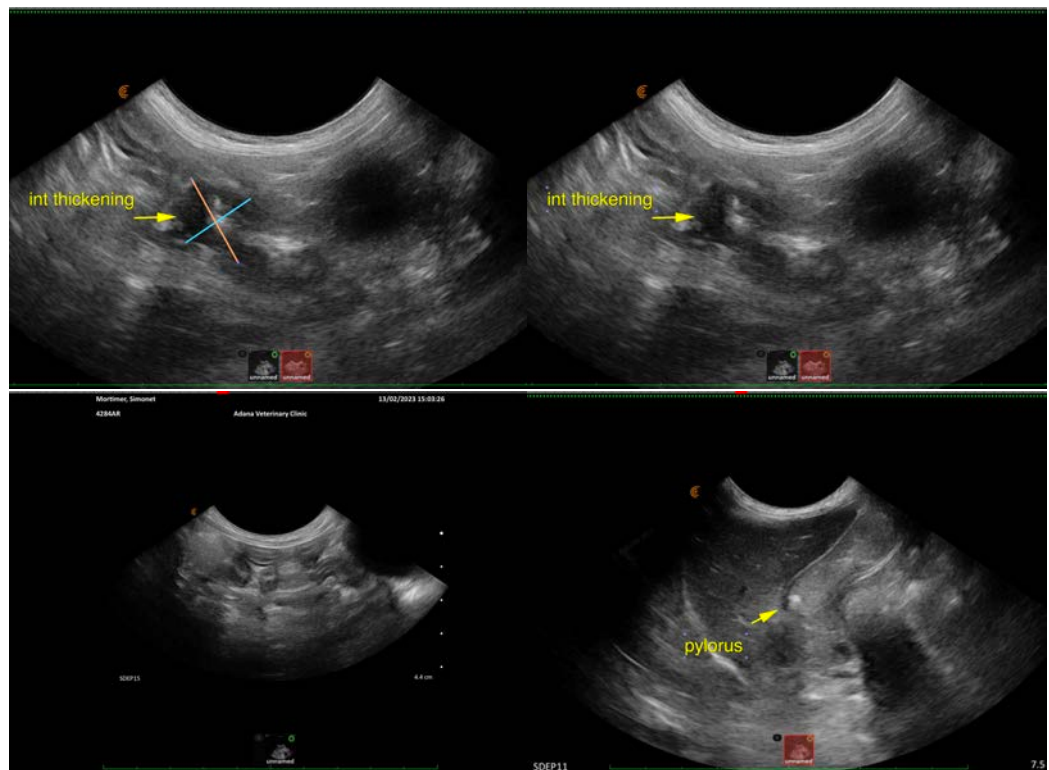
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**ULTRASONOGRAPHIC FINDINGS**

- Focal intestinal thickening
- Minor hepatic remodeling
- Age related renal changes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Concern for emerging round cell neoplasia. Intraoperative ultrasound with full thickness biopsies and resection of the small intestinal thickening would be ideal. Hepatic biopsy also warranted at the time of the surgery. Other causes of weight loss should also be considered. Given the Prednisone therapy, partial suppression of underlying lymphoproliferative disease possible.





**PATIENT**

Mortimer Simonet

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

7.8 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Tyler Totman, LVT

**HOSPITAL NAME**

Adana Vet Clinic

**REFERRING VET**

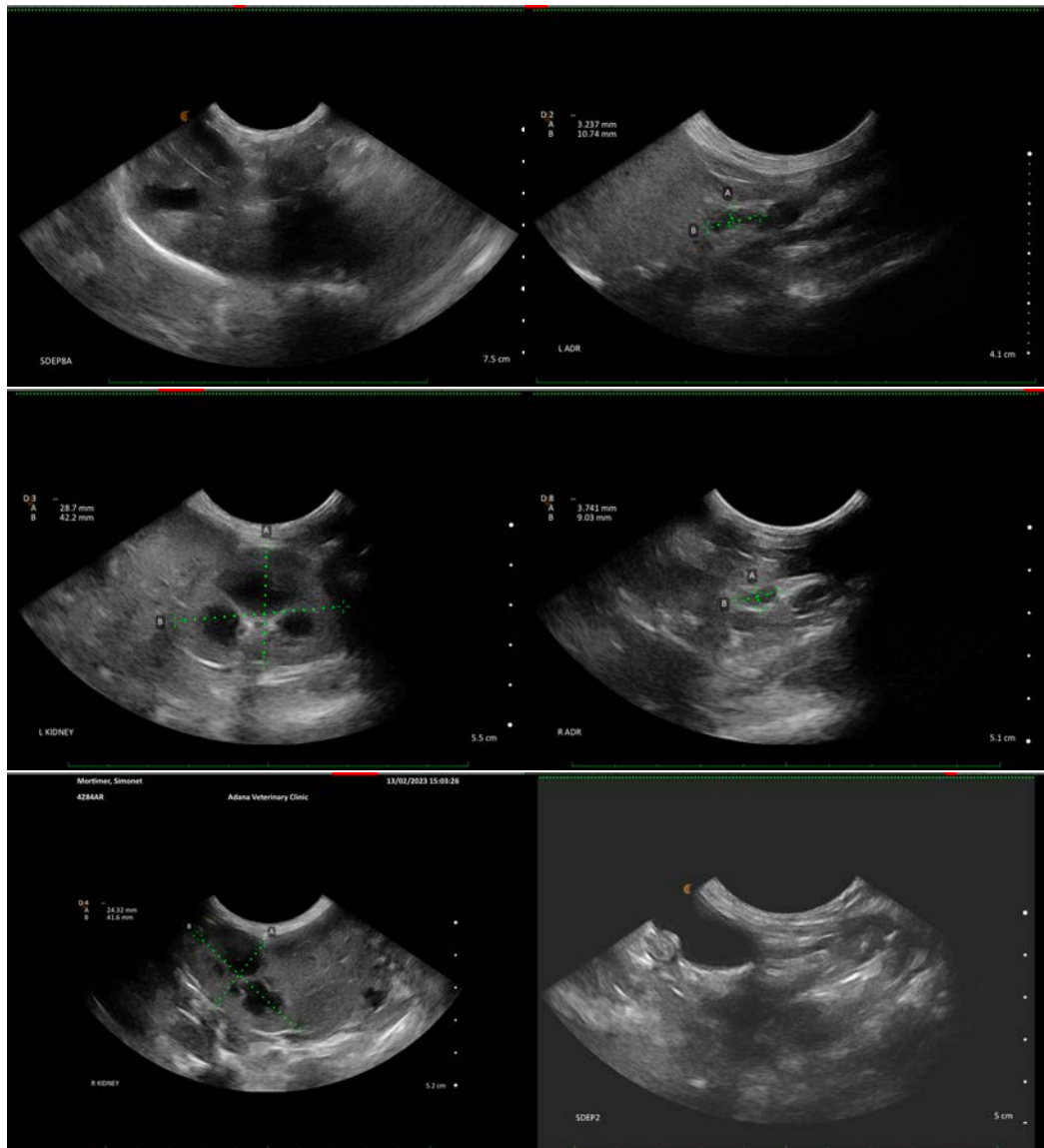
Dr. Wildenstein

**INVOICE**

45134

**DATE**

2/14/23



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, Cert. IVUSS, CEO of SonoPath.com**

[info@SonoPath.com](mailto:info@SonoPath.com)