



PATIENT

Patches Salas

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

16 Years

WEIGHT

10 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

IMAGING PERFORMED BY

Harold Mike Beard

HOSPITAL NAME

Animal Care VC

REFERRING VET

Harold Mike Beard

INVOICE

21720

DATE

3/20/23

PRESENTING CLINICAL SIGNS

History: Takes Methimazole. Has been hyperthyroid for 3 years. We have weight loss and poor appetite.

Abnormal PE/Chem/CBC/UA Results: Sarcopenia. T4 is 4.9 in spite of being on Methimazole. The ALT, SAP, GGT and Total Bili are slightly elevated. RDVM wanted to know what the liver looks like.

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 1.0 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 moderate 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 left kidney measured 2.7 cm. The right kidney measured 2.7 cm.

Adrenal Glands

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

Spleen

The **spleen** was mildly heterogenous to hypoechoic and irregular. The splenic vein appeared to be occupied with an echodense material, possible thrombosis or proliferative disease.

Liver

The **liver** was mildly irregular in contour with increased portal markings and isoechoic heterogenous parenchymal changes. An overt nodular mass (approximately 3.0 cm) was noted in the right cranial liver. The gallbladder was deviated. Localized fluid was noted adjacent to the liver lobes. An overt mass was noted in the left lateral liver lobe.

Gastrointestinal

The **stomach** was empty and unremarkable. Variable small intestinal thickening was noted.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

- Infiltrative hepatic pattern



PATIENT

Patches Salas

- Probable splenic involvement
- Age-related renal changes
- Minor chronic GI changes
- Age-related pancreatic changes

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

16 Years

WEIGHT

10 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Harold Mike Beard

HOSPITAL NAME

Animal Care VC

REFERRING VET

Harold Mike Beard

INVOICE

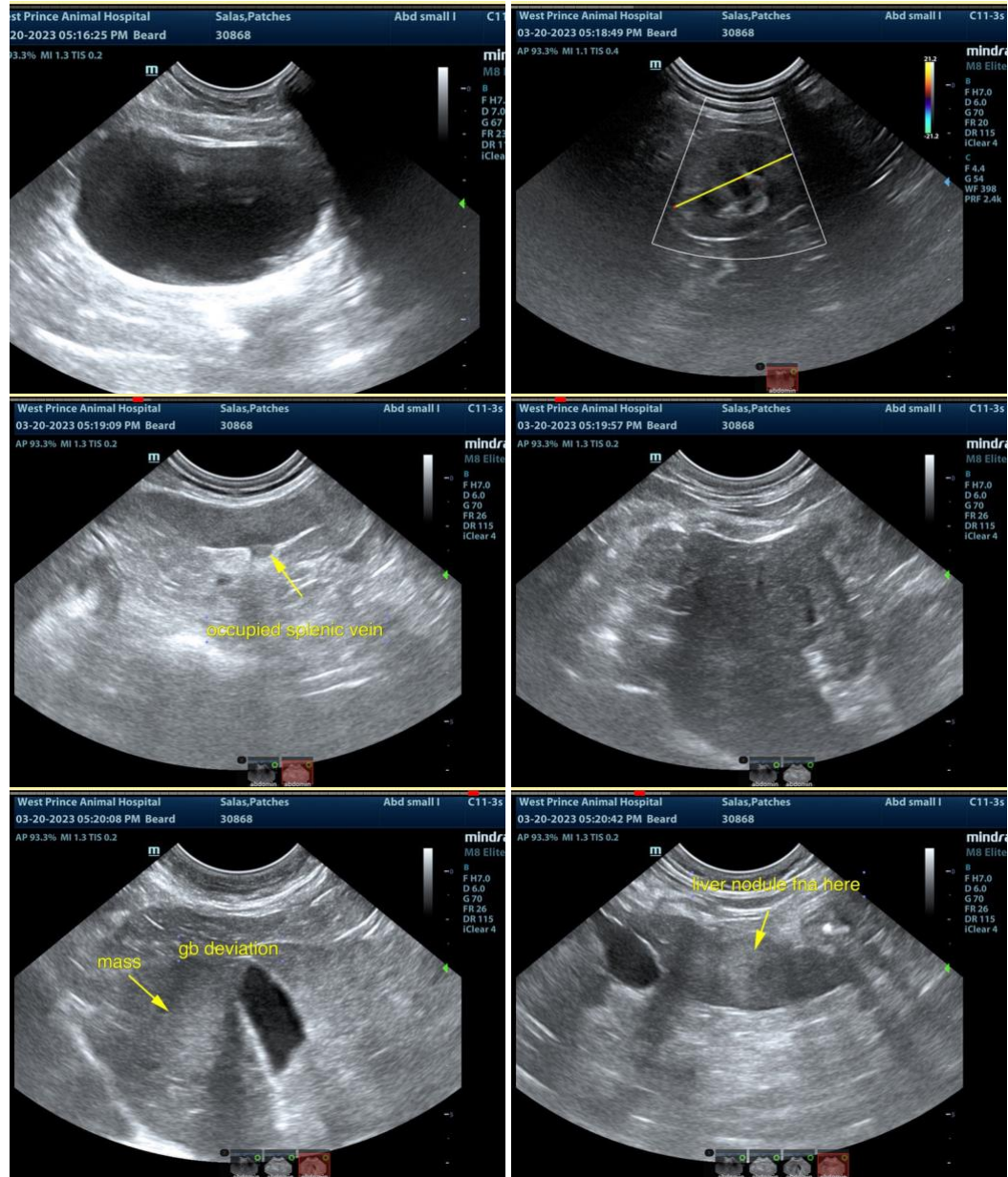
21720

DATE

3/20/23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver are indicated. Prognosis is extremely guarded to poor. Round cell neoplasia is suspected.





PATIENT

Patches Salas

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

16 Years

WEIGHT

10 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Harold Mike Beard

HOSPITAL NAME

Animal Care VC

REFERRING VET

Harold Mike Beard

INVOICE

21720

DATE

3/20/23



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