



PATIENT

Biscuit Fanning

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

16 years

WEIGHT

6.1 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Barnea

HOSPITAL NAME

Tenafly VC

REFERRING VET

Dr. Barnea

INVOICE

43207

DATE

3/8/23

PRESENTING CLINICAL SIGNS

History: HX hyperthyroid, hypertension cc wt loss anorexia lethargy trying ot eat but doe snot bw + pli in house t. billi =1 hct =22 all else wnl holding on ua/t4 as us does not look promising concern about gi dz such as lymphoma / leukemia / other wbc =43,000

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilatation was present. The kidneys measured 3.0 cm each.

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.

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner.

Liver

The **liver** revealed coarse architecture with increased portal markings. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

The **stomach** in this patient appeared normal. A 3.0 x2.5 cm, midabdominal intestinal mass was noted in this patient. Nodular omental changes were noted with regional free fluid. This is suggestive for lymphomatosis, carcinomatosis or similar. Variable other minor small intestinal thickening was noted in this patient.



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Pancreas

Biscuit Fanning

The **pancreas** appeared to be enveloped in the regional intestinal pathology.

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ULTRASONOGRAPHIC FINDINGS

Intestinal mass with omental spread. Lymphomatosis, carcinomatosis type presentation. Scalloping spleen.

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Otherwise, age related abdominal changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the intestinal mass is recommended. Lymphoma is likely. CBC path review and bone marrow aspirate would be ideal as well.

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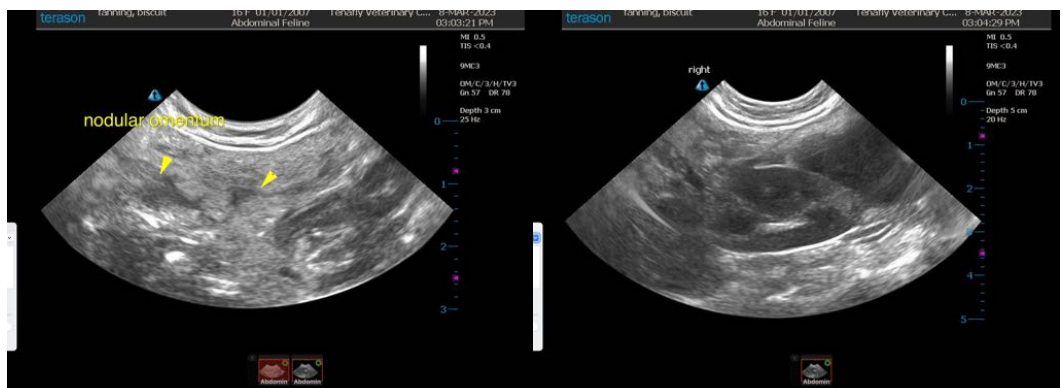
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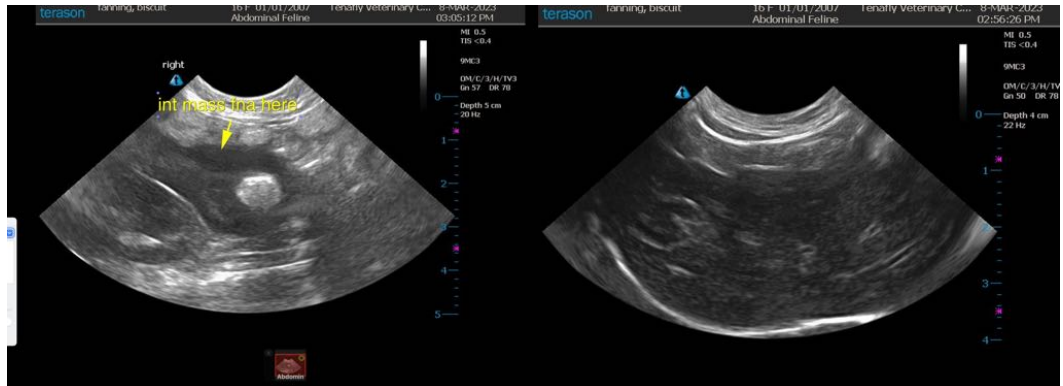
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com
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