



PATIENT

Fargus Marchello

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

14 years

WEIGHT

14 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Cerf

HOSPITAL NAME

Veterinary Center of
Hardyston

REFERRING VET

Dr. Cerf

INVOICE

43798

DATE

4/11/23

PRESENTING CLINICAL SIGNS

History: EMPLOYEE PET!! Diabetic- Unregulated 4 units Lantus Vomiting, Diarrhea, Lethargy PU/PD

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** were mildly swollen with slight, pinpoint mineralization. The left kidney measured 5.17 cm with increased cortical echogenicity. This is consistent with diabetic nephropathy. The right kidney revealed cortical infarcts and calculi with active inflammation. The right kidney measured 3.8 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.

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 was noted.

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. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

The **gastrointestinal tract** revealed variable small intestinal thickening in the mid small intestine with reactive surrounding mesentery. The thickening extended from mixed, hypoechoic parenchymal



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changes noted in the pancreas. The stomach and colon appeared unremarkable. Regional mesenteric lymph nodes are enlarged as well along with areas of free fluid.

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Pancreas

Hypochoic parenchymal changes were noted in the **pancreas**. There is a region of approximately 3.0 cm at the right base of the pancreas that is concerning.

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Free Abdomen

Slight areas of free fluid were noted.

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ULTRASONOGRAPHIC FINDINGS

Variable intestinal thickening.

AGE

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Heterogenous, nodular pancreas.

Enlarged mesenteric lymph nodes.

WEIGHT

14 lbs

Free fluid.

Chronic nephritis, nephrolithiasis of the right kidney.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a strong concern for pancreatic carcinomatosis versus pancreatitis and enteritis. Sampling is essential in this patient. Ultrasound guided FNA of the pancreatic nodule is recommended. Drainage and cytospin of the free fluid and lymph nodes is also indicated.

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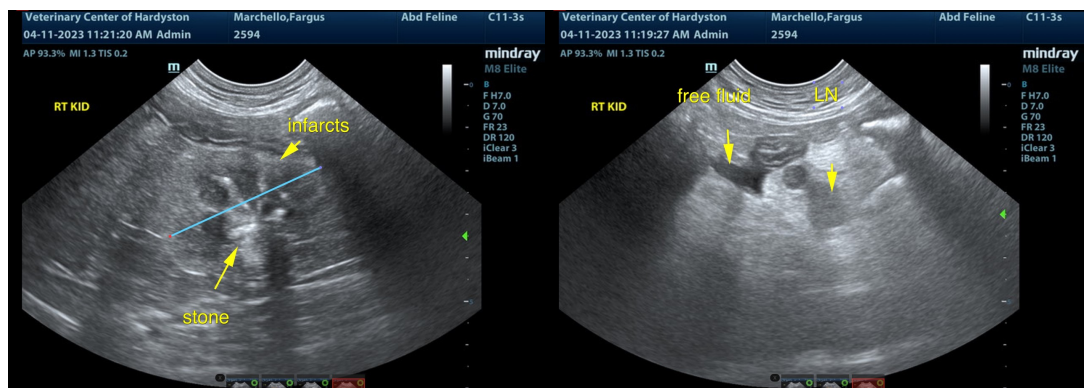
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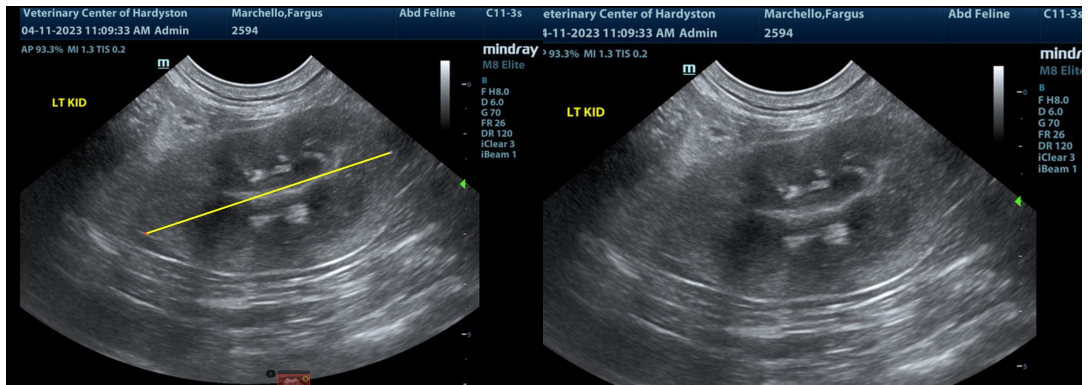
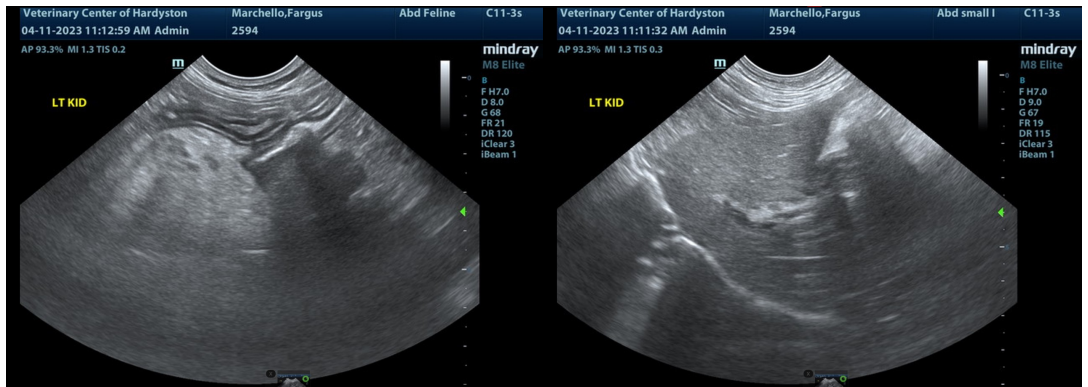
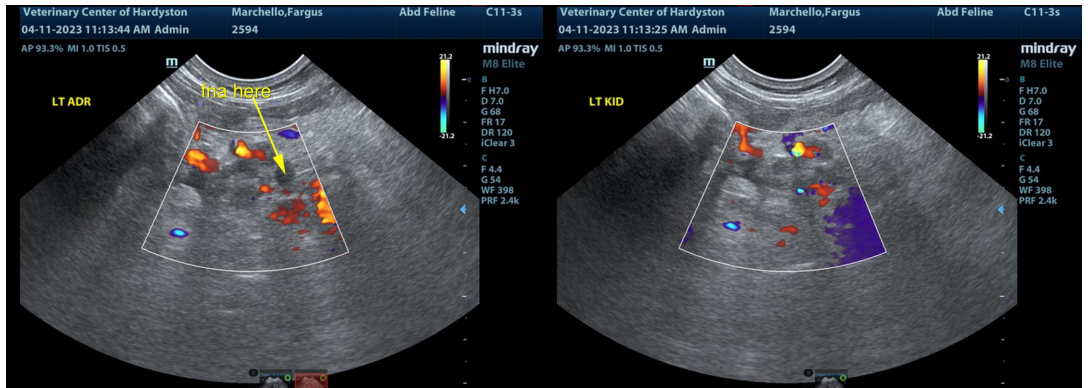
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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