



PATIENT

Cho Brown

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

13 Years

WEIGHT

10.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Samantha Hudgins

HOSPITAL NAME

Petvacx AH

REFERRING VET

Dr. Rachel Wiley

INVOICE

14802

DATE

4/18/22

PRESENTING CLINICAL SIGNS

History: Cho presented on 4-12-22 for decreased appetite and weight loss.

Abnormal PE/Chem/CBC/UA Results: On physical exam a ping pong ball sized mass was palpated in the mid exam - on the day of the U/S it palpated slightly larger. Bloodwork was mostly unremarkable except for a mild neutrophilia and an elevated proBNP (1500).

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 normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 4.0 cm.

Adrenal Glands

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

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** was swollen, hypoechoic and irregular. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

The **stomach** itself was unremarkable. An infiltrative intestinal mass was noted in the caudal abdomen with regional hyperechoic enhanced surrounding fat. Intestinal wall thickness measured up to 1.3 cm, impinging upon the urinary bladder yet appeared to be distinctly separate from it. Variable intestinal thickening noted elsewhere.

Pancreas

Minor heterogeneous **pancreatic** changes noted, yet not a primary issue.

Free Abdomen

A minor amount of free fluid was noted in the **abdomen**. Enhanced mesentery was noted throughout the cranial abdomen, associated with the intestinal tract.



PATIENT Pleural effusion was noted through the diaphragm.

Cho Brown **ULTRASONOGRAPHIC FINDINGS**

- SPECIES**
- Intestinal mass with splenic and hepatic infiltrative pattern
 - Ascites and pleural effusion, likely paraneoplastic owing to lymphatic obstruction
 - Heterogeneous pancreas

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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FNA of the intestinal mass, spleen and liver recommended. Immediate chemotherapeutic intervention recommended.

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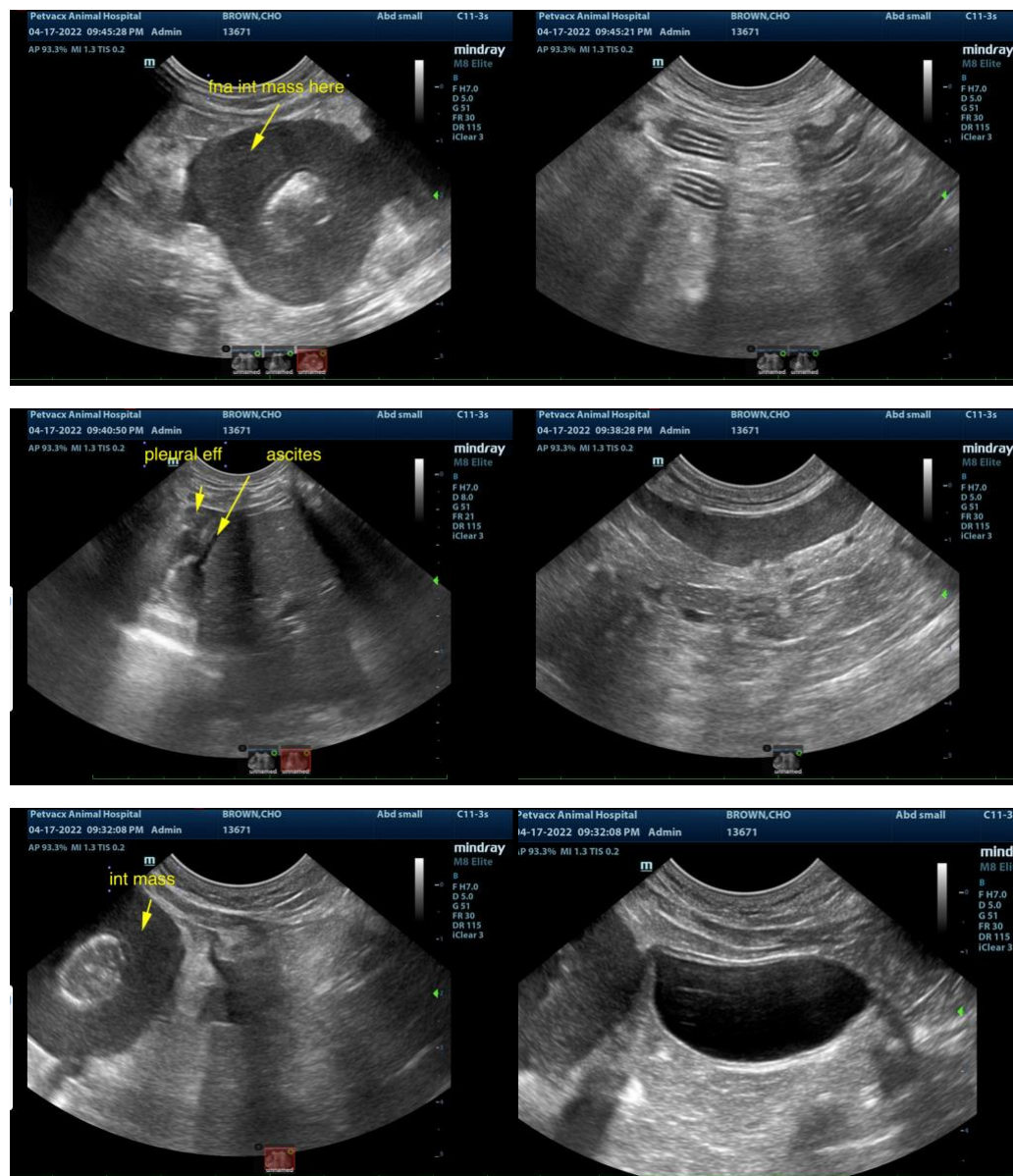
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not



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visible in the image/video clips provided.

Cho Brown

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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