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Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

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**DATE**

4/25/23

**PATIENT**

Minkee Calabrese

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

4/1/09

**WEIGHT**

12 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**HOSPITAL NAME**

Cat Sense Feline  
Hospital and Boarding

**REFERRING VET**

Dr. Sinclair

**INVOICE**

46927

**PRESENTING CLINICAL SIGNS**

Minkee has been ADR recently. His bloodwork shows an increased ALKP of 78 and increased monos. He also has some renal insufficiency. He has responded some to treatment with cerenia and fluids. He had a nephrectomy for renal carcinoma last year.

Current Medications: Cerenia 6mg SID.  
Lab Results: BUN=22; creat=2.6; SDMA=18, ALKP=78, monos=1376  
Date of Previous IntraPet Ultrasound: 3/11/22. See attached.  
Sedation: Oral: gabapentin. IV: Torb 0.2cc.  
Stat Report: STAT requested.  
Imaging Performed By: Rachel Brillhart, RDMS.

**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.

**\*\*In review of the prior image set, it appears that the left kidney was visualized from the right side and presumed to be the right kidney. The cystic mass was occupying the area of the right kidney.**

On the current study, the **left kidney** presented normal size and contour with minor age related changes.

An undifferentiated, mixed hypoechoic mass with a cystic and necrotic component was noted measuring 3.0 cm x 4.0 cm, occupying the region of the prior mass. It appears that the mass is deriving from the **right kidney fossa** as opposed to the caudate process as previously reported. The mass appears to extend into regional omentum with secondary pancreatic inflammation. Regional lymph nodes were also involved.

**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 0.80 cm. The left adrenal gland measured 0.43 cm.

**Spleen**

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

**Liver**

The **liver** was mildly heterogeneous with coarse architecture and hypoechoic nodules. The gallbladder and common bile duct were unremarkable. The mass in the region of the caudate process is likely kidney origin and impinging upon the liver.

**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

## Pancreas

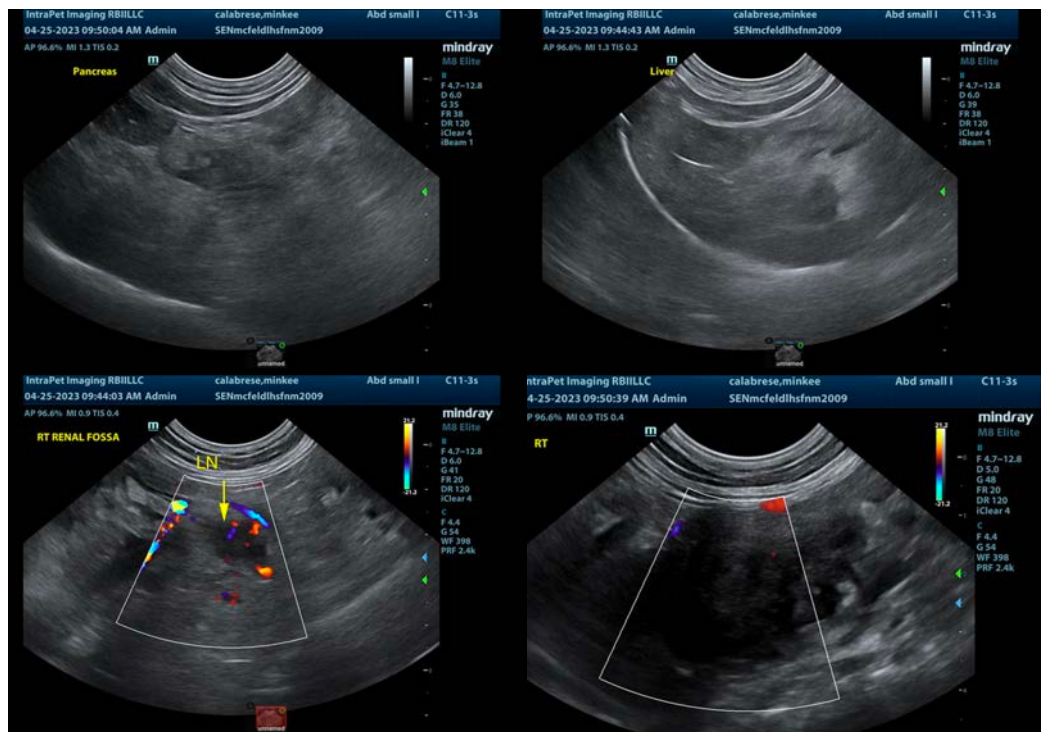
The right limb of the **pancreas** was enlarged and irregular with undulating contour. Coarse architecture noted.

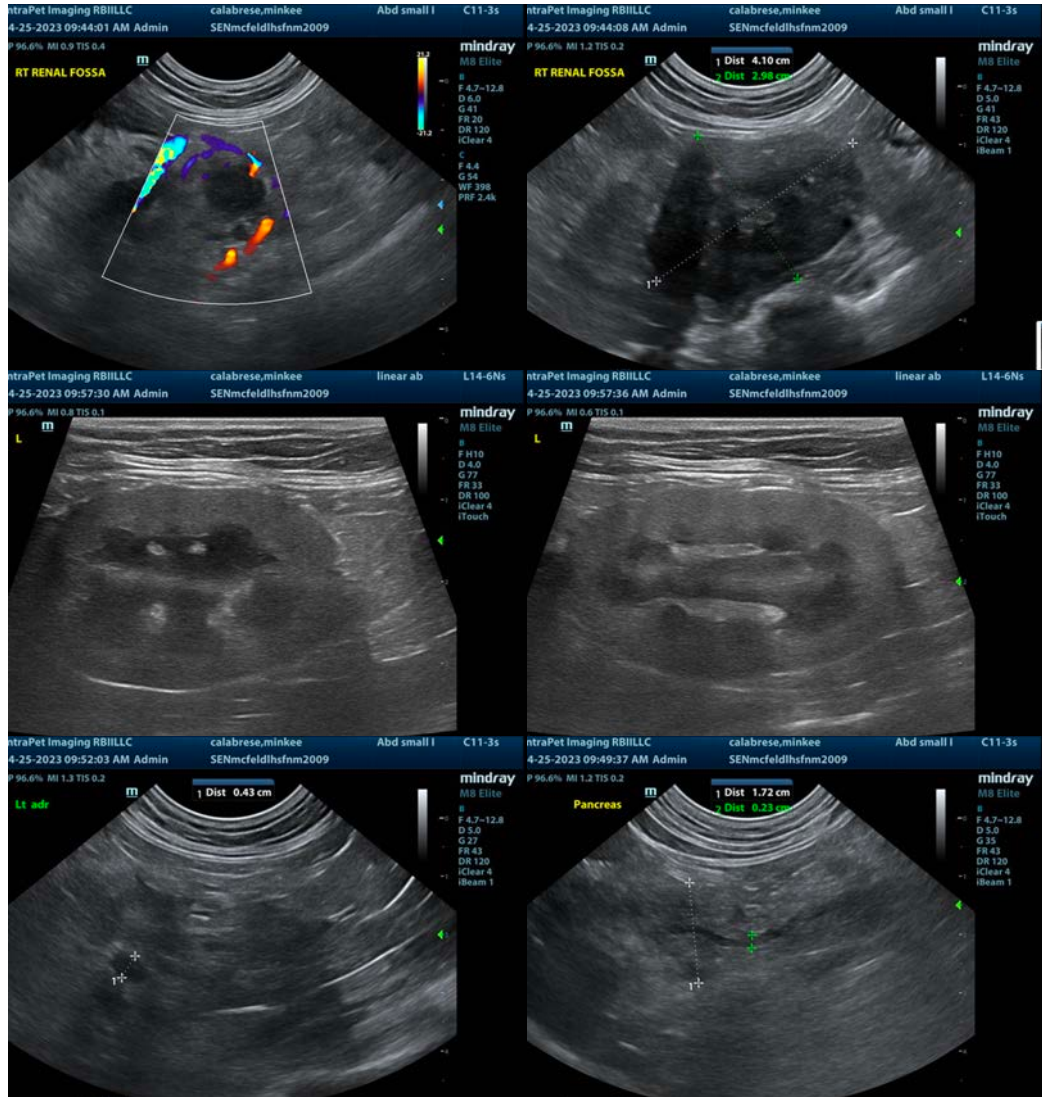
## ULTRASONOGRAPHIC FINDINGS

- Mass in the region of the right renal fossa – likely extension of the prior cystic mass noted. Cystic rupture and regional spread into the omentum with secondary pancreatitis likely. The prior sonogram revealed the left kidney image through the right renal fossa with the undifferentiated cystic mass in the near field, making the appearance of the left kidney to be the right kidney. However, the mass is likely right kidney origin and impinging upon the caudate process with current extension into the regional omentum and pancreas. Carcinoma or sarcoma likely.
- Heterogeneous changes throughout the liver with hypoechoic nodules – This may represent metastatic disease.
- Enlarged, irregular right pancreas
- Volume contracted spleen

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory surgery could be considered. However, prognosis is poor, given the omental extension and significant inflammation.





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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