



PATIENT

Becks Ratcliff

PRESENTING CLINICAL SIGNS

History: Pre-op lab work for a melanoma removal (benign) revealed a moderate lymphocytosis. Owner reports chronic vomiting with no real change, slightly decreased appetite. No weight loss noted. U/S is to rule out intestinal lymphoma.

SPECIES

Abnormal PE/Chem/CBC/UA Results: Lymphocytes 11.4 H (0.85 - 5.85 K/ μ L)

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Domestic Shorthair

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.

SEX

Neutered male

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.2 cm. The left kidney measured 4.2 cm.

AGE

13.5 years

WEIGHT

14.5 lbs

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

IMAGING PERFORMED BY

Emily Kirk

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.

HOSPITAL NAME

Shiloh AH

Liver

REFERRING VET

Dr. Alley

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

INVOICE

98146

DATE

4/8/22



PATIENT

Becks Ratcliff

Gastrointestinal

The **stomach** appeared normal. The distal small intestine was mildly thickened with reactive surrounding mesentery. Variable portions of the jejunum appeared to be involved. Slight mesenteric lymphadenopathy was noted, this is likely unrelated to the melanoma history. The largest lymph node measured 0.6 cm.

SPECIES

Feline

BREED

Domestic Shorthair

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

Distal small intestinal thickening with mesenteric lymphadenopathy, likely subacute on chronic inflammatory bowel with the possibility of emerging round cell neoplasia. This should be monitored.

AGE

13.5 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of changes consistent with melanoma. Given the elevated lymphocytes CBC path review +/- PCR for lymphoma would be appropriate. Full thickness biopsies would be necessary upon the distal small intestine for a definitive diagnosis. However, portions of small intestine do meet early neoplastic criteria.

WEIGHT

14.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Kirk

HOSPITAL NAME

Shiloh AH

REFERRING VET

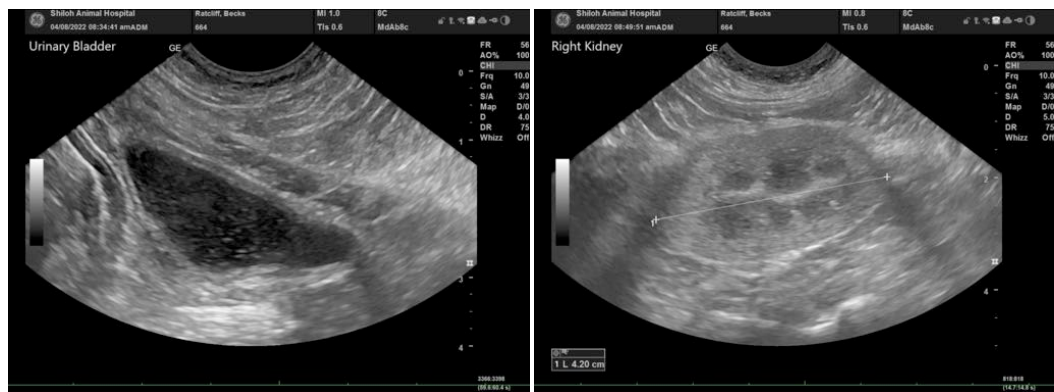
Dr. Alley

INVOICE

98146

DATE

4/8/22





PATIENT

Becks Ratcliff

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13.5 years

WEIGHT

14.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Kirk

HOSPITAL NAME

Shiloh AH

REFERRING VET

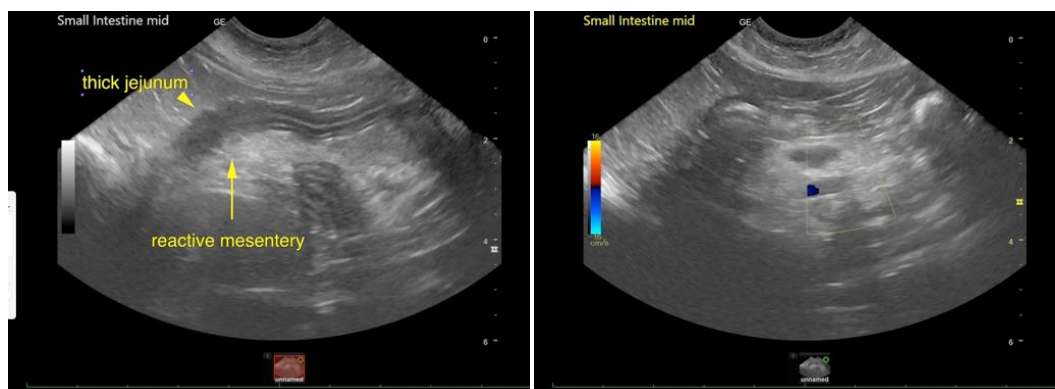
Dr. Alley

INVOICE

98146

DATE

4/8/22





PATIENT

Becks Ratcliff

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13.5 years

WEIGHT

14.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Kirk

HOSPITAL NAME

Shiloh AH

REFERRING VET

Dr. Alley

INVOICE

98146

DATE

4/8/22

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
info@SonoPath.com