



**PATIENT**

Missy Wudkevich

**SPECIES**

Feilne

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

**AGE**

9 years

**WEIGHT**

4.9 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Jameson

**HOSPITAL NAME**

Sylvan Lake VC

**REFERRING VET**

Dr. Hodges

**INVOICE**

30504

**DATE**

5/18/22

**PRESENTING CLINICAL SIGNS**

Diagnosed with pancreatitis on April 22. Not eating well, has lost 1.8 lbs since April 22. Has dental disease, was scheduled for COHAT today but weight loss had us concerned and we proceeded with repeat bloodwork and further work up.

Abnormal PE/Chem/CBC/UA Results: fPL - abnormal. SDMA 30 ug/dL. UREA 3.7 mmol/L. CHOL 0.35mmol/L ALKP 280 U/L GLOB 57 g/L. Rest of chem WNL. CBC - High Retic, MCV, MCH, MCHC all low.

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**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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.9 cm. The left kidney measured 3.9 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. The left adrenal gland measured 0.4 cm.

**Spleen**

The **spleen** presented multi-focal, hyperechoic lipogranulomatous type changes. The cranial pole of the spleen revealed a 3.0 cm, irregular, folding and swelling of the spleen. This created a mass effect. This may be related to the ileocecal junction mass.

**Liver**

The **liver** was slightly hyperechoic to the falciform fat. The parenchyma was uniform. The gallbladder and common bile duct were unremarkable with a minor amount of debris.

**Gastrointestinal**



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The stomach was empty with no evidence of pathology. The curvilinear patterns were maintained. Mixed, hypoechoic intestinal 4.6 cm mass was noted at the ileocecal junction. The mass appears to involve the distal ileum, ileocecal junction and proximal colon. Regional lymphadenopathy was noted and measured up to 0.8 cm. Regional hyperechoic mesentery was also present.

**SPECIES**

Feilne

**Pancreas**

**BREED**

Domestic Shorthair

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**

Spayed Female

**ULTRASONOGRAPHIC FINDINGS**

Ileocecal junction mass with regional lymphadenopathy. Carcinoma versus lymphoma, minor potential for granulomatous disease.

**AGE**

9 years

Irregular splenic swelling. Hyperechoic, lipogranulomatous nodule in the middle of the splenic swelling.

Otherwise, unremarkable abdomen.

**WEIGHT**

4.9 kg

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Clean resection may be challenging especially given the regional lymph nodes involved. FNA of the spleen and intestinal mass is recommended. Multi-centric round cell neoplasia is suspected.

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**PATIENT**

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**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

**AGE**

9 years

**WEIGHT**

4.9 kg

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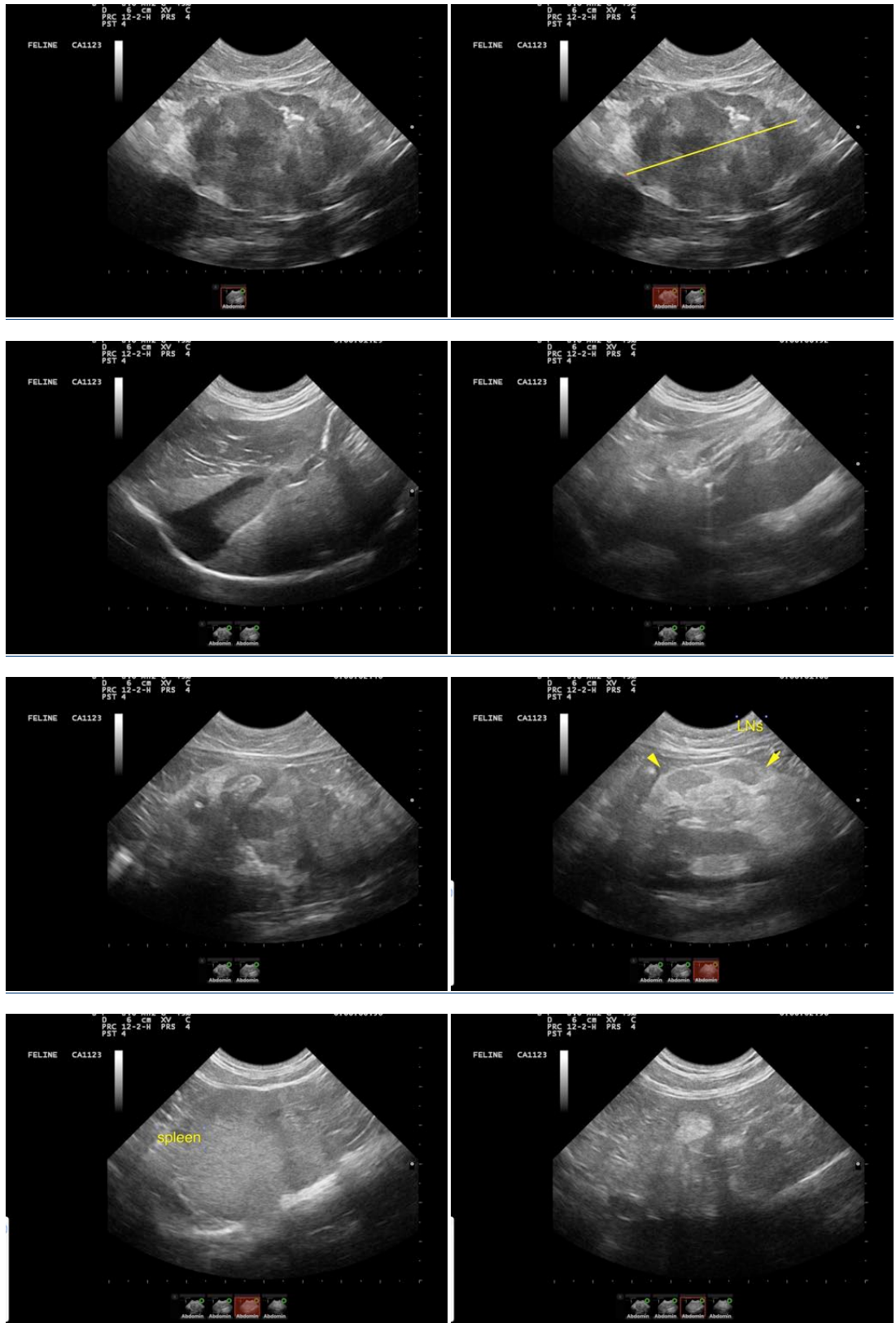
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**PATIENT**

Missy Wudkevich

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.

**SPECIES**

Feilne

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.

**BREED**

Domestic Shorthair

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

**SEX**

Spayed Female

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