



**PATIENT**

Echo Campbell

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

5.5 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Donna Markland, DVM

**HOSPITAL NAME**

Island Mobile Paws EH

**REFERRING VET**

Central Island

**INVOICE**

15017

**DATE**

5/2/22

**PRESENTING CLINICAL SIGNS**

History: Transferred to emergency with dyspnea. Over 50 mL serous fluid removed from chest On PE, a large cranial abdominal mass was also palpated. Bloodwork from rDVM on May 1st shows hypercalcemia and regenerative anemia.

Abnormal PE/Chem/CBC/UA Results: May 1, 2022 Calcium=3.68 (1.95-2.83) HCT= 26.5% (30.3-52.3)

**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** were slightly swollen and mildly irregular, particularly the caudal pole of the left kidney with enhanced surrounding mesentery. The left kidney measured 4.6 cm. The right kidney measured 4.63. cm.

**Adrenal Glands**

The regions of the **adrenal glands** were unremarkable.

**Spleen**

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

**Liver**

The **liver** revealed coarse architecture with focal hypoechoic nodules, consistent with metastatic disease. The **gallbladder** was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

**Gastrointestinal**

The **stomach** itself was unremarkable. The distal small intestine revealed an infiltrative mass. Wall thickness measured up to 1.27 cm. The mass measured approximately 6.0 cm. Regional free fluid was noted.

**Pancreas**

The **pancreas** was heterogeneous and mildly irregular.

**Free Abdomen**

A mild amount of **free fluid** was noted in the abdomen. Regional distorted lymph nodes noted with hypoechoic undifferentiated tissue proliferation. The hypoechoic undifferentiated tissue appeared to involve portions of the pancreas.

**Other**



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Non-cardiogenic pleural effusion was noted through the diaphragm with volume contracted left heart.

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- Dual cavity neoplasia, lymphoma or similar neoplasia likely, involving the intestine, lymph nodes, probable pancreas, probable liver
- Swollen irregular kidneys
- Volume contracted spleen
- Non-cardiogenic pleural effusion
- Volume contracted left heart

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Evaluation of the intestinal cytology warranted. Immediate chemotherapeutic intervention warranted. Palliative pleurocentesis and cytospin could be considered to confirm suspicion of dual cavity neoplasia.

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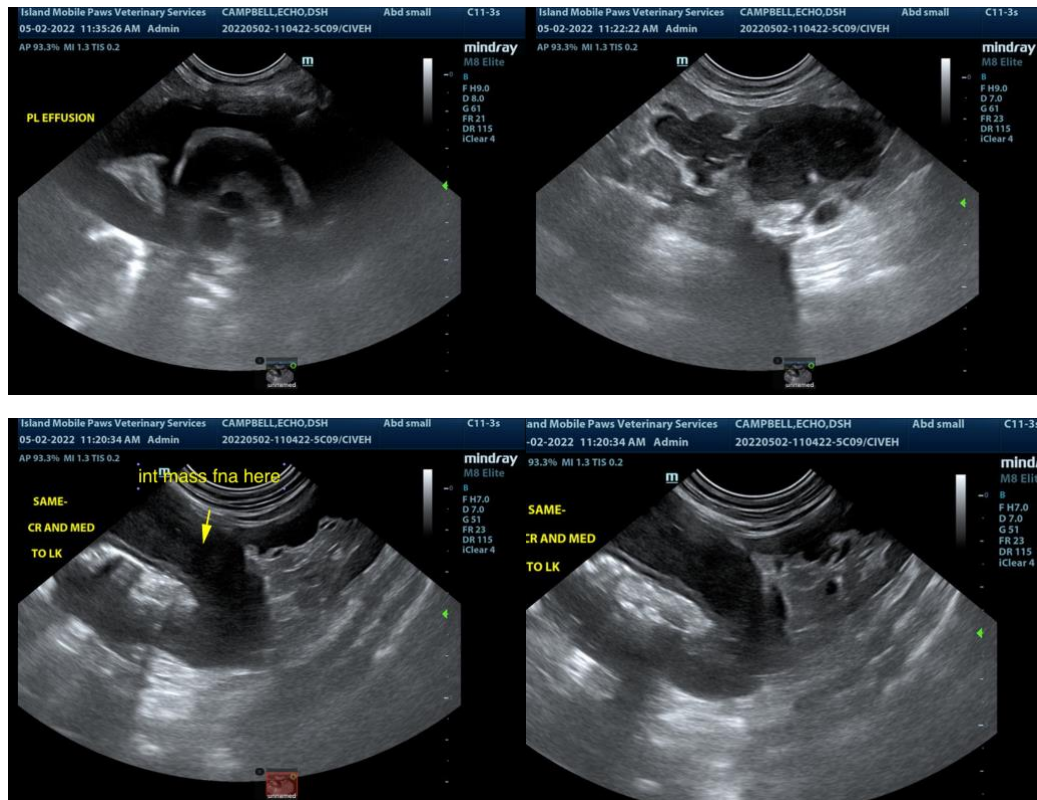
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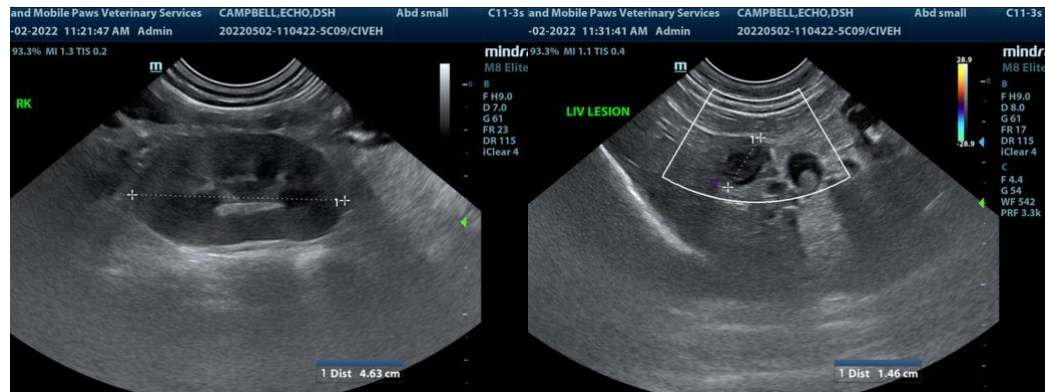
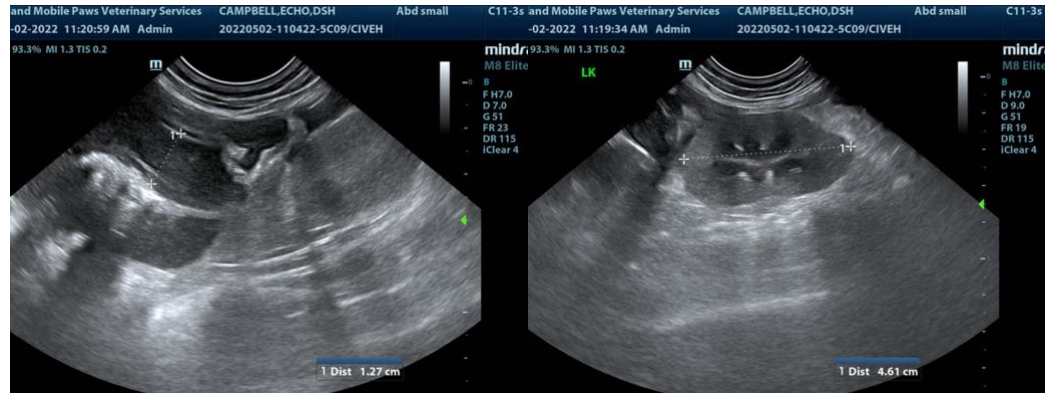
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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