

**DATE**

5/20/22

PRESENTING CLINICAL SIGNS

5/5/22 not eating well. 5/20/22 still not eating well, losing weight.

Current Medications: Cerenia 0.5mL SQ, Mirataz.

Lab Results: 5/5/22 General Health Profile NSF. FPL normal. CBC: HCT 37%, platelets 34,000 (est is decreased), anemic, thrombocytopenia.

Radiographs: Possible mid-abdominal mass.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brilhart, RDMS.

PATIENT

Emily Hodson

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

10/16/11

WEIGHT

12.13 lbs

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**

Jacksonville VH

REFERRING VET

Dr. Kablis

INVOICE

30601

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. Cortical infarct was noted at the dorsal cortex of the right kidney with pinpoint mineralization. The left kidney measured 3.97 cm. The right kidney measured 3.87 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.

Spleen

The **spleen** was enlarged, micronodular and swollen measuring up to 1.3 cm. The spleen was folded upon itself and irregular contour with an overt parenchymal mass that measured 4.3 x 3.0 cm.

Liver

The **liver** was swollen and irregular with increased portal markings. Lobar biliary mineralization was noted. The gallbladder and common bile duct were unremarkable.

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 base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct was dilated and measured 0.18 cm.

Free Abdomen

A slight amount of free fluid was noted adjacent to the spleen.

ULTRASONOGRAPHIC FINDINGS

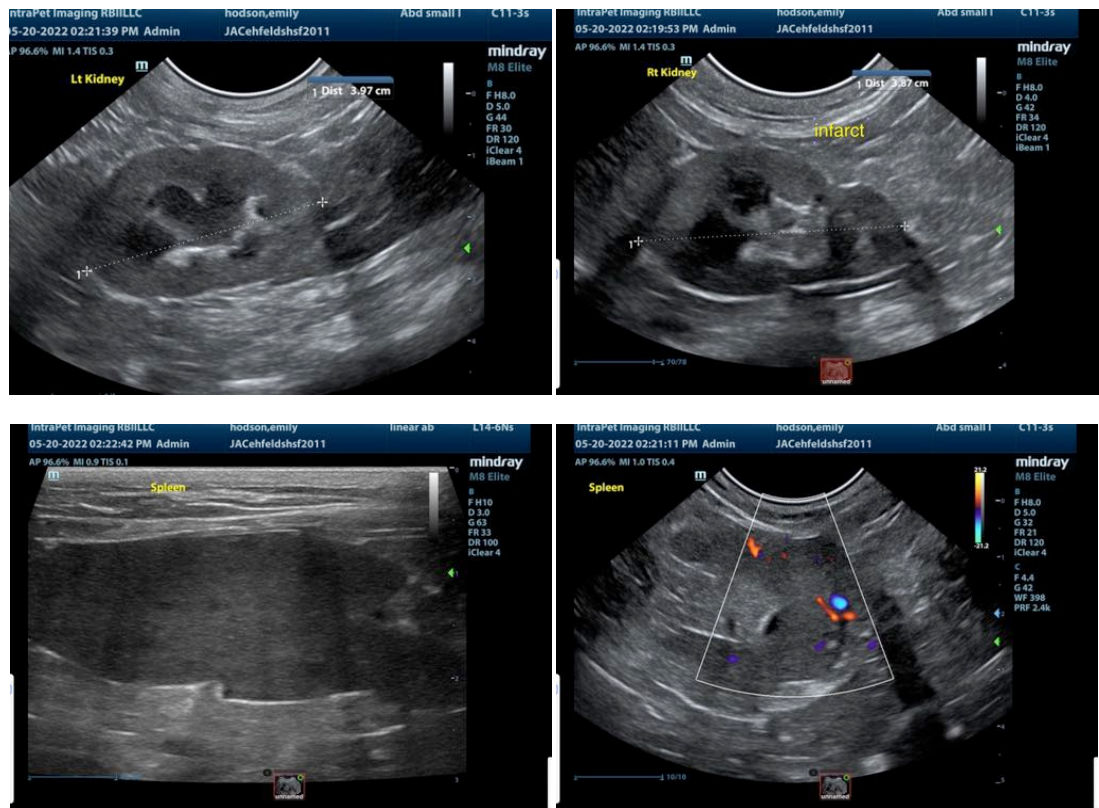
Splenic mass and infiltrative pattern, probable hepatic involvement.

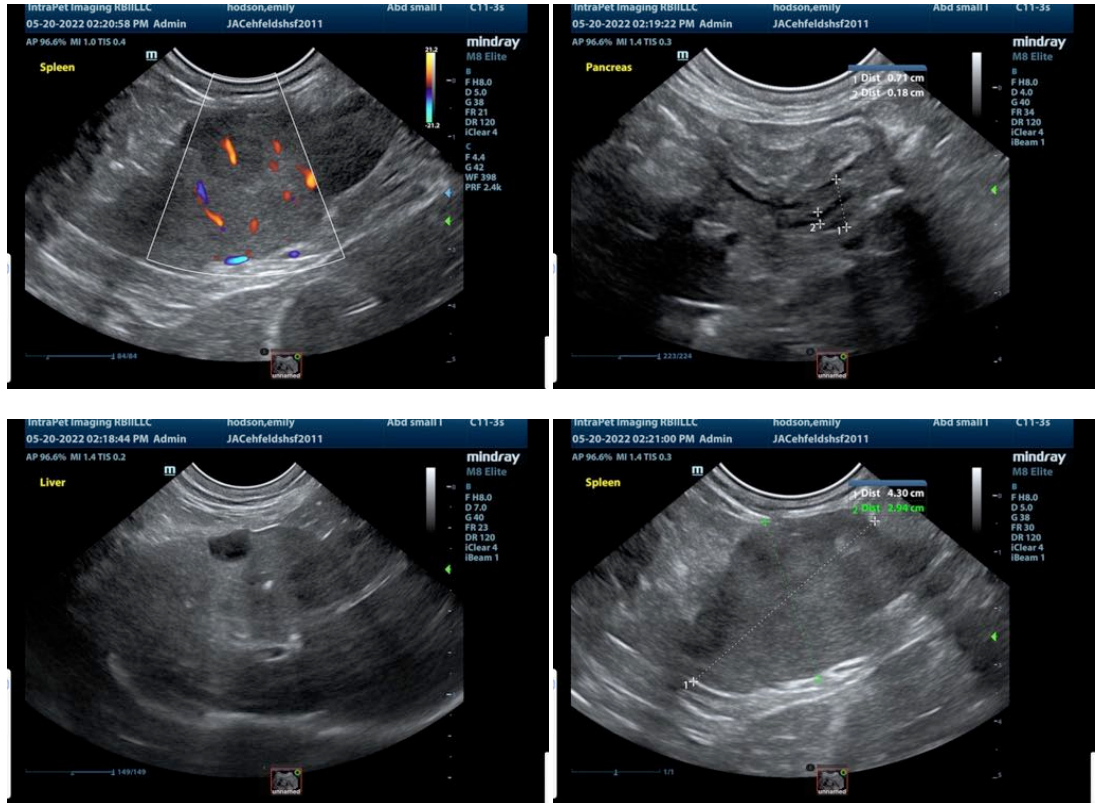
Swollen, irregular liver.

Renal infarcts and mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Coagulation panel and 25-gauge FNA of the spleen and liver is indicated assuming that the hematocrit is at least 20. Splenohepatic neoplasia/lymphoma is likely with secondary infarcts and dystrophic changes.





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.

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