



PATIENT PRESENTING CLINICAL SIGNS

Squeaky Demers

weight loss, poor appetite, Hx of vomiting in January - had full work up including ultrasound - had been doing better, but struggling again, though no vomiting Primary Question/Differential to Be Answered in This Exam scanning for underlying disease to cause weight loss and anemia
Abnormal PE/Chem/CBC/UA Results: HCT = 22 thousand, Neutrophil count = 20 thousand

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DSH

Urinary System

SEX

Neutered Male

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.

AGE

11 Years

The **kidneys** presented mild increased cortical echogenicity, similar to the prior sonogram. Largely expected age related changes. The left kidney measured 4.64 cm. The right kidney measured 4.64 cm.

WEIGHT

9.9 Pounds

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 0.44 cm. The left adrenal gland measured 0.44 cm.

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

Spleen

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 were noted.

IMAGING PERFORMED BY

Jenna Walsh, CVT

Liver

The **liver** presented coarse architecture and increased portal markings. Slight areas of free fluid and hypoechoic nodular changes noted. The gallbladder was unremarkable.

HOSPITAL NAME

Q Street AH

Gastrointestinal

The juncture between the cardia and **pyloric** antrum presented progressive thickening with loss of mural detail in a region of 3.0 cm x 2.0 cm. The small intestine and colon were unremarkable.

REFERRING VET

Dr. Bretschneider

Pancreas

The **pancreas** revealed slight duct dilation at 2.0 mm. Slight coarse architecture, largely age related.

INVOICE

38018

Free Abdomen

DATE

5/26/22

A focal hypoechoic lymph node was noted. This was not visible on the prior sonogram and measures approximately 1.0 cm with irregular contour.



PATIENT **ULTRASONOGRAPHIC FINDINGS**

Squeaky Demers

- Progressive gastric thickening with regional lymphadenopathy.
- Coarse, irregular liver with free fluid – strong concern for underlying lymphoma.

SPECIES

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Endoscopy would be warranted to obtain biopsies, or ultrasound guided FNA could be considered. However, this may be difficult to exfoliate. If accessible, FNA of the regional lymph nodes could be considered, or surgical biopsies. Screening FNA of the liver recommended. This represents a significant progression of both the liver and gastric presentation

BREED

DSH

SEX

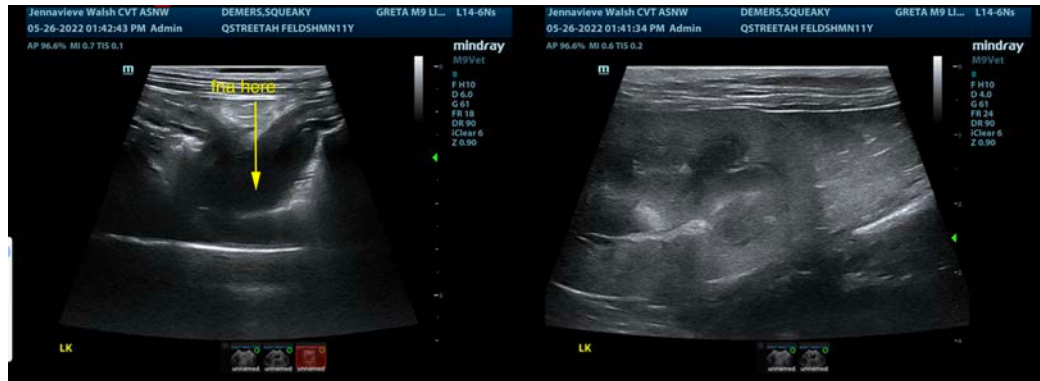
Neutered Male

AGE

11 Years

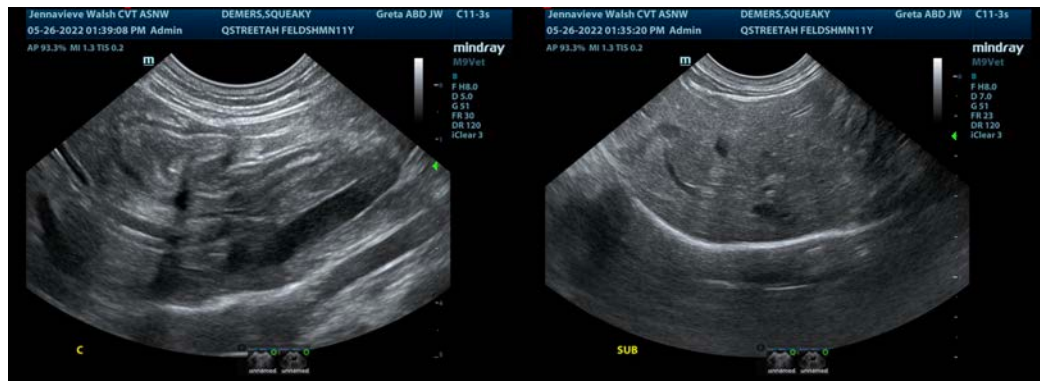
WEIGHT

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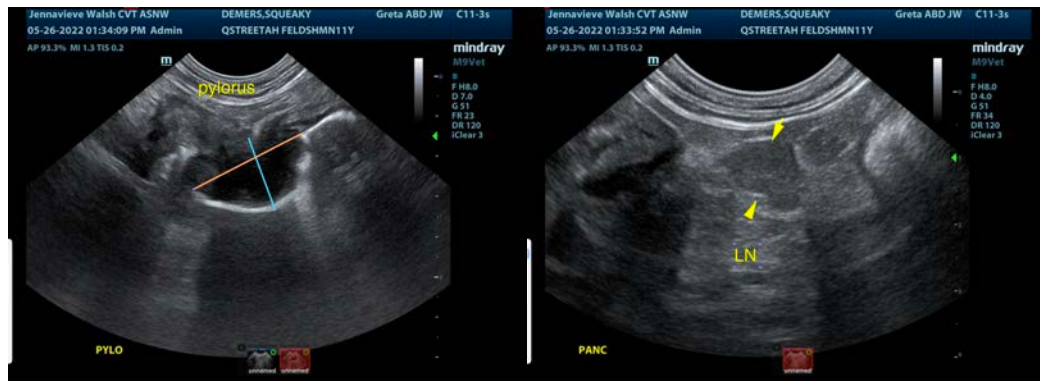


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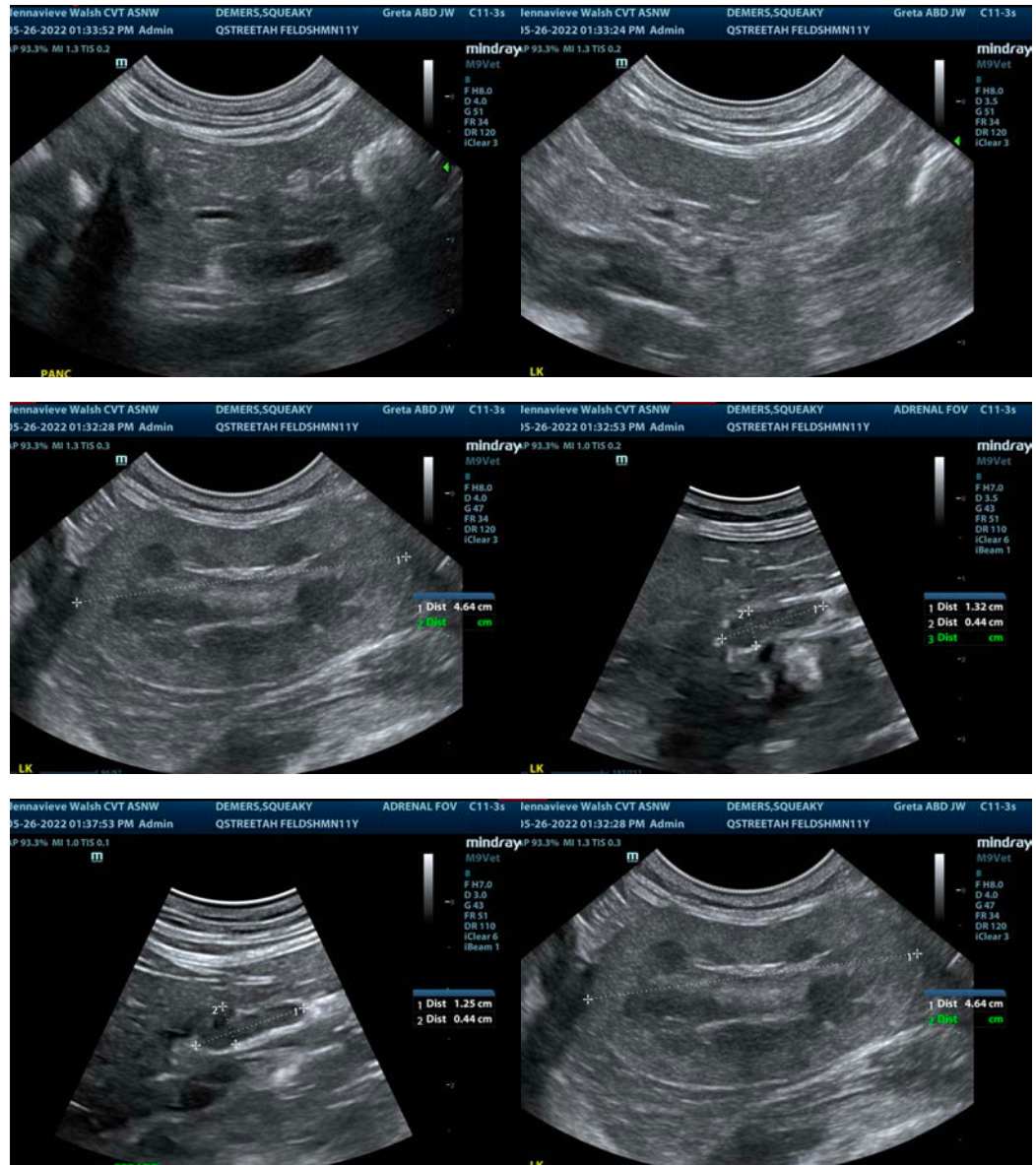
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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