



PATIENT

Pokie Baum

PRESENTING CLINICAL SIGNS

Possible abdominal mass.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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.

BREED

Domestic Shorthair

SEX

Spayed Female

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. Mineralization was noted in the kidneys. Slight cortical infarcts were noted. The left kidney measured 3.65 cm with pyelectasia that measured 0.5 cm with echogenic debris. The right kidney revealed pyelectasia that measured 0.56 x 0.45 cm. The right kidney measured 3.51 cm.

AGE

16 years

WEIGHT

8.7 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. The left adrenal gland measured 0.36 cm. The right adrenal gland measured 0.44 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner.

IMAGING PERFORMED BY

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Mobile Vet Unit

Liver

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.

REFERRING VET

Dr. Nachamie

INVOICE

30825

DATE

5/31/22



PATIENT

Gastrointestinal

Pokie Baum

The **stomach** presented progressively shadowing gastric material. The jejunum revealed a focal, intestinal mass that measured 2.0 x 4.0 cm with an infiltrative pattern. The remainder of the intestinal tract was unremarkable.

SPECIES

Feline

Pancreas

BREED

Domestic Shorthair

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 and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

16 years

Focal intestinal mass, suspect localized lymphoma.

Hairball density in the stomach.

Mild to moderate degenerative renal changes with infarcts.

WEIGHT

8.7 lbs

Age related pancreatic and hepatic changes.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Resection and anastomosis of the intestinal tract with evacuation of the stomach would be indicated. Intraoperative ultrasound to delineate the infiltrative pattern within the intestinal wall would be ideal. Chest radiographs are warranted prior to surgery. FNA of the intestinal mass could be considered with medical approach. Likely small cell lymphoma given the patient's age and sonographic presentation. There is a minor potential for complicated inflammatory bowel/granulomatous disease.

IMAGING PERFORMED BY

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Mobile Vet Unit

REFERRING VET

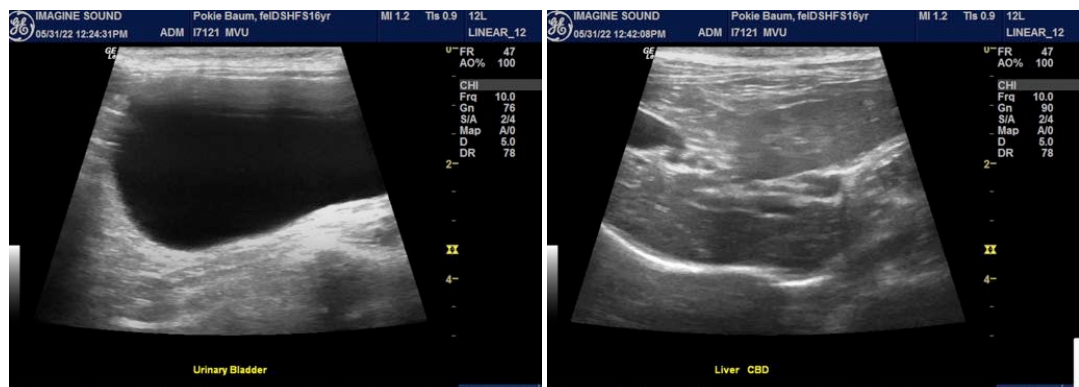
Dr. Nachamie

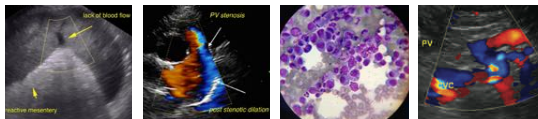
INVOICE

30825

DATE

5/31/22





PATIENT

Pokie Baum

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

16 years

WEIGHT

8.7 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Mobile Vet Unit

REFERRING VET

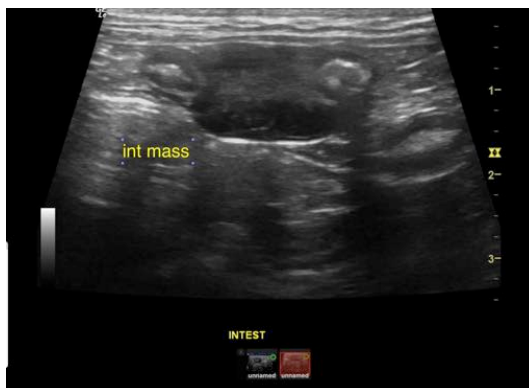
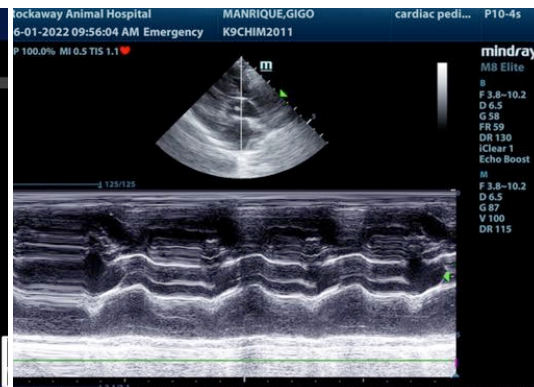
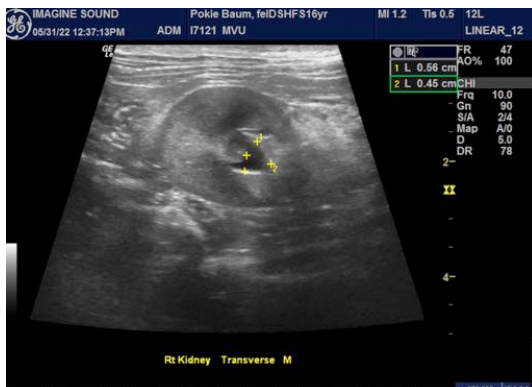
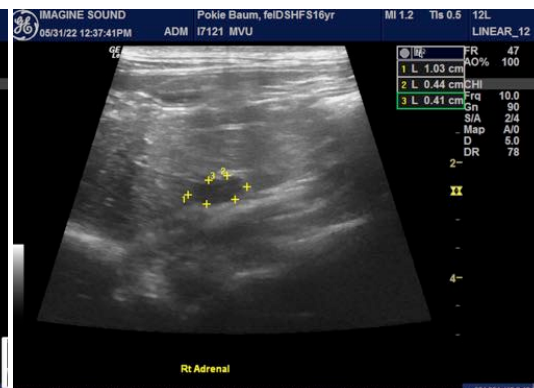
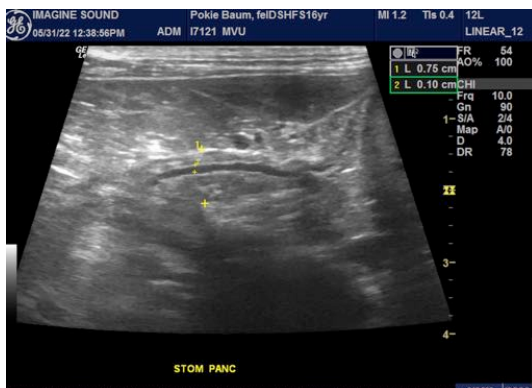
Dr. Nachamie

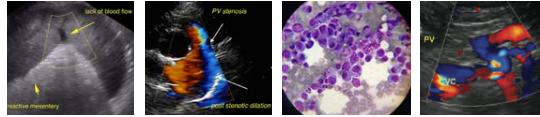
INVOICE

30825

DATE

5/31/22





PATIENT

Pokie Baum

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

Feline

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
Eric.Lindquist@SonoPath.com

SEX

Spayed Female

AGE

16 years

WEIGHT

8.7 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Mobile Vet Unit

REFERRING VET

Dr. Nachamie

INVOICE

30825

DATE

5/31/22