



PATIENT

George Dorau

SPECIES

Feline

BREED

Persian X

SEX

Spayed Female

AGE

15.5 Years

WEIGHT

7.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sharon Rosenberg

HOSPITAL NAME

London Cat Clinic

REFERRING VET

Sharon Rosenberg

INVOICE

15095

DATE

5/6/22

PRESENTING CLINICAL SIGNS

History: 2 day hx of sudden onset vomit (pink tinged) and developed loose stool then diarrhea with blood 1 day later. Anorexic. mcs still good. Abd a bit larger than 6 weeks prior and abnormal area on xray - ventral cranial abdomen ring-like opacity (gut loop suspected thickened). Had prior event similar 6 weeks prior (just vomit, not blood tinged and no D, resolved with symptomatic care with cerenia and mirtazapine).

Abnormal PE/Chem/CBC/UA Results: MCS good, mild dehydration, no fever, punky, probable gut loop palpated cranial abdomen, sore in this area. Previous time had mild R submand In enlargement which has resolved. No urinary signs (sand noted on US). Previous bloods (6 weeks ago) all N incl PLI. Chem 8 (liver/kid/proteins) and Lytes ess N (sl low K). Rest pending.

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** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.68 cm. The right kidney measured 3.68 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 0.29 cm. The right adrenal gland measured 0.29 cm.

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. The spleen measured 1.17 cm.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



PATIENT

George Dorau

SPECIES

Feline

BREED

Persian X

SEX

Spayed Female

AGE

15.5 Years

WEIGHT

7.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sharon Rosenberg

HOSPITAL NAME

London Cat Clinic

REFERRING VET

Sharon Rosenberg

INVOICE

15095

DATE

5/6/22

Gastrointestinal

The **stomach** itself was unremarkable. Variable intestinal thickening noted with hypertrophied muscularis and reactive mesentery. Some areas of early mural detail loss in this patient with trace free fluid. The free fluid is likely owing to mesenteric inflammation and/or lymphatic obstruction.

Pancreas

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.

Free Abdomen

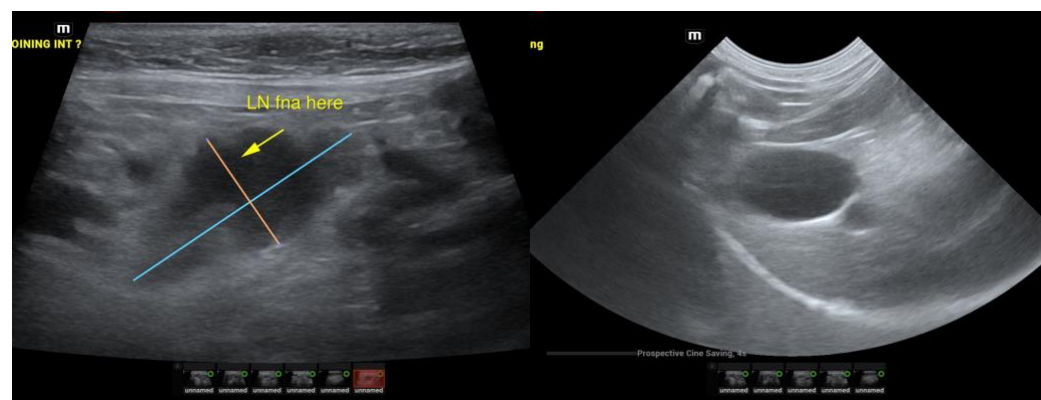
Mixed hypoechoic partially distorted **lymph nodes** noted in this patient. The largest distorted lymph node measured 2.7 cm x 1.3 cm. Enhanced surrounding mesentery noted. Smaller lymph nodes also enlarged. An epigastric lymph node was slightly enlarged, measuring 0.28 cm.

ULTRASONOGRAPHIC FINDINGS

- Diffuse intestinal thickening with regional areas of loss of mural detail and hypertrophied muscularis
- Mesenteric lymphadenopathy, distorted contour
- Splenic enlargement
- Reactive mesentery
- Age-related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Emerging round cell neoplasia/lymphoma or mast cell disease is a strong concern. Ultrasound guided FNA of the largest mesenteric lymph nodes and spleen recommended for further definition. Severe inflammatory bowel with lymphadenitis possible. Dry form FIP possible. Sampling is essential in this patient. Prognosis is guarded. Full thickness intestinal lymph node biopsies are also an option, however, the definitive diagnosis may occur with splenic and lymph node FNA. There are no lesions in the intestine that are large enough to allow for definitive FNA/cytology results.





PATIENT

George Dorau

SPECIES

Feline

BREED

Persian X

SEX

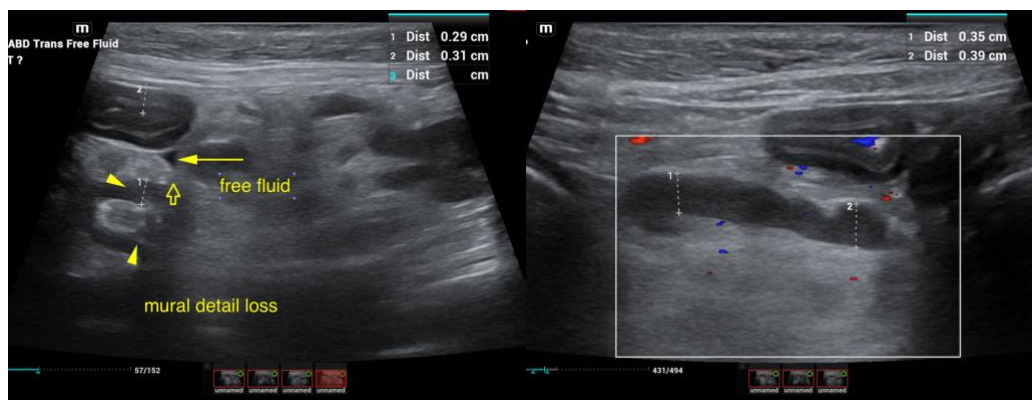
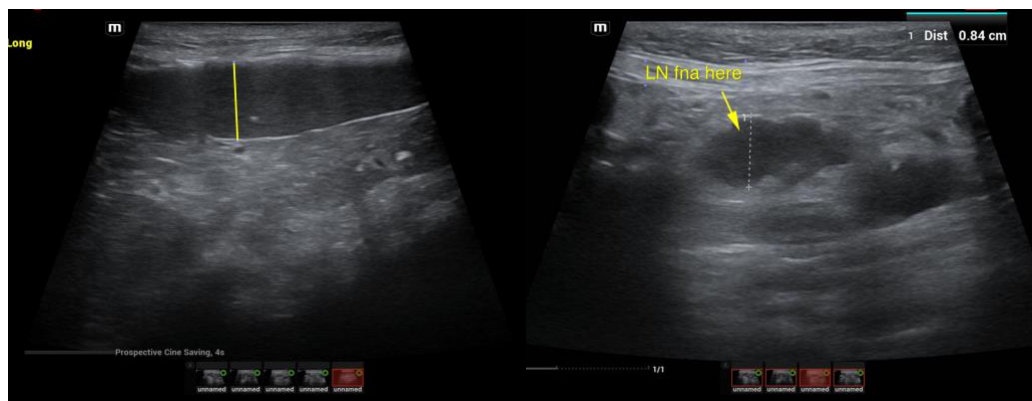
Spayed Female

AGE

15.5 Years

WEIGHT

7.7 Pounds



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sharon Rosenberg

HOSPITAL NAME

London Cat Clinic

REFERRING VET

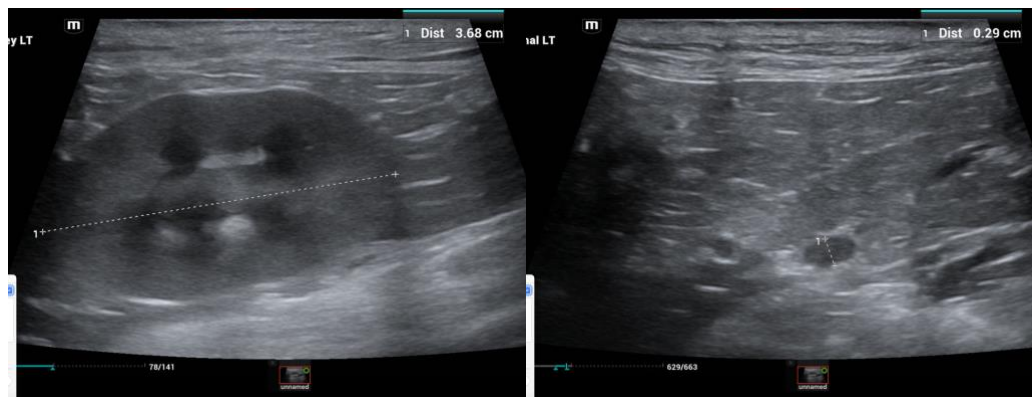
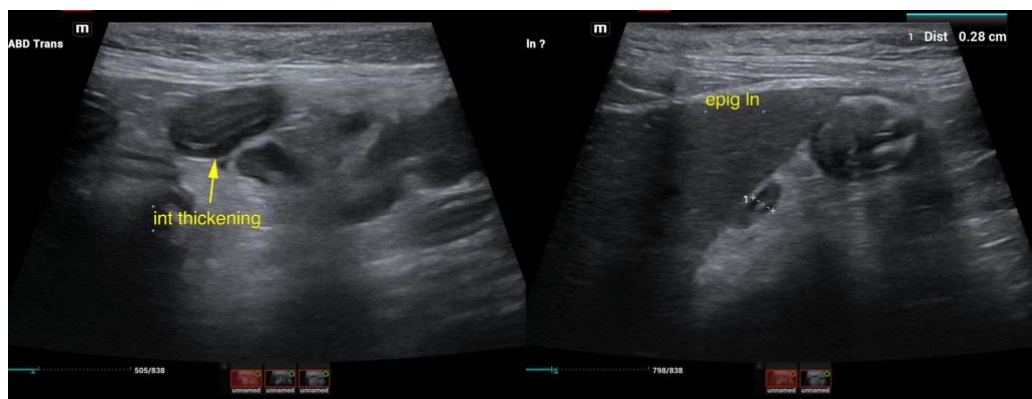
Sharon Rosenberg

INVOICE

15095

DATE

5/6/22





PATIENT

George Dorau

SPECIES

Feline

BREED

Persian X

SEX

Spayed Female

AGE

15.5 Years

WEIGHT

7.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sharon Rosenberg

HOSPITAL NAME

London Cat Clinic

REFERRING VET

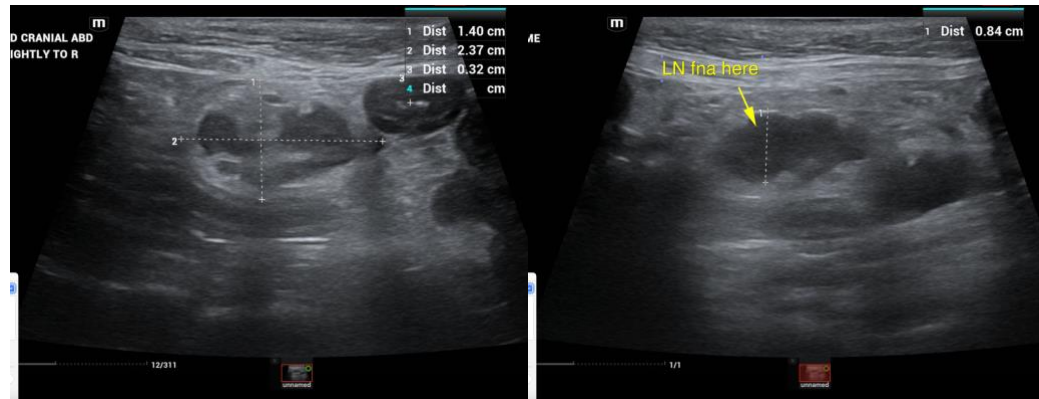
Sharon Rosenberg

INVOICE

15095

DATE

5/6/22



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