



## PATIENT

Mr. Chubbs McCloskey

## SPECIES

Ferret

## BREED

Ferret

## SEX

Neutered Male

## AGE

7.5 Years

## WEIGHT

2.7 Pounds

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

## IMAGING PERFORMED BY

Heidi Putnam,  
LVT/CVT

## HOSPITAL NAME

Northwest Exotic Pet  
Vet

## REFERRING VET

Dr. Ramsell

## INVOICE

37005

## DATE

5/8/26

## PRESENTING CLINICAL SIGNS

History: Lethargic; constantly shaking/shivering; minimally moving. Takes syringe feedings okay, but not really eating on own.

Abnormal PE/Chem/CBC/UA Results: Elevated ALT (509 IU/L) (somewhat chronic) , Alk Phos (148 IU/L) and GGT (52 IU/L); Recently elevated BUN (58 mg/dL) CBC okay.

## 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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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. Pyelectasia was noted in the right kidney, measuring 0.27 cm. A right renal cyst was noted, measuring 1.1 cm at the mediocaudal cortex. Calculi were also noted in the right kidney. The right kidney measured 3.4 cm. Polycystic left kidney was also noted. Cysts in the left kidney measured 0.72 cm each. The left kidney measured 3.4 cm.

### *Adrenal Glands*

The **right adrenal gland** was 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 0.42 cm.

A **left adrenal mass** was noted in this patient with mild phrenic vein invasion. The mass measured 1.1 cm.

### *Spleen*

The **spleen** was enlarged, irregular, and nodular with hypoechoic scalloping contour. Micronodular "honeycomb" type reticular splenic pattern was noted.

### *Liver*

The **liver** revealed increased portal markings and a mild amount of remodeling. A hypoechoic nodule was noted in the left lateral liver, measuring 0.76 cm. 25-gauge FNA is indicated. 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.



## PATIENT

## Pancreas

Mr. Chubbs McCloskey

The **pancreas** was enlarged and irregular with undulating contour and enhanced mesentery. A hypoechoic nodule was noted in the right base of the pancreas, measuring 0.26 cm.

## SPECIES

## Free Abdomen

Ferret

Variable **lymph nodes** were enlarged and somewhat rounded, measuring 0.5 cm. Slight amounts of free fluid and enhanced mesentery were noted.

## BREED

Ferret

## ULTRASONOGRAPHIC FINDINGS

## SEX

- Left adrenal gland mass
- Enlarged, irregular, nodular spleen
- Polycystic kidneys/moderate degenerative renal changes
- Pancreatic nodule
- Liver nodules
- Variable enlarged, rounded lymph nodes
- Slight amounts of free fluid
- Enhanced mesentery

Neutered Male

## AGE

7.5 Years

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## WEIGHT

2.7 Pounds

There are multiple issues in this patient. FNAs of the spleen, accessible lymph nodes and liver nodules are warranted for staging purposes. Some level of pancreatitis is likely. The left adrenal mass is consistent with carcinoma given the phrenic vein invasion. If hypoglycemia is an issue, then the pancreatic nodule may be an insulinoma as well versus nodular hyperplasia/zymogen hyperplasia.

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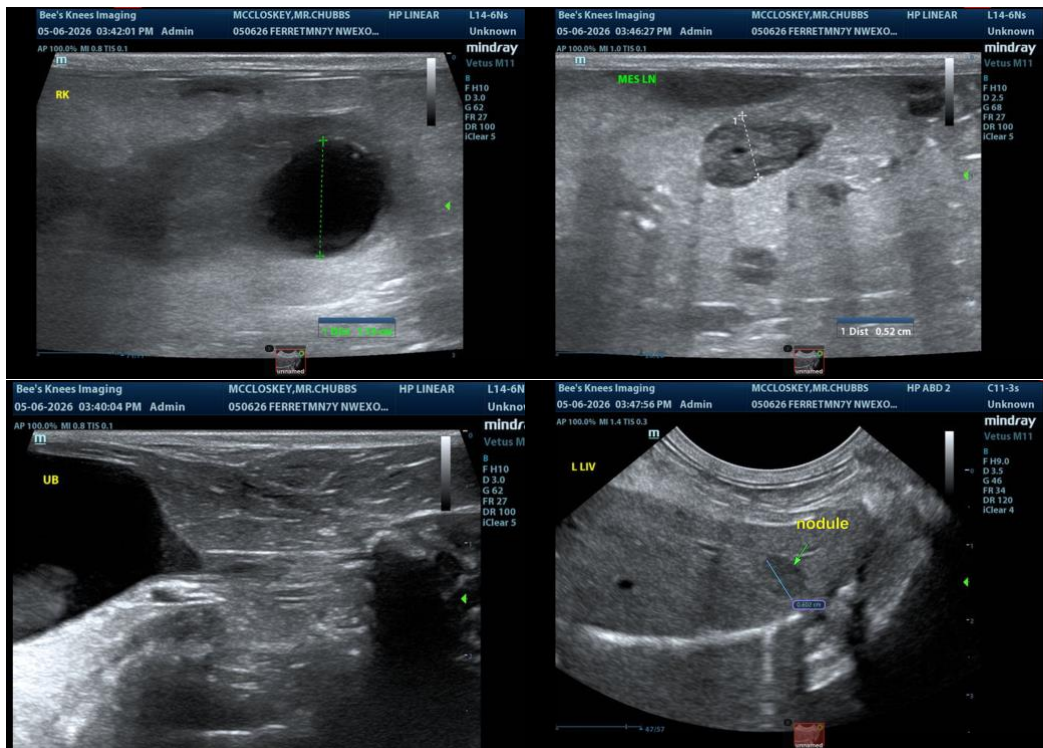
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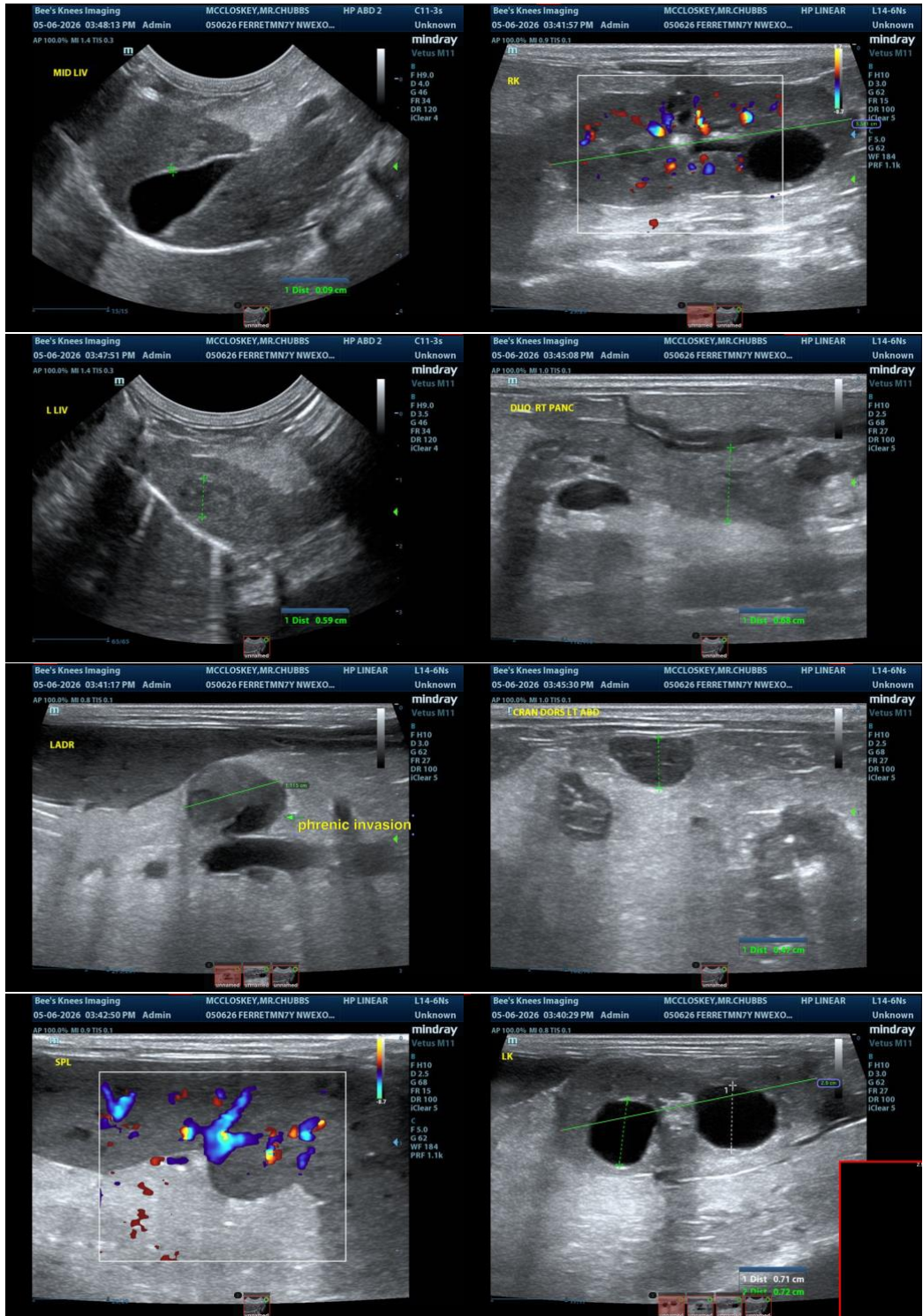
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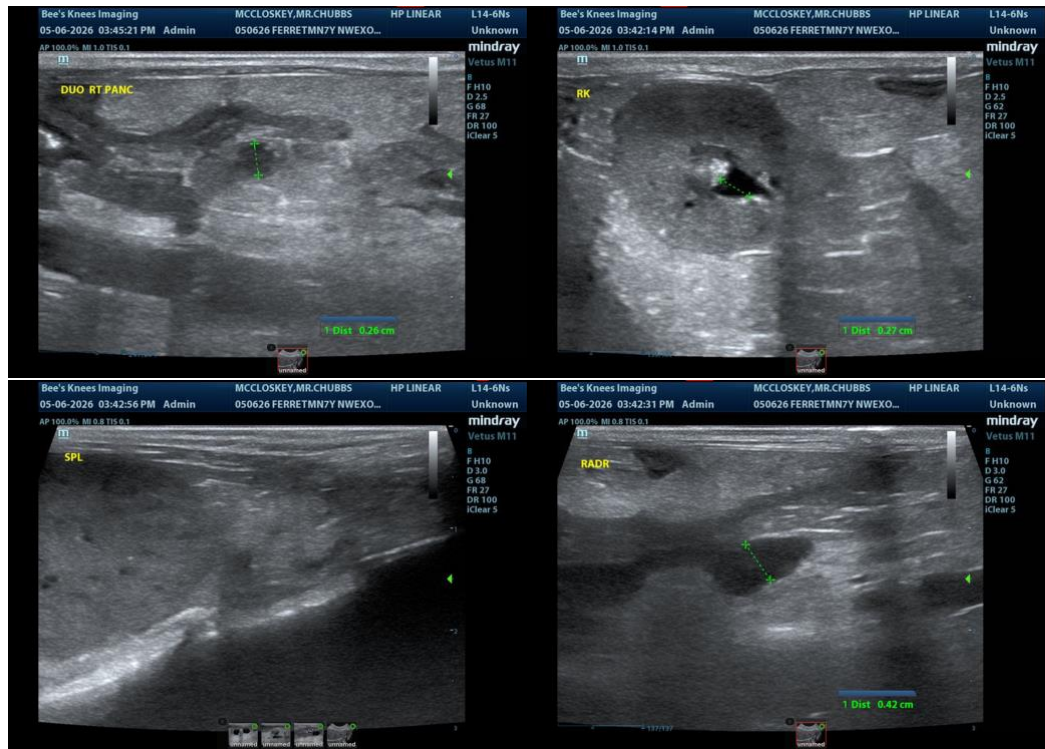
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,  
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[info@SonoPath.com](mailto:info@SonoPath.com)