



PATIENT

Madison Hoffman

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

12 years

WEIGHT

8.3 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Green

HOSPITAL NAME

Stanglein VC

REFERRING VET

Dr. DiNello-Schleicher

INVOICE

44749

DATE

6/15/23

PRESENTING CLINICAL SIGNS

P had a dental and mass removal (Grade 3 mammary adenocarcinoma with metastasis to regional lymph node) on May 24th. Chest rads clear at the time of surgery. P was seen 6/12 for two day history of vomiting and lethargy- sx sites appear to have healed well, mild otitis (yeast, cocci), no obvious pain or masses on abd palpation. SQ Fluids and cerenia inj given 6/12

Abnormal PE/Chem/CBC/UA Results: Pre-op BW on 5/12 demonstrated mildly elevated ALT 327 (2x high normal), AST 103 (1.5x high normal), ALP 75 (1.5x high normal) but no clinical signs, repeat bloodwork on 6/12 demonstrated normal ALP, ALT now 503 (~4-5x high normal, K 3.3 (L). Chest and cranial abdomen appear normal on rads.

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 and appeared normal. 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** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Moderate hyperechoic medullary rim sign was noted on the right kidney and measured 5.01 cm. The left kidney measured 4.75 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 right adrenal gland measured 0.25 cm.

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 was noted.

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. Hyperechoic, lipogranulomatous type change was noted and measured 0.5 cm with a separate one that measured 0.7 cm. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder and common bile duct were unremarkable.



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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. 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.

ULTRASONOGRAPHIC FINDINGS

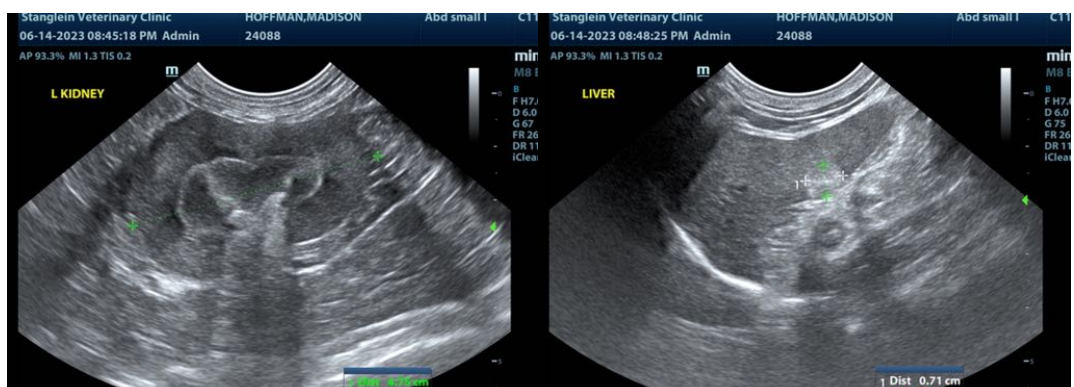
Largely geriatric abdomen with subjectively benign hyperechoic liver nodules, likely lipid plaques.

Chronic interstitial nephrosis pattern with medullary rim sign, which is idiopathic, but can be related to FIP, occasionally lymphoma, yet there is no indication of that. There was no evidence of metastatic disease in this patient.

Non-specific inflammatory hepatopathy with mild chronic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA can be considered for further definition. Neoplasia is not evident nor suspected in the abdomen.





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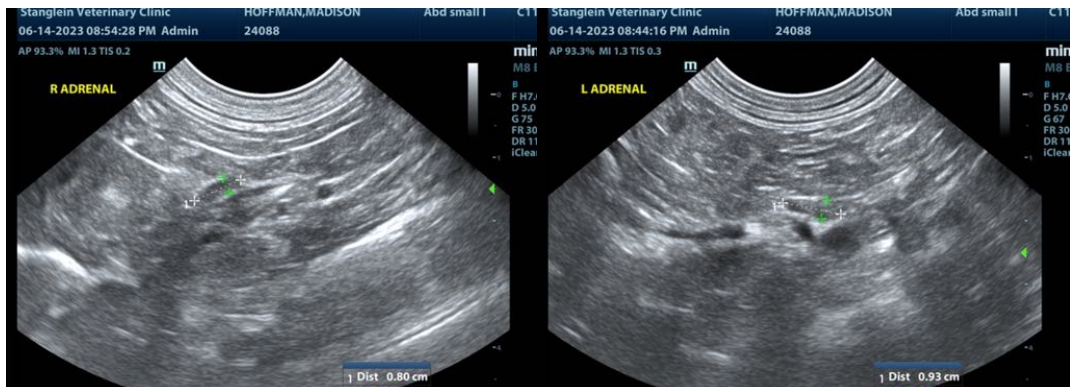
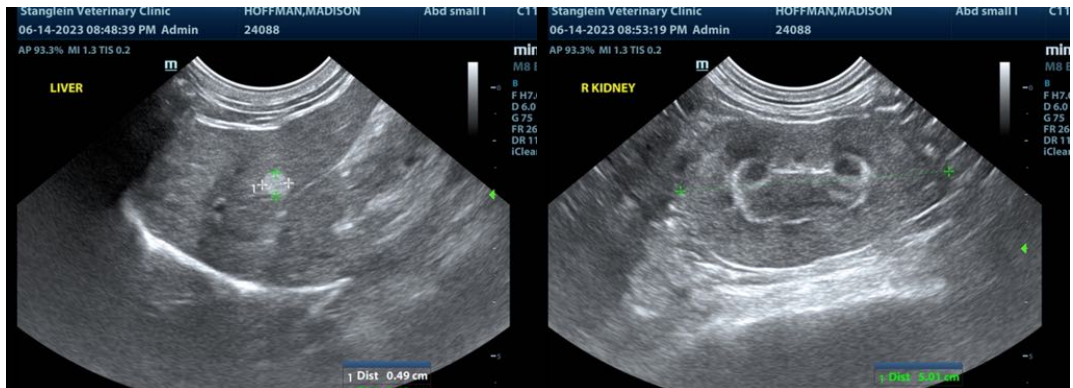
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com