



PATIENT

Pepper Benson

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

8.5 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Jenny Parrish

HOSPITAL NAME

Local Mobile VS

REFERRING VET

Jenny Parrish

INVOICE

22936

DATE

6/16/23

PRESENTING CLINICAL SIGNS

History of acute diarrhea and weight loss

Abnormal PE/Chem/CBC/UA Results: BUN 50, Cr 2.2, SDMA 38.3, WBC 55.1 (50), RBC 5.2 (5.92), HGB 8.1 (9.3), HCT 27 (29), Neuts 12650 (8500), Lymphs 39050 (8000), Monos 2200 (600), Eos 1100 (1000), T4 1.9

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 left **kidney** measured 4.21 cm. Cortical infarcts and mineralization were noted in the left kidney. The right kidney measured 4.2 cm. Pinpoint mineralizations were noted in the right kidney. Loss of corticomedullary definition was noted in both kidneys.

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 0.54 cm. The left adrenal gland measured 0.6 cm.

Spleen

The **spleen** was enlarged, measuring 1.7 cm. Scalloping contour and granular micronodular changes were noted.

Liver

The **liver** was enlarged and hypoechoic with slight increased portal markings. 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.

Pancreas

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 subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

Free Abdomen



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A 3.0 cm x 2.8 cm mixed hypoechoic mesenteric **lymph node** mass was noted in this patient.

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ULTRASONOGRAPHIC FINDINGS

SPECIES

- Splenohepatic infiltrative patterns
- Mesenteric lymph node mass
- Chronic renal changes with mineralization and infarcts
- Age-related pancreatic changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DSH

FNA of the spleen, lymph nodes and liver are all indicated. Strong concern for round cell neoplasia vs splenitis, lymphadenitis and reactive liver (all technically possible yet less likely). Lymphocytic leukemia/lymphoma likely.

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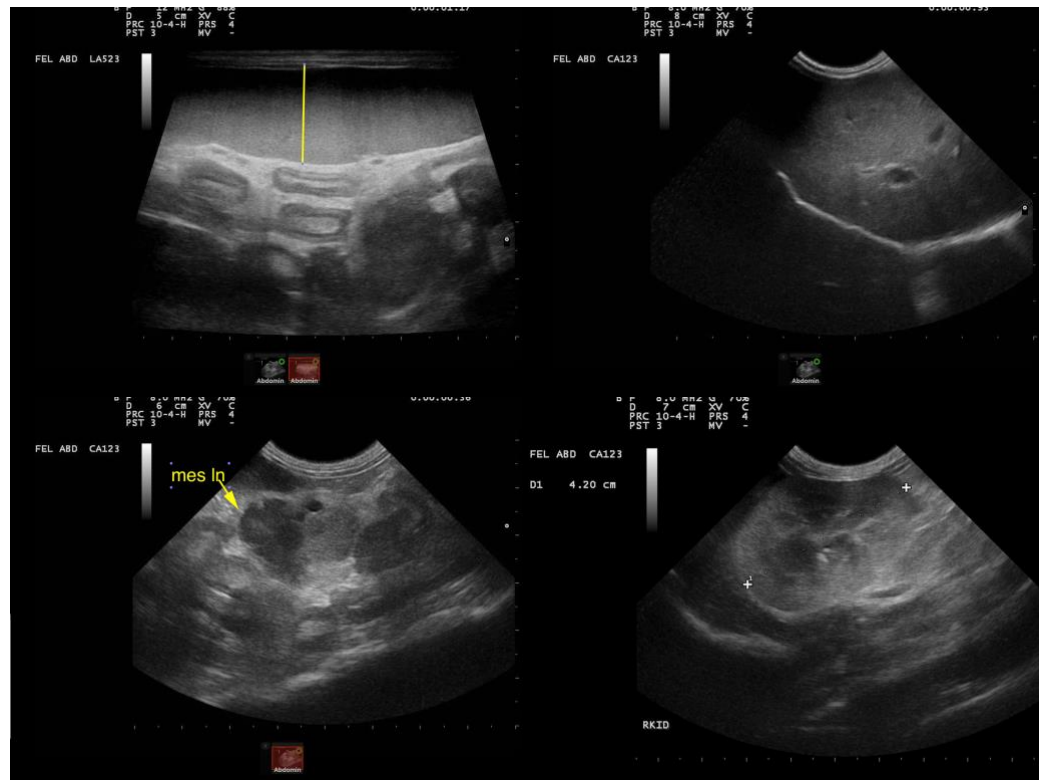
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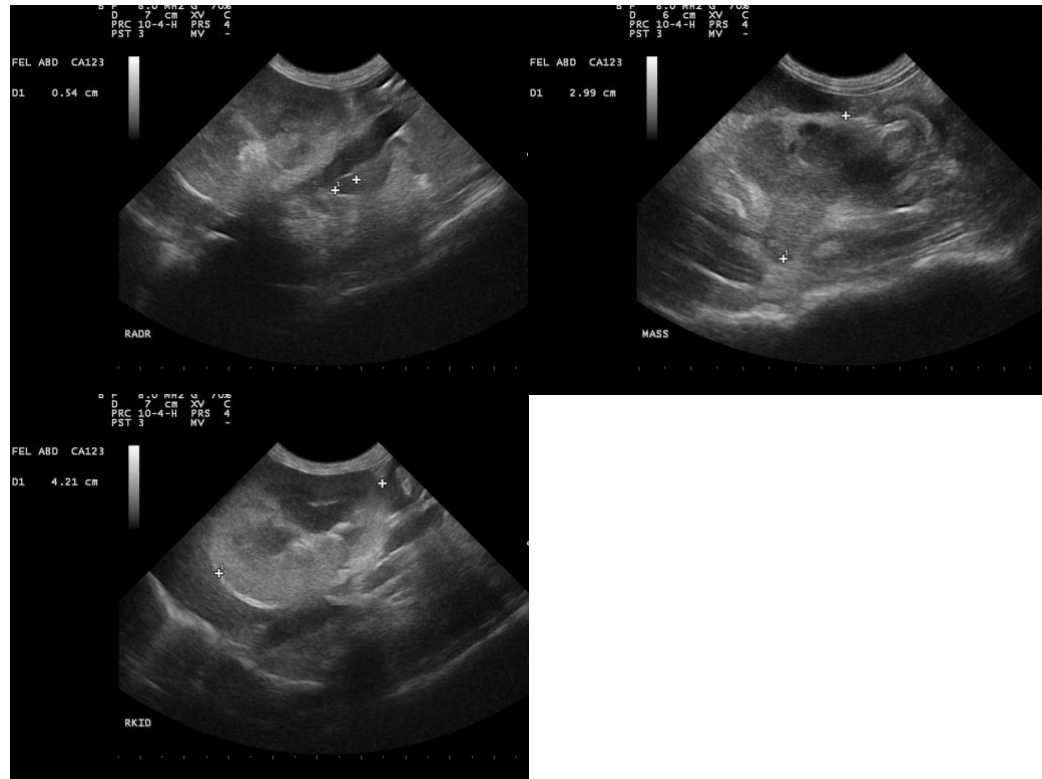
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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