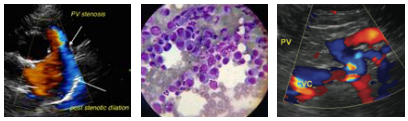
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

**DATE**
7/11/22

**PATIENT**
Shaqtuul Stanjunas

**SPECIES**
Feline

**BREED**
Domestic Shorthair

**SEX**
Neutered male

**AGE**
4/7/07

**WEIGHT**
7.12 lbs

**INTERPRETED BY**
Eric Lindquist, DMV
DABVP, Cert. IVUSS

**HOSPITAL NAME**
Charm City Vet

**REFERRING VET**
Dr. Eavers

**INVOICE**
31582

## PRESENTING CLINICAL SIGNS

P presented 6/29/22 for evaluation of poor appetite and weight loss (4.63 lbs). On PE, the right kidney was enlarged and a possible abdominal mass was noted. There was firm stool palpable in the colon.
Current Medications: None.
Lab Results: HCT 24 (29-48), neutrophila 21,472 (2500-8500), BUN 57 (14-36), glucose 179 (64-170), Mg 3.0 (1.5-2.5), amylase 1332 (100-1200), fT4 94.4 (10-50)
Date of Previous IntraPet Ultrasound: 5/10/21. See attached.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

## 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 was noted. Ureteral papillae were normal.

The **kidneys** were generally enlarged. . The left kidney revealed a subcapsular halo and was hypoechoic measuring up to 0.3 cm. Thickened irregular cortices were noted. The left kidney revealed pyelectasia that measured 0.35 cm. The left kidney measured 4.73 cm. The right kidney also revealed a subcapsular halo that measured 0.4 cm. The right kidney measured 4.78 cm with thickened irregular cortices.

### *Adrenal Glands*

The **adrenal glands** were uniform, yet bilaterally swollen and hypoechoic. This is most consistent with stress-induced hyperplasia. The left adrenal gland measured 0.3 cm. The right adrenal gland measured 0.29 cm.

### *Spleen*

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

### *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.

### *Gastrointestinal*

The intestines in this patient revealed a 4.5 x 2.6 cm intestinal mass. This appears to be in the jejunum. The wall thickness measured up to 0.64 cm. Reactive mesentery was noted.

### *Pancreas*

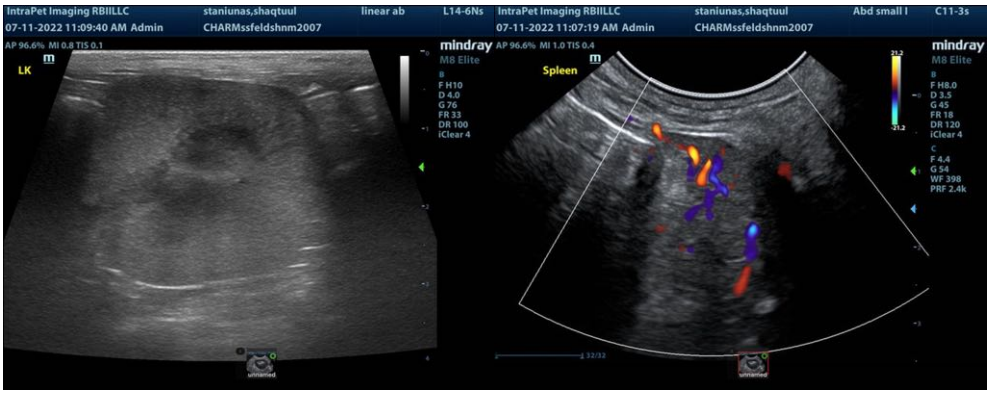
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

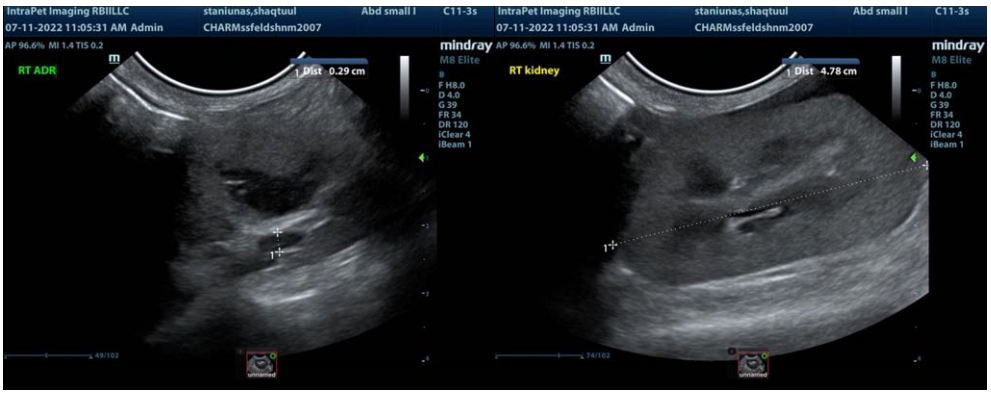
## ULTRASONOGRAPHIC FINDINGS

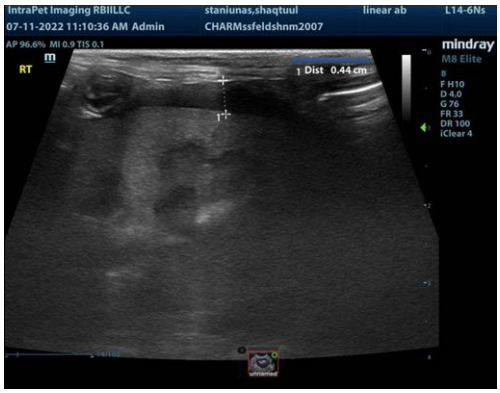
Intestinal mass and early renal lymphoma pattern.
Age related hepatic changes.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the intestinal mass and either renal cortex is recommended. Immediate chemotherapeutic intervention is recommended based on cytology results. Chest radiographs are warranted. There is a minor potential for renal dystrophy with subcapsular fluid. However, the pattern is most consistent with early lymphoma with loss of corticomedullary definition.

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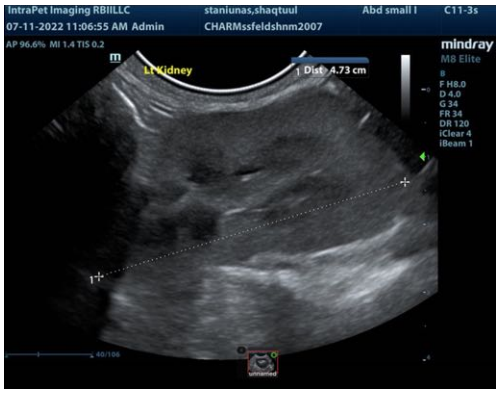
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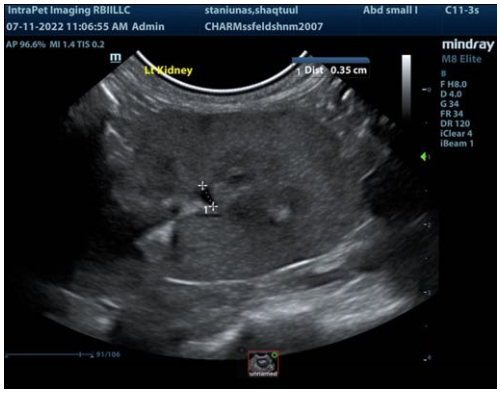
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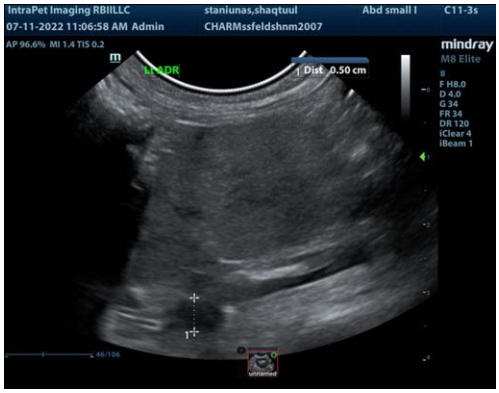
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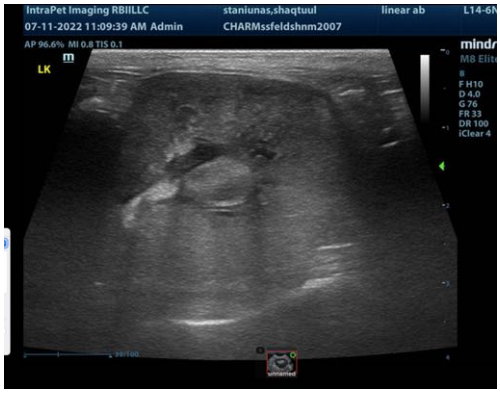
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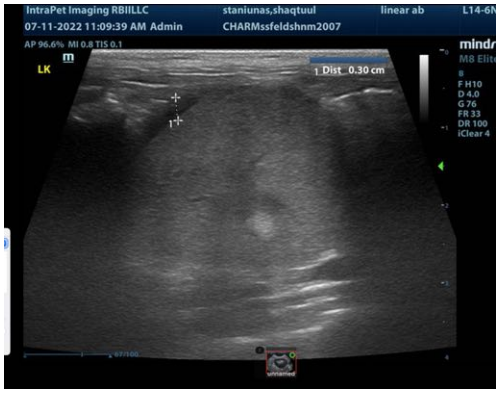
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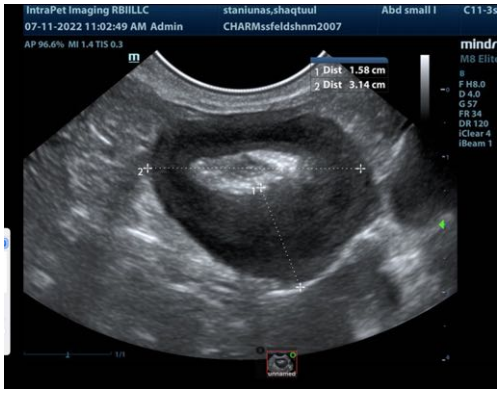
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2 Dist 3.14 cm
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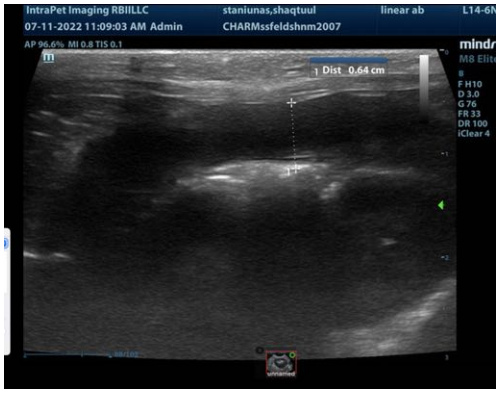
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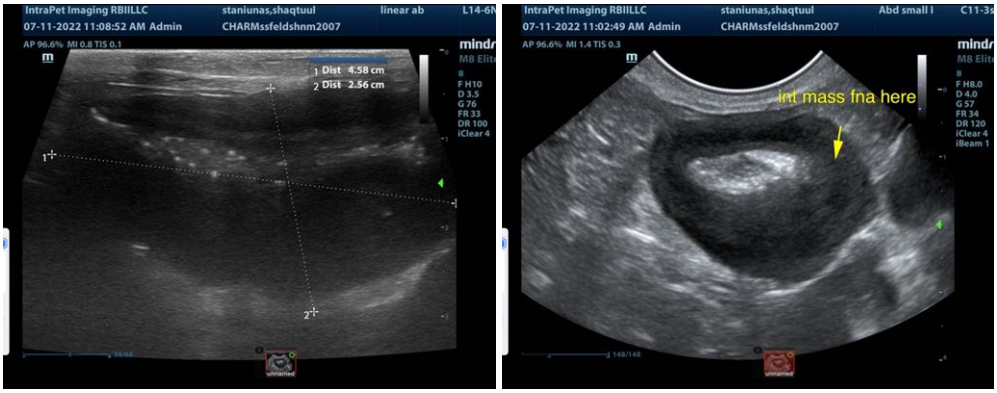


**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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
Eric.Lindquist@SonoPath.com