



PATIENT PRESENTING CLINICAL SIGNS

Tiger Pust Hematochezia after years of taking aspirin for suspected thromboembolic disease. Despite treatment allowing for production of normal stools and regeneration, the HCT has not increased over a week's time.

SPECIES

Feline Abnormal PE/Chem/CBC/UA Results: HCT = 12% with moderate regeneration and inflammatory leukogram. Normal chemistry values.

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

DSH *Urinary System*

SEX

Neutered Male 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.

AGE

16 Years 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. Hyperechoic medullary rim sign was noted. The left kidney measured 3.5 cm. Blood flow to the left kidney appeared to be adequate on color flow assessment. The right kidney revealed mild irregular contour, measuring 4.3 cm.

WEIGHT

8.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

The regions of the **adrenal glands** revealed no evident pathology.

Spleen

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

IMAGING PERFORMED BY

Brandon Holmes

Liver

The **liver** was riddled with multiple masses and nodules with surrounding free fluid, likely owing to hemorrhage. Abdominocentesis is warranted to assess hemorrhagic content. Some of the nodules were cavitated. The gallbladder and common bile duct were unremarkable.

HOSPITAL NAME

West Newton AC

Gastrointestinal

The **stomach** itself was unremarkable. A mixed hypoechoic intestinal mass was noted, measuring 3.3 cm in width with hyperechoic circumferential infiltrative pattern, strongly suggestive for round cell neoplasia. The distal small intestine was unremarkable. The colon was filled with hard stool.

REFERRING VET

Brandon Holmes

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.

INVOICE

23465

DATE

7/18/23

Free Abdomen



PATIENT

Free fluid was noted in the abdomen.

Tiger Pust

ULTRASONOGRAPHIC FINDINGS

SPECIES

Feline

- Intestinal mass
- Free fluid- possible abdominal hemorrhage or paraneoplastic effusion.
- Multiple hepatic nodules, some of which would resemble cystadenomas; however, others are hypoechoic and strongly suggestive for metastatic disease.
- Interstitial nephrosis pattern with medullary rim sign and mild irregular right renal contour.
- Volume contracted spleen

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Neutered Male

CBC path review is warranted to assess if the anemia is regenerative owing to blood loss or potentially nonregenerative owing to bone marrow disease. Blood transfusion and intestinal mass FNA and liver FNA are indicated. Prognosis is poor long-term depending upon eventual ability to respond to chemotherapy.

AGE

16 Years

WEIGHT

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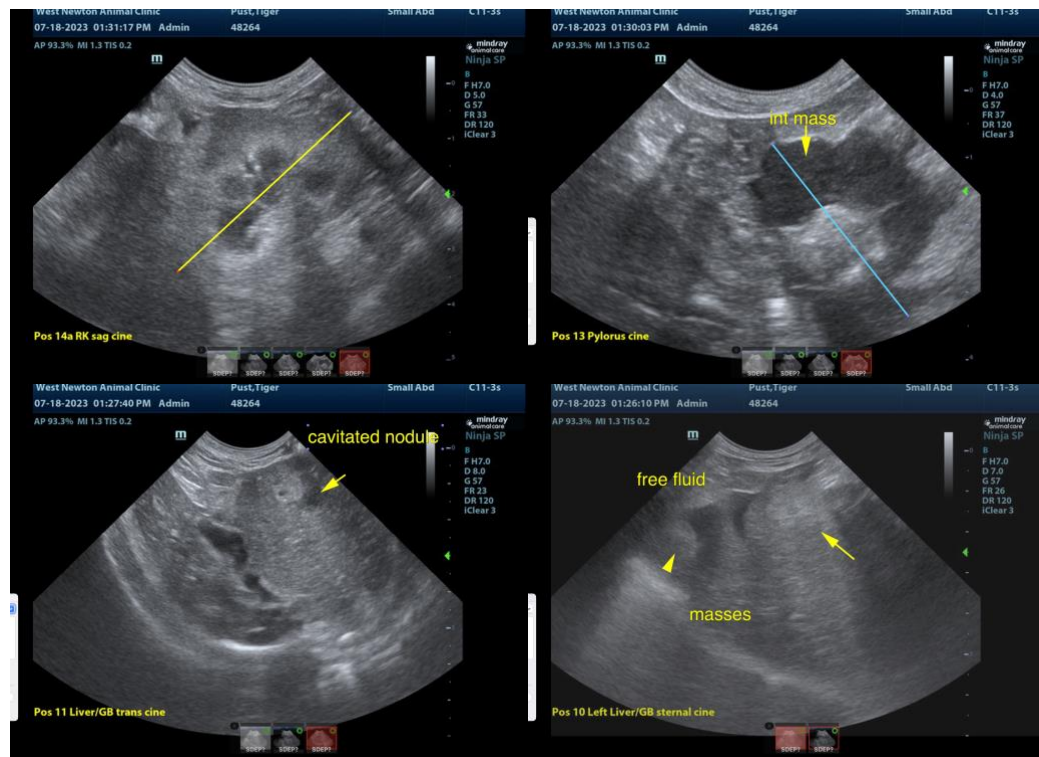
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PATIENT

Tiger Pust

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Neutered Male

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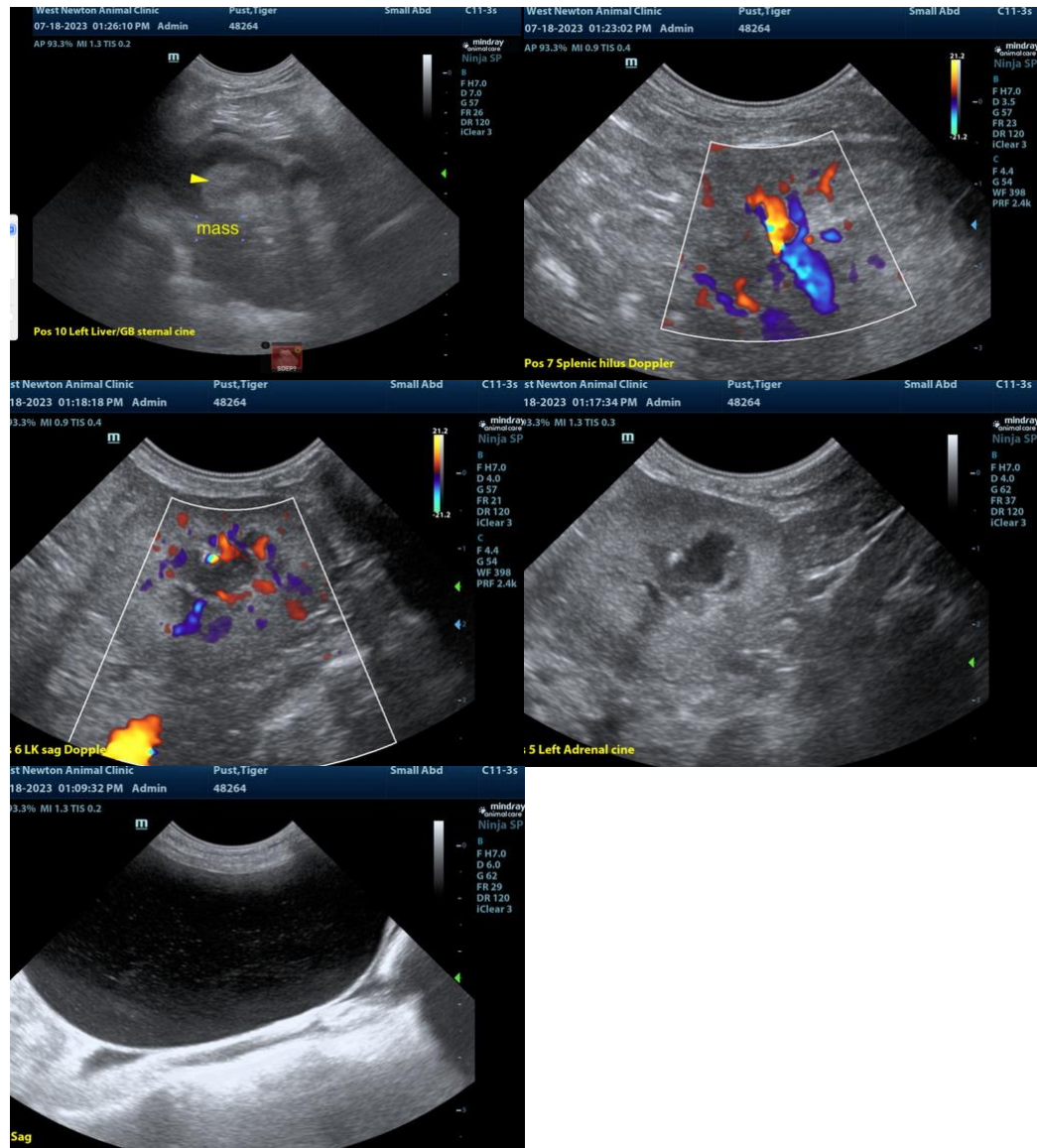
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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