

**DATE PRESENTING CLINICAL SIGNS**

7/21/23

Typically a playful cat Became lethargic and had a decrease in appetite and drinking - went to rdvm, bw revealed elevated liver values, gave fluids and sent home with meds - owner declined transfer to ER Was still not interested in eating - drank an excessive amount of water today Has not defecated since rdvm appointment Current medication - Clavamox 1ml q12 - last given: 8a - Denamarin 1 tab q12 - last given: 8a Presented to rdvm 7/17: - Presented for decreased appetite, lethargy, vomiting - Bw: CI 112 (L), Alt 438 (H), Ast 831 (H), Alp 387 (H), Ggt 7(H), Tbil 1.3 (H), Bil Uncon 0.4 (H), Bil Con 0.9 (H) - FeLV/FIV (-) - Rads: - Sent with clavamox (1ml q12) and denamarin small dog & cat (1 tab q12) - Was around 11# per owner

PATIENT

Tigger Richardson

SPECIES

Feline

Current Medications: None listed.

Date of Previous IntraPet Ultrasound: No previous.

BREED

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

DSH

Imaging Performed By: Rachel Brillhart, RDMS.

SEX**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Spayed Female

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.

AGE

7/20/10

WEIGHT

10.8 Pounds

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Mineralization noted in both kidneys. The right kidney measured 3.4 cm with a corticomedullary calculus measuring 0.47 cm. The left kidney measured 3.37 cm with slight cortical infarcts noted.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**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 0.64 cm. The right adrenal gland measured 0.45 cm.

HOSPITAL NAMEAnimal Emergency
Hospital**Spleen**

The **spleen** was enlarged, irregular and nodular with scalloping contour, strongly suggestive for infiltrative disease.

REFERRING VET

Dr. Nacke-Horney

Liver

The **liver** was riddled with multiple coalescing target nodules creating mass effects throughout the parenchyma with enhanced surrounding mesentery and free fluid. The gallbladder was unremarkable yet deviated.

INVOICE

44269

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

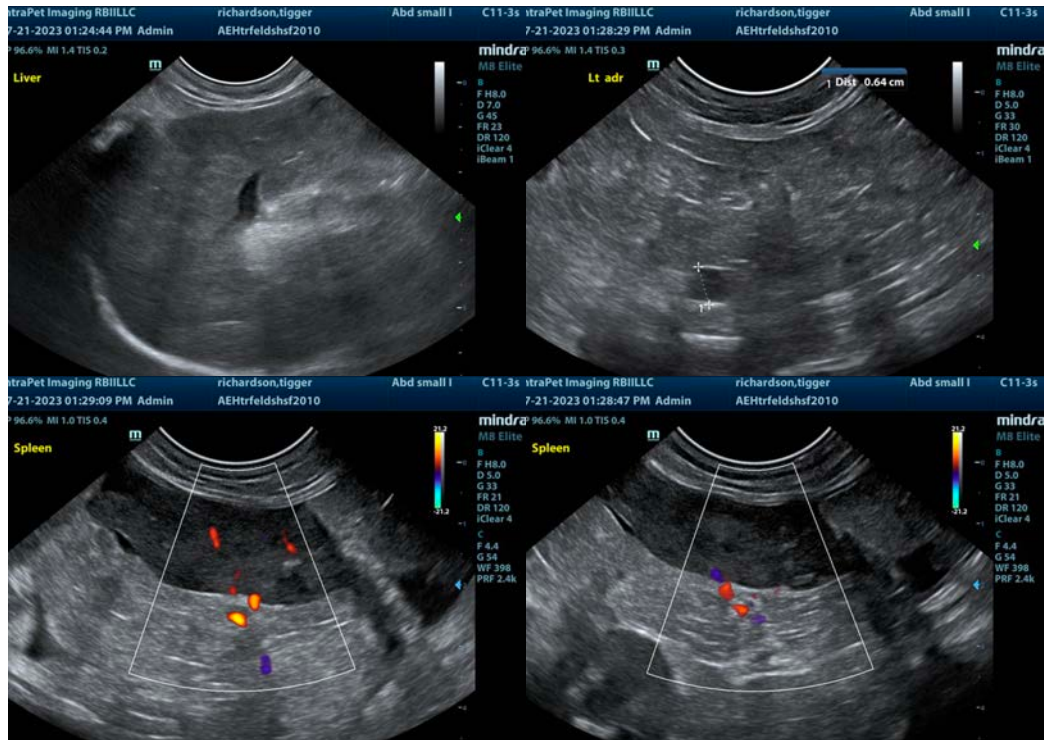
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain 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.

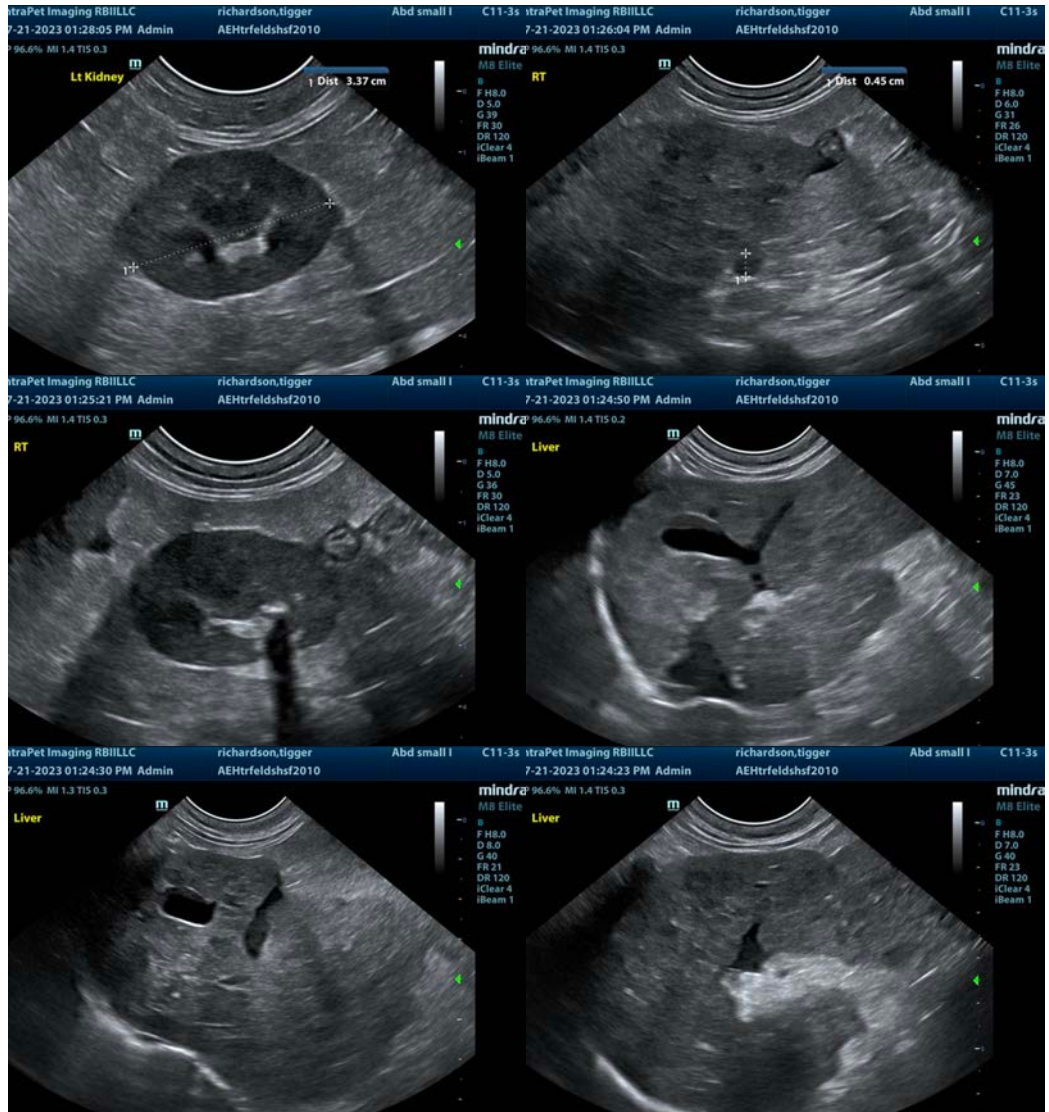
ULTRASONOGRAPHIC FINDINGS

- Splenohepatic infiltrative pattern, aggressive, with secondary paraneoplastic ascites – round cell neoplasia pattern.
- Stress-induced hyperplasia adrenal presentation
- Age related renal changes with mineralization and infarcts
- Age related pancreatic changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA spleen and liver could be considered for further definition and immediate chemotherapeutic intervention. Prognosis is poor.





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