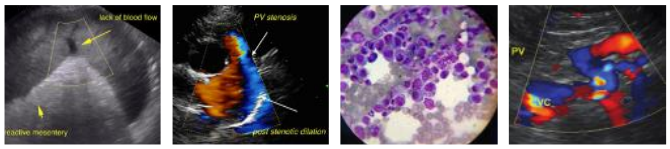
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Nene Heffernan

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

6 Years

WEIGHT

7.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

23205

DATE

7/7/23

PRESENTING CLINICAL SIGNS

History: Losing weight, not eating. Elevated ALT.

Abnormal PE/Chem/CBC/UA Results: ALT 386; BUN 13; Chl 111

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 **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.1 cm. The right kidney measured 3.1 cm.

Adrenal Glands

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

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 were noted.

Liver

The **liver** revealed minor coarse architecture and slight increase portal markings. The gallbladder and common bile duct were unremarkable. This is a nonspecific inflammatory hepatopathy. FNA could be considered for further definition of inflammatory cell type, however, likely reactive hepatopathy.

Gastrointestinal

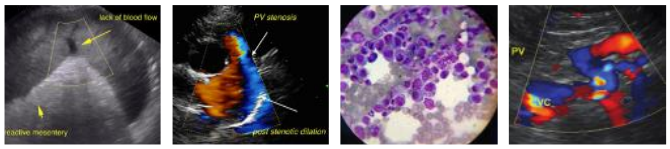
Stasis was noted in the **stomach**. A portion of jejunum was particularly thickened with early loss of mural detail, with wall thickness of 0.49 cm. Some entrapped partially delayed outflow of chyme was noted. This area should be monitored carefully, as there is strong concern for emerging round cell neoplasia. Reactive mesentery was noted on the intestine. Portions of hypertrophied muscularis without loss of detail were noted. Soft stool was noted in the colon.

Pancreas

The **pancreas** was hypoechoic and irregular in the left limb with minor duct dilation (0.2 cm).

ULTRASONOGRAPHIC FINDINGS

- Variable intestinal thickening with regional pancreatitis- strong concern for emerging round cell neoplasia.



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Nene Heffernan

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

6 Years

WEIGHT

7.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

23205

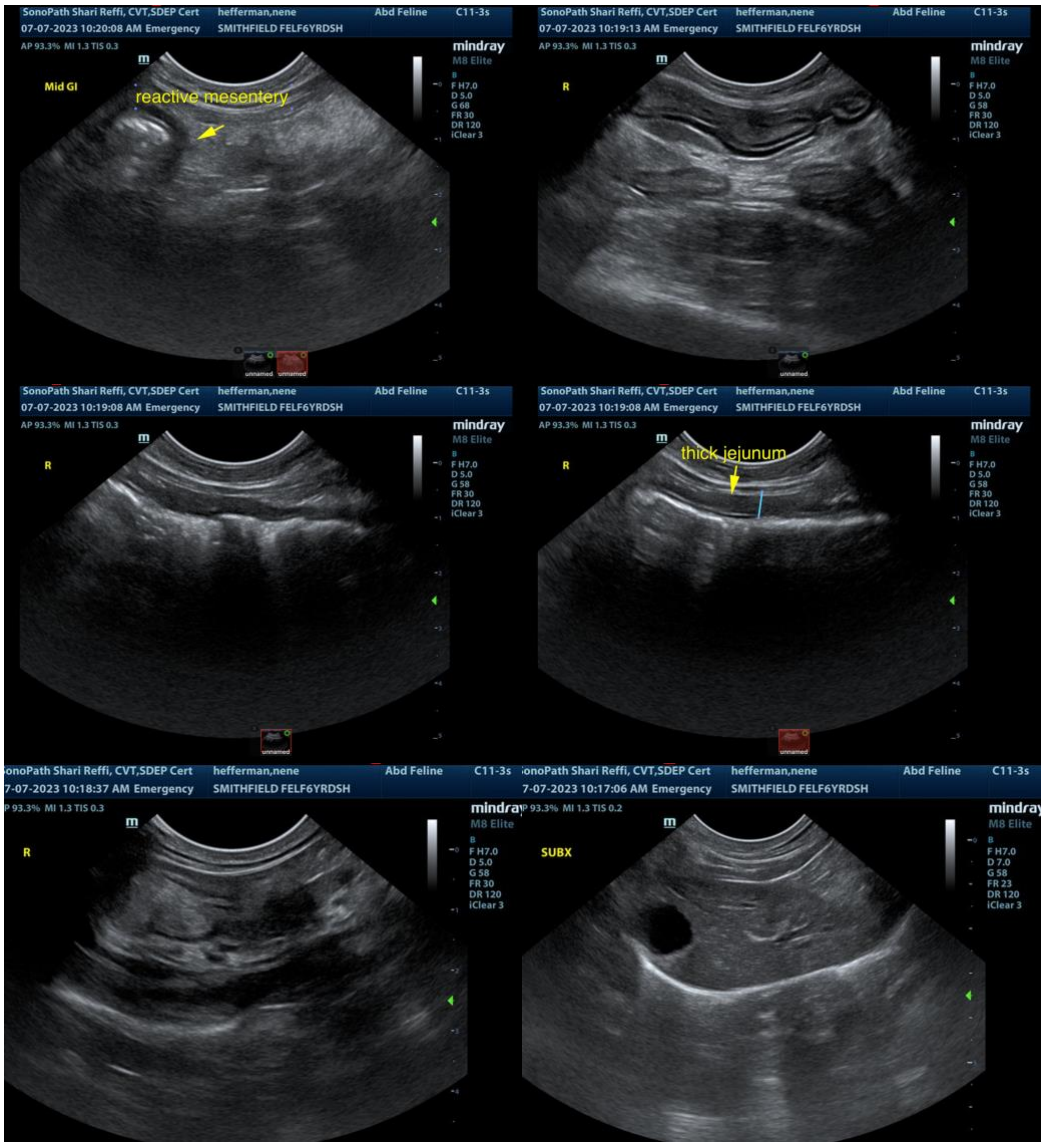
DATE

7/7/23

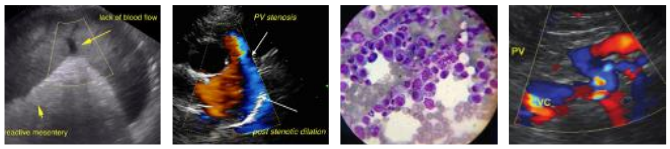
- Mild inflammatory hepatopathy liver pattern

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full thickness intestinal biopsies are recommended. I do not believe that clean resection could occur given the tapering pattern of the pathology, however, a section of jejunum could be removed, that meets neoplastic criteria, optimally guided by intraoperative ultrasound, if possible. Otherwise, the surgeon can follow the reactive mesentery pattern on the serosal surface of the intestine and resect approximately 2-3 inches beyond that pattern proximally and distally. Complicated inflammatory bowel with focal necrosis and inflammation vs emerging round cell neoplasia/lymphoma, mast cell disease, dry form FIP (mild potential) are suspected. Prognosis is guarded.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Nene Heffernan

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

6 Years

WEIGHT

7.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

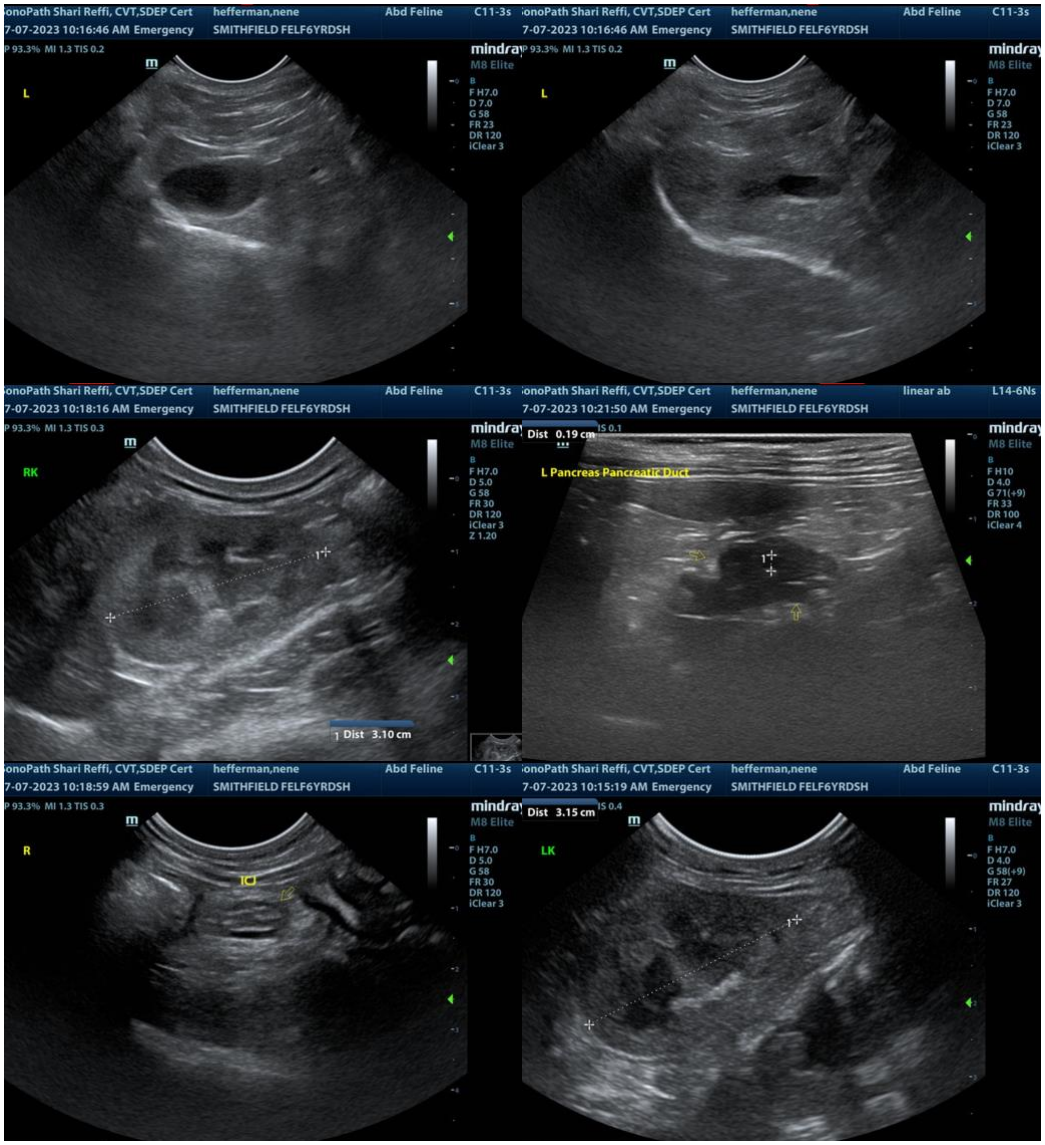
Dr. Boe

INVOICE

23205

DATE

7/7/23



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
info@SonoPath.com