

**DATE PRESENTING CLINICAL SIGNS**

8/1/23 Presents for not eating and not doing well. Has lost several pounds. BW shows severe azotemia, rads show concern for enlarged kidney, loss of abdominal detail

PATIENT

Lilly Simms Current Medications: None listed.
Lab Results: Severe azotemia, mild elevation in Amylase/lipase
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Declined.
Imaging Performed By: Stephanie Warga RDCS, RVT.

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

11/5/16

WEIGHT

4.5 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Homeward Bound
Veterinary

REFERRING VET

Dr. Vance

INVOICE

44537

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** were bilaterally enlarged with subcapsular halo and loss of corticomedullary definition and pyelectasia. Strongly indicative of infiltrative disease. The right kidney measured 5.4 cm. The left kidney measured 5.0 cm with slight pyelectasia noted.

Adrenal Glands

The **right adrenal gland** was 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 0.34 cm.

The region of the **left adrenal gland** was unremarkable.

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** presented coarse architecture and increased portal markings. Minor gallbladder debris noted.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed variable areas of intestinal wall thickening with loss of mural detail, measuring up to 0.42 cm.

Pancreas

The **pancreas** was enlarged, irregular, and hypoechoic with loss of structural detail. Regional hyperechoic surrounding fat present. Pancreatic duct dilation noted.

Free Abdomen

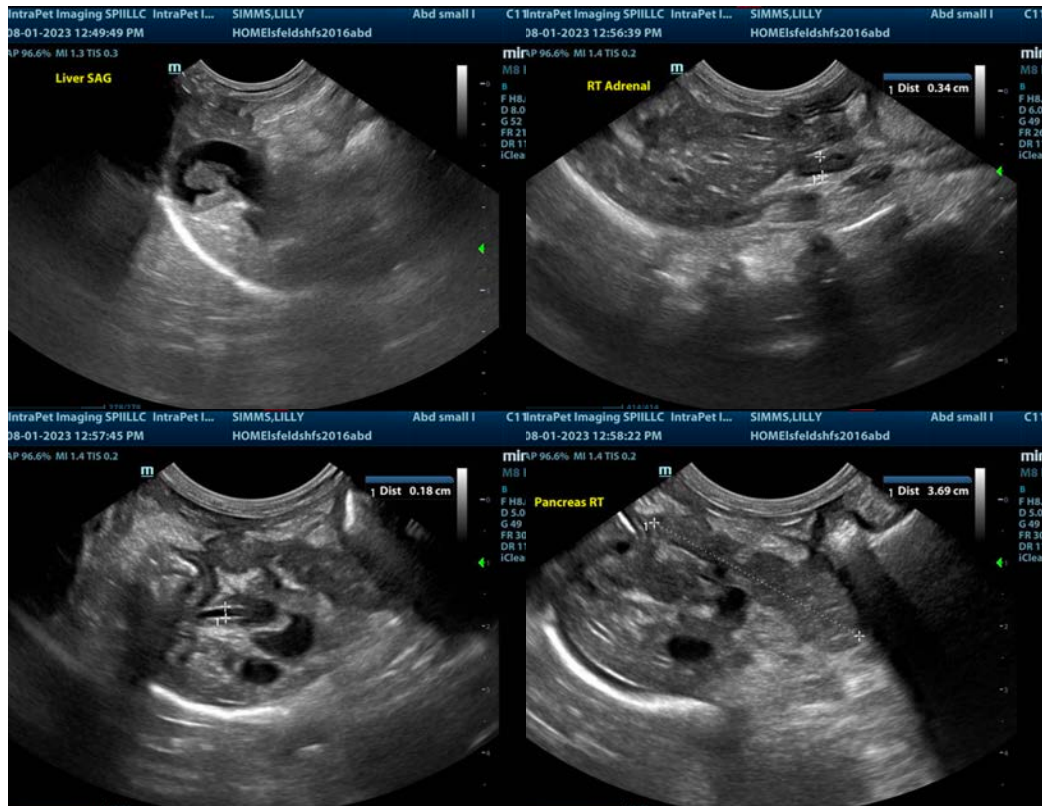
Slight areas of free fluid noted, likely owing to paraneoplastic effusion.

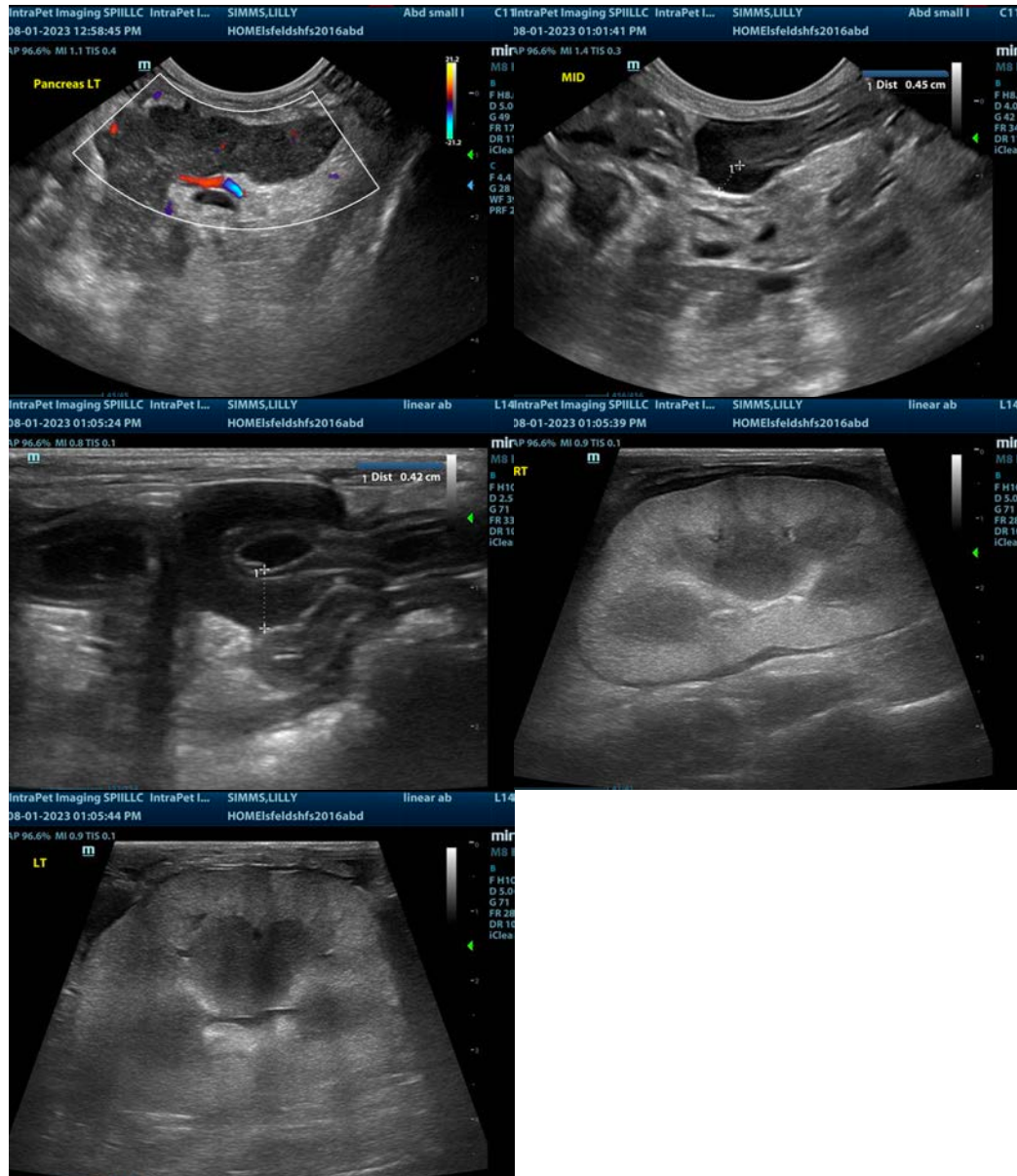
ULTRASONOGRAPHIC FINDINGS

- Infiltrative intestinal and renal pattern, strongly suggestive for lymphoma, with probable pancreatic involvement.
- Slight free fluid
- Minor gallbladder debris

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of either kidney, pancreas and intestine all indicated. Prognosis is very guarded to 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.

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