



PATIENT

Skippy Knafelc

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years

WEIGHT

5.79 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Lupole

INVOICE

40318

DATE

8/11/22

PRESENTING CLINICAL SIGNS

Presented at our hospital for referral for abdominal ultrasound. 3 weeks ago, o noticed decreased appetite and water intake. Also, very lethargic. Was seen at RDVM and had bloodwork which showed increased WBCs. O reports that at recheck 3 days later they did repeat bloodwork which showed increased liver values and even higher WBC count. O though there may have been a tooth issue as well, because food was falling out of his mouth. O reports pancreatitis was suspected as well due to abnormal enzyme test and rads. Previous Health Concerns: allergies, ear infections Current Medications: Zeniquin 25mg q 24hrs; Simbadol Buprenorphine
Abnormal PE/Chem/CBC/UA Results: Respiratory: clear lung sounds, increased rate but normal effort, no crackles/wheezes appreciated Abdominal: very painful on palpation/vocalization; fluid wave present Temp: 103.1 F Rdvm bloodwork 7/25/22: WBC 26.84; NEU 22.98; NEU% 85.6; RDW 21.5; BUN 15; GLU 165 Rdvm bloodwork 8/10/22: WBC 50.35; Mono 4.55; NEU 44.02; EOS 0.580; LYM% 2.3; MONO% 9.0; NEU%87.4; RBC 6.75; HCT 28.55; RDW 22.6; Rdvm UA: blood 10+; Pro 100; LEUK 500+ Rdvm rads: free fluid, rec checking for pancreatitis/intestinal neoplasia Rdvm fecal Negative

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 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. The left kidney measured 4.4 cm. The right kidney measured 4.8 cm.

Adrenal Glands

The regions of the **adrenal glands** were 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** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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Gastrointestinal

Skippy Knafelc

Remodeled and nodular omentum enveloped the upper **gastrointestinal tract**. It appears to be deriving from the pancreas. Surrounding free fluid present. The GI tract was otherwise unremarkable.

SPECIES

Pancreas

Feline

The **pancreas** was hypoechoic and irregular with nodular changes.

BREED

Free Abdomen

DSH

Moderate amount of free fluid noted in the abdomen with echogenic omentum.

SEX

- Nodular, irregular pancreas with envelopment of the upper GI tract – strongly suggestive for pancreatic carcinomatosis or similar neoplasia.
- Free fluid
- Age related renal changes

Neutered Male

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

11 Years

FNA of the hypoechoic portions of the pancreas recommended and cytospin of the free fluid to assess for exfoliating carcinoma or similar neoplasia. Pancreatitis with peritonitis possible, yet less likely. Exploratory surgery could be considered with inspection of cause of the free fluid in case neoplasia is not evident, with resection of the necrotic tissue.

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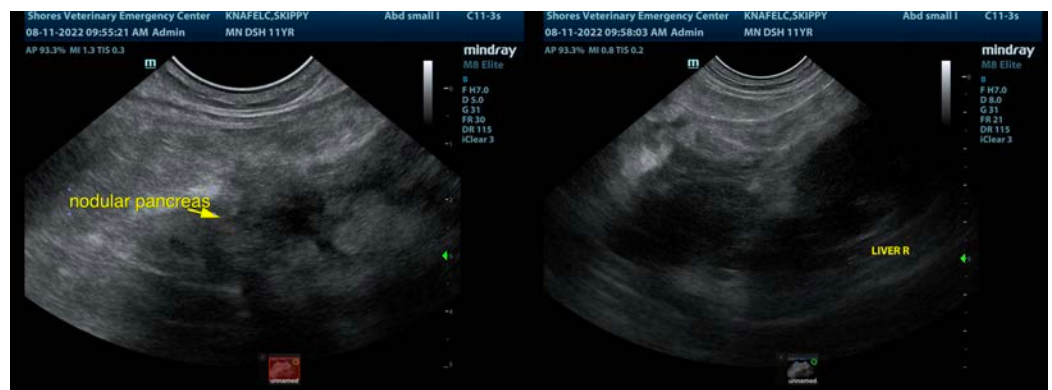
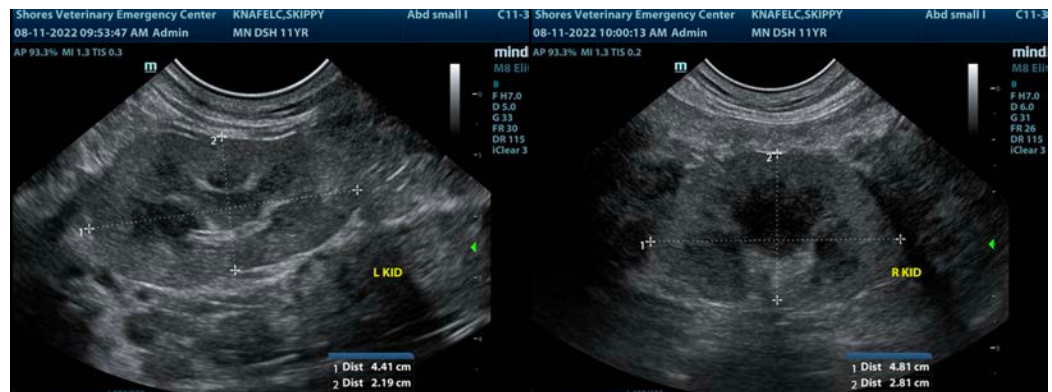
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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