



PATIENT

Moe Hynes

PRESENTING CLINICAL SIGNS

History: Vomiting since Saturday, eating only a very small amount, in and out of the litter box trying to urinate

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Small bladder not firm, weight loss (4 lbs since 2019), tense abd during ultrasound rads 2 view- loss of detail in abdomen CBC/Chem pending, UA pending once bladder large enough to obtain urine

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

The **urinary bladder** was thickened yet empty and would have to be reassessed further with full repletion.

Neutered Male

The **kidneys** revealed normal size and contour with a hyperechoic medullary rim sign. The kidneys measured 3.0 cm each.

AGE

8 Years

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

WEIGHT

12.8 Pounds

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

IMAGING PERFORMED BY

Dr. Scott

HOSPITAL NAME

Ho Ho Kus VH

REFERRING VET

Dr. Scott

Gastrointestinal

The **stomach** itself was unremarkable. Variable small intestinal thickening noted. An overt infiltrative pattern was noted in the mid small intestine, likely jejunum, measuring up to 1.5 cm in width, extending for at least 4.0 cm in length. Areas of free fluid and reactive mesentery noted. A clean resection is unlikely given the regional omental involvement and free fluid which would suggest lymphatic obstruction.

INVOICE

12676

Pancreas

DATE

8/23/21



PATIENT

Moe Hynes

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.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

- Intestinal mass with free fluid and variable intestinal thickening elsewhere
- Medullary rim kidney
- Urinary bladder thickened yet empty
- Age-related abdominal changes otherwise

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Neutered Male

Ultrasound guided FNA of the intestinal mass recommended. Exploratory surgery with aggressive resection anastomosis could be considered, however, micrometastasis to other portions of the abdomen is likely in this case. Likely lymphoma. Minor potential for complicated inflammatory bowel or dry form FIP. 3 view chest radiographs warranted to assess for metastatic disease.

AGE

8 Years



WEIGHT

12.8 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS



IMAGING PERFORMED BY

Dr. Scott

HOSPITAL NAME

Ho Ho Kus VH

REFERRING VET

Dr. Scott

INVOICE

12676

DATE

8/23/21



PATIENT

Moe Hynes

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

8 Years

WEIGHT

12.8 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Scott

HOSPITAL NAME

Ho Ho Kus VH

REFERRING VET

Dr. Scott

INVOICE

12676

DATE

8/23/21



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