



**PATIENT**

Andy Snow

**SPECIES**

Rodent

**BREED**

Ferret

**SEX**

Male

**AGE**

7 Years

**WEIGHT**

2.35 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Jessica Miller

**HOSPITAL NAME**

Animal Care Clinic of  
Flanders

**REFERRING VET**

Dr. Hallihan

**INVOICE**

12714

**DATE**

8/24/21

**PRESENTING CLINICAL SIGNS**

History: Hypoglycemia, strongly suspect insulinoma

Abnormal PE/Chem/CBC/UA Results: BG: 8/21/21 - 48 4/29/21 - 54

**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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 3.23 cm. The right kidney measured 2.96 cm.

**Adrenal Glands**

Both **adrenal glands** were 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 left adrenal gland measured 0.3 cm. The right adrenal gland measured 0.4 cm.

**Spleen**

The **spleen** was largely normal, yet a focal 3.0 mm nodule was noted in the mid body of the spleen adjacent to the liver.

**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.

**Gastrointestinal**

Some retention of ingesta was noted in the **stomach**, most consistent with postprandial presentation. The small intestine and colon were unremarkable.

**Pancreas**

A mixed hypoechoic mesenteric lymph node (0.5 cm x 1.0 cm) was noted in the left **pancreatic** limb. A hypoechoic nodule was noted at the caudal aspect of the right limb, measuring 5.0 mm, suspect insulinoma.

**ULTRASONOGRAPHIC FINDINGS**



**PATIENT**

Andy Snow

- Right pancreatic nodule, suspect insulinoma
- Minor reactive mesenteric lymphadenopathy
- Separate splenic nodule
- Stomach retention of ingesta

**SPECIES**

Rodent

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Medical treatment for insulinoma could be considered or direct exploratory surgery with removal of the pancreatic nodule and inspection of the spleen.

**BREED**

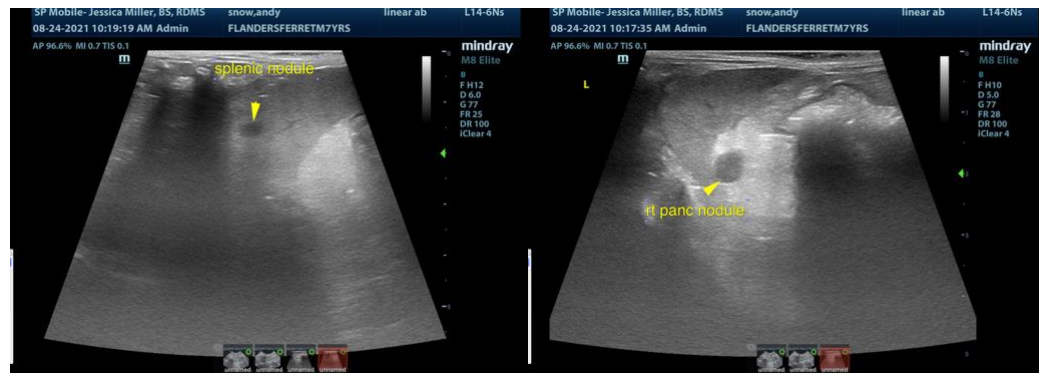
Ferret

**SEX**

Male

**AGE**

7 Years

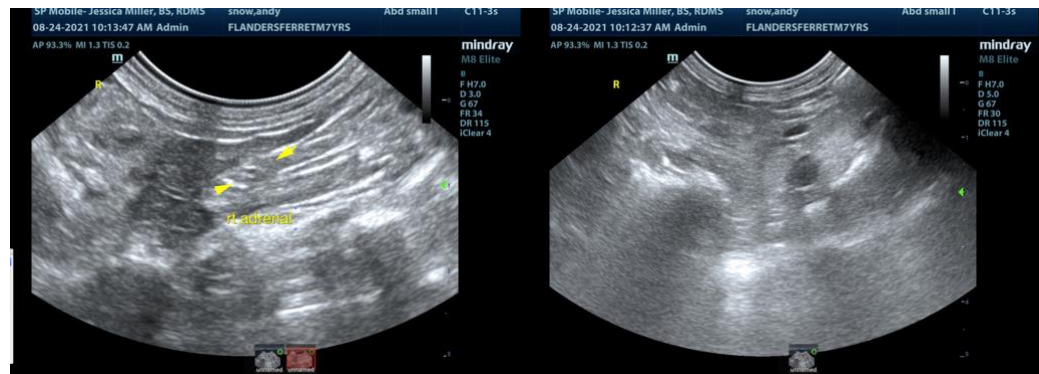


**WEIGHT**

2.35 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS



**IMAGING PERFORMED BY**

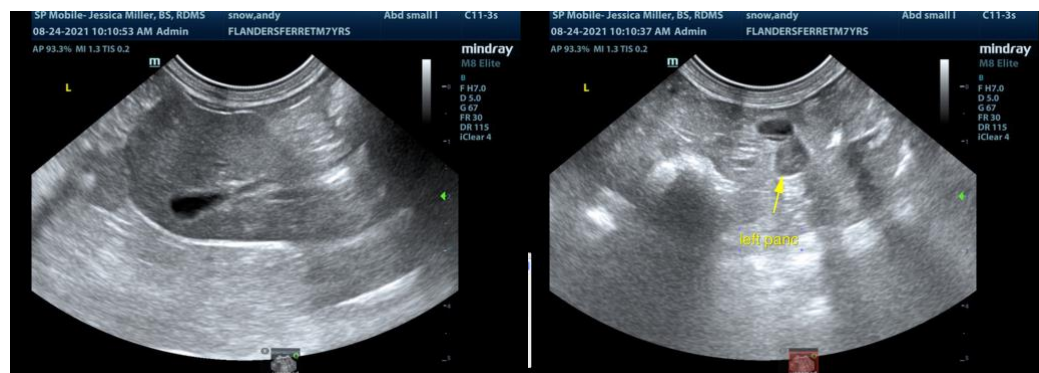
Jessica Miller

**HOSPITAL NAME**

Animal Care Clinic of  
Flanders

**REFERRING VET**

Dr. Hallihan



**INVOICE**

12714

**DATE**

8/24/21



## PATIENT

Andy Snow

## SPECIES

Rodent

## BREED

Ferret

## SEX

Male

## AGE

7 Years

## WEIGHT

2.35 Pounds

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Jessica Miller

## HOSPITAL NAME

Animal Care Clinic of  
Flanders

## REFERRING VET

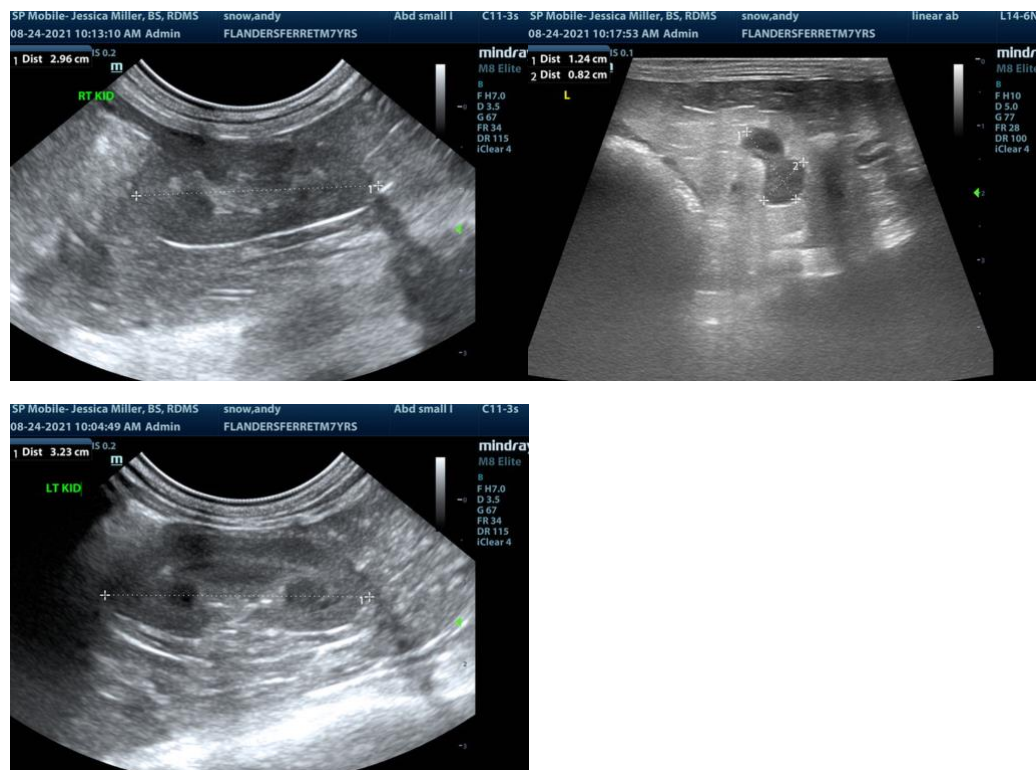
Dr. Hallihan

## INVOICE

12714

## DATE

8/24/21



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