



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Rambo Gay

SPECIES
Feline

BREED
DSH

SEX
Neutered Male

AGE
13 Years

WEIGHT
13.5 Pounds

Presented to pDVM recently for dental - incidentally found a mass on x-ray. Blood work relatively unremarkable. Only change Owners have observed is increasing abdomen size. Otherwise he seems very normal, good appetite, no vomiting, pain, etc. Rambo is an indoor only cat with one other indoor only cat. Owner reported that he grooms the other cat enough and gets hairballs, but won't eat hairball meds. He does not get as many hairballs when the have the other cat trimmed/groomed. Owner mentioned that Rambo used to like jumping on tall things until fell of fridge couple months ago. She noted that during the fall, he hit her on her side/hip area and she said it really hurt. She believe he contacted on his right side. But he seemed okay afterwards.

Abnormal PE/Chem/CBC/UA Results: PE: Increased BCS, unremarkable exam otherwise. CBC: lymphopenia, eosinopenia, ownl Chem: hypokalemia 2.7, ownl Radiograph findings: There is an ovoid soft tissue opacity within the cranial dorsal abdomen, cranial to the kidneys, as seen on the lateral projections. On the VD projection, this opacity appears to be medial to the right kidney. The liver is mildly enlarged and rounded. The remaining abdominal viscera and peritoneal serosal detail are within normal limits. The cardiac silhouette, pulmonary vasculature, and pulmonary parenchyma are within normal limits. The mediastinal and pleural structures are unremarkable. There is minimal spondylosis deformans in the mid thoracic spine. Conclusion: 1. Suspected cranial dorsal abdominal mass. Consider a mass arising from the right adrenal gland (malignant versus benign). Alternatively, a mass arising from the proximal extremity of the spleen, enlarged lymph nodes, or an ectopic kidney could be considered. 2. Mild hepatomegaly. Consider benign fat infiltration, lipidosis, hepatitis, or neoplasia. 3. Unremarkable thorax.

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 1.0 cm beyond the cystourethral junction.

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 4.39 cm. The right kidney measured 4.39 cm and was deviated from the caudal liver mass.

Adrenal Glands

The **adrenal glands** were not visualized.

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 right caudal liver revealed an expansive hypoechoic 4.0 cm mass deviating the diaphragm, peripherally inflamed. The remainder of the liver appeared largely unremarkable. The mass is unlikely to

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be resectable, given that it appears to deviate and encompass the vena cava. The common bile duct and portal vein appeared unremarkable.

Gastrointestinal

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Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

BREED

DSH

Pancreas

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.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Right caudal liver mass encompassing the vena cava, peripherally inflamed, possible adrenal involvement
- Secondary inflammation and mass effect upon the right kidney

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

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I cannot completely rule out the potential that the mass is driving from the right adrenal gland and encompassing the liver. CT evaluation recommended for further definition. Carcinoma or similar neoplasia suspected.

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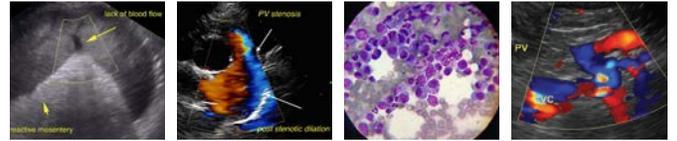
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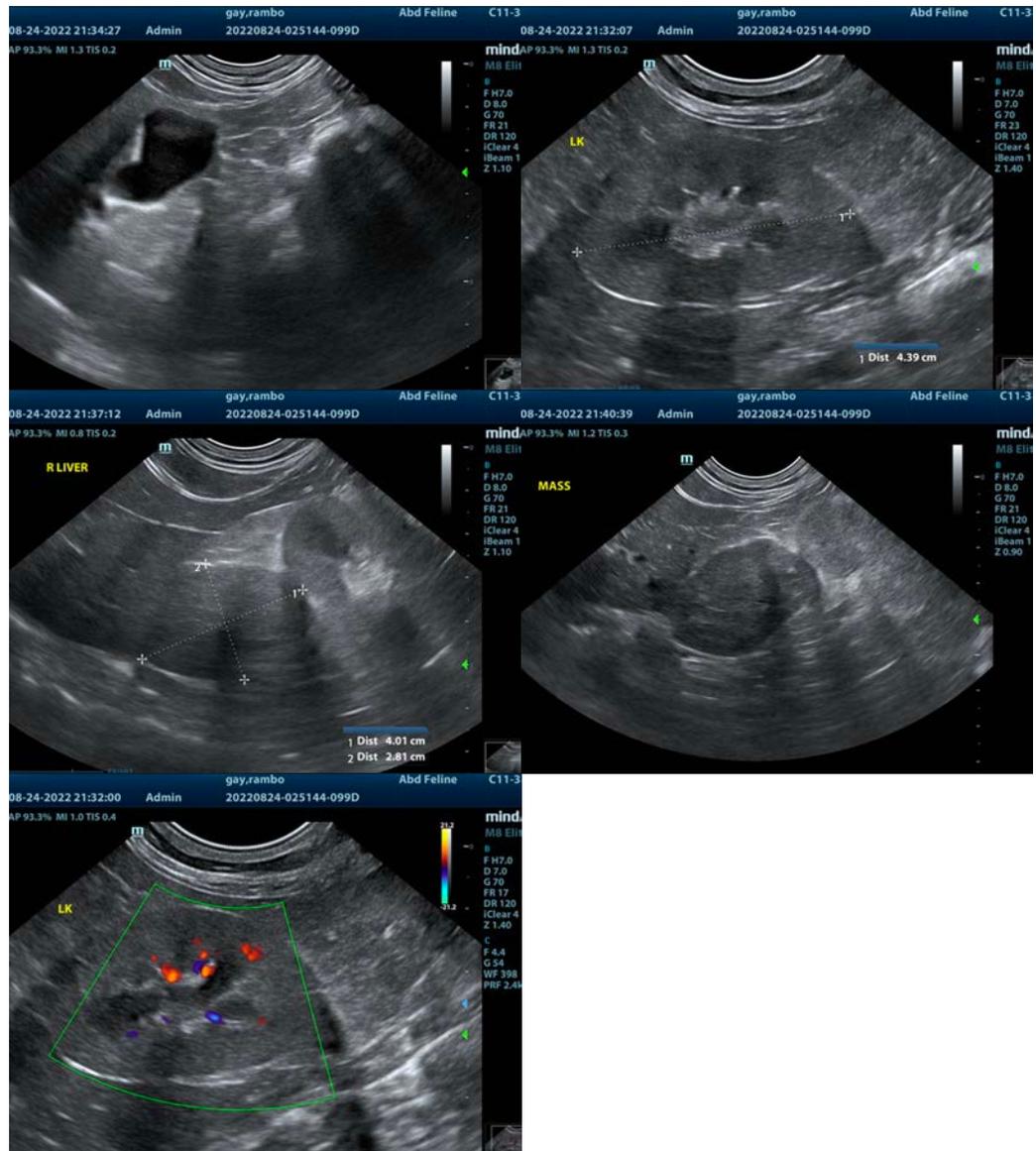
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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