

PATIENT

Toast Brenner

SPECIES

Feline

BREED

Domestic Longhair

SEX

Neutered male

AGE

10 years

WEIGHT

8.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Waffle

HOSPITAL NAME

Torch Lake VC

REFERRING VET

Dr. Waffle

INVOICE

32578

DATE

8/26/22

PRESENTING CLINICAL SIGNS

History: Hx of weight loss and generalized muscle atrophy. Was seen yesterday for a 1-2 days history of vomiting and anorexia. The vomitus was a hairball.

Abnormal PE/Chem/CBC/UA Results: Attitude - BAR HR - 150 Pink < 2 BCs 4/9 T - 99.7 CBC - WNL
Chem: SDMA - 17; GLOB 5.9 T4 - WNL

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. A minor amount of dependent debris was noted. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Slight mineralization was noted in both kidneys and was non-obstructive. The left kidney measured 3.42 cm. The right kidney measured 4.26 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.

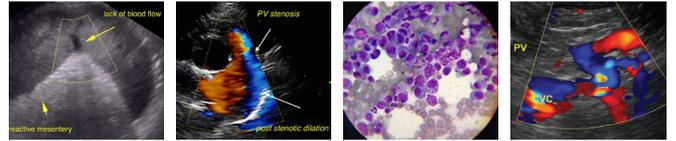
Spleen

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 was noted.

Liver

The **liver** was mildly swollen with slight isoechoic nodules and a swollen, caudate process. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

Gastrointestinal



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A gastric mass was noted and measured 3.0 cm and appears to be isolated. The gastric mass occupied the fundus. The mass is concentric and non-resectable. The gastric mass was in the pyloric antrum and non-obstructive at the time of the sonogram. Epigastric lymph node measuring 0.7 cm was noted.

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Pancreas

The **pancreas** was hypoechoic and irregular with undulating contour.

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ULTRASONOGRAPHIC FINDINGS

Chronic interstitial nephrosis pattern with non-obstructive calculi.

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Gastric mass.

Regional lymphadenopathy.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

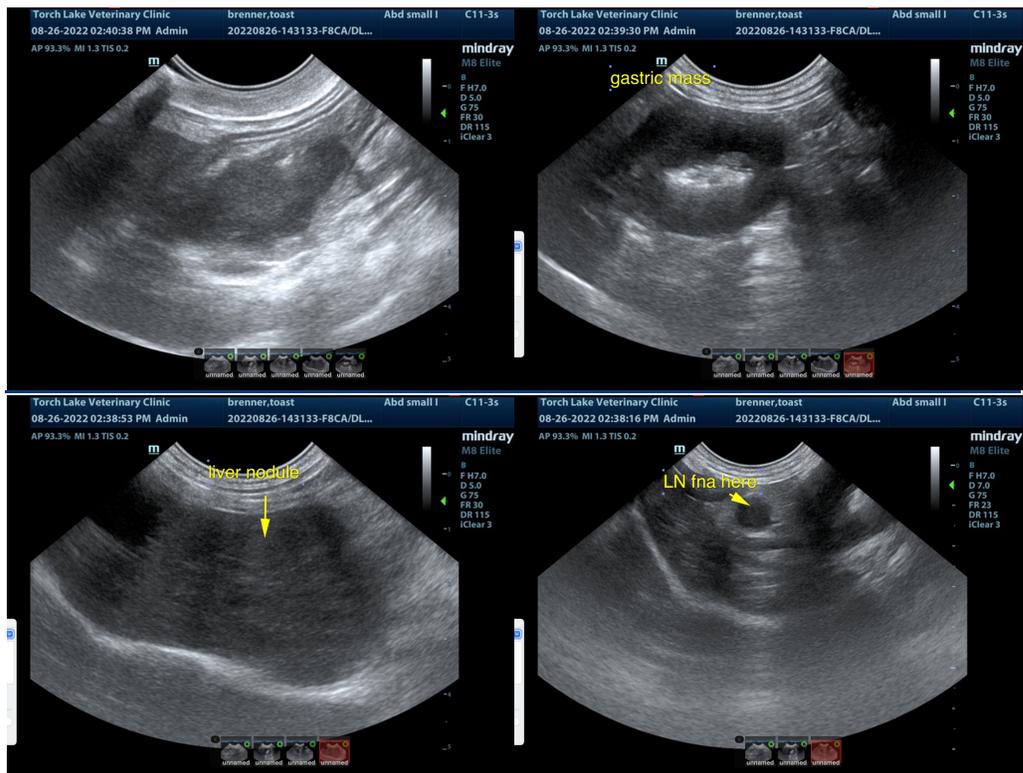
Ultrasound-guided FNA and chemotherapeutic intervention is recommended. Chest radiographs are warranted to assess for metastatic disease. FNA and chemotherapeutic intervention is a potential or hepatic nodules. There is a potential for hepatic involvement.

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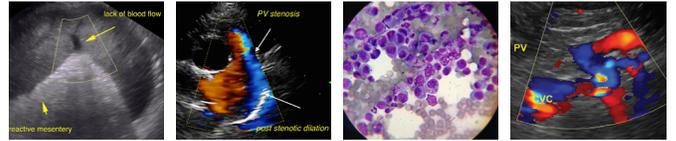
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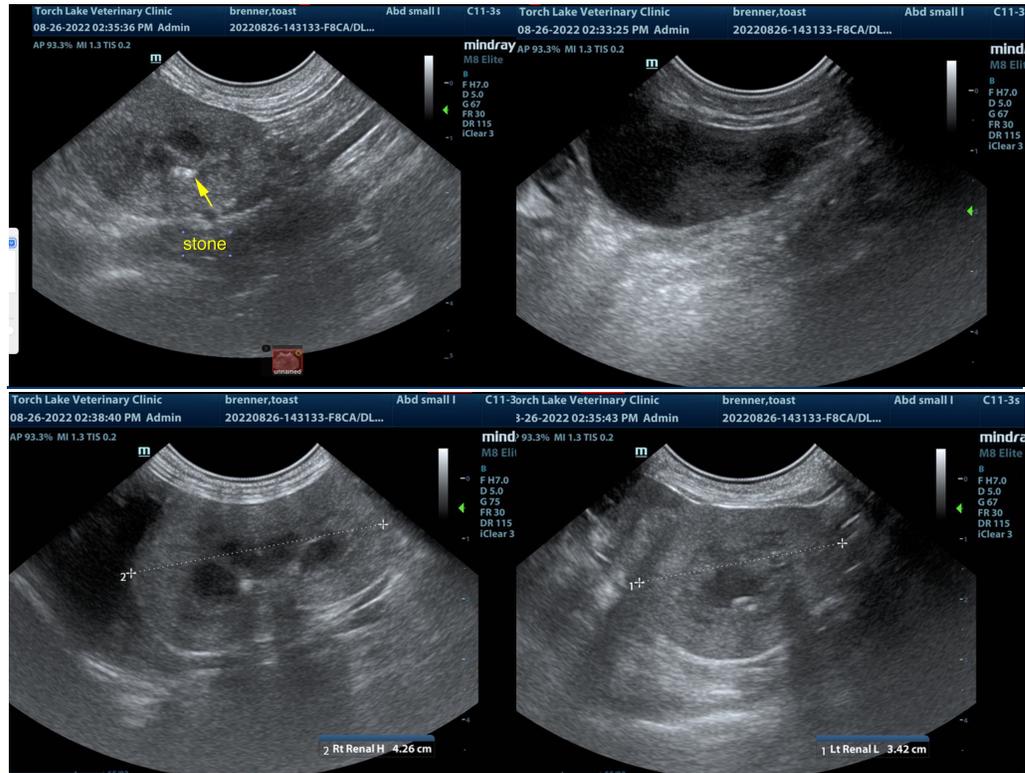
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@SonoPath.com