



**PATIENT**

Sweet Pea Reed

**SPECIES**

Feline

**BREED**

Havanese Mix

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

5.71 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Anna Wepprich, DVM

**HOSPITAL NAME**

Wilvet Salem

**REFERRING VET**

Anna Wepprich, DVM

**INVOICE**

16781

**DATE**

8/8/22

**PRESENTING CLINICAL SIGNS**

History: Elevated liver values, weight loss. good appetite. vomited once 7/22. \_

Abnormal PE/Chem/CBC/UA Results: bloodwork at rDVM: 7/26 ALT 319. ALP increased to >993. GGT decreased from 83 to 77 6/30 CBC- Within normal limits, T4- 1.9 within normal limits. Panel- Alb 4.2, Glucose 137, Chol>450, ALT347, ALP 729, GGT 83

**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 minor 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. Occasional cortical cysts were noted, measuring up to 1.4 cm in the right kidney. Slight mineralization was noted. The kidneys measured 4.5 cm each.

**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 0.5 cm. The right adrenal gland measured 0.6 cm.

**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. Cranial folding of the spleen was noted.

**Liver**

The **liver** revealed a uniform vacuolar hepatopathy pattern with slight coarse architecture. A hypoechoic nodule (technically a mass) was noted in the left medial liver, measuring 6.0 cm x 3.2 cm without disruption of architecture, most consistent with hepatoma. Other hypoechoic nodular changes were noted. The gallbladder and common bile duct were unremarkable. No evidence of post hepatic obstruction.

**Gastrointestinal**

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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

## Pancreas

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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.

## BREED

Havanese Mix

## ULTRASONOGRAPHIC FINDINGS

## SEX

Spayed Female

- Hepatoma type hepatic presentation, low grade inflammatory hepatopathy otherwise
- Age-related renal changes with slight mineralization and occasional cortical cysts in the right kidney
- Splenic fold

## AGE

10 Years

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the general parenchyma and the nodular/mass lesion is recommended, yet this is likely benign.

## WEIGHT

5.71 kg



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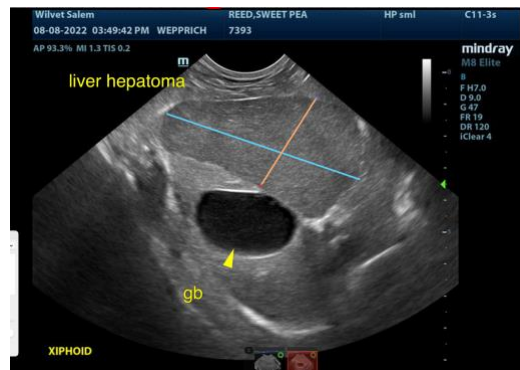
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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