



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Max Riley  
History: Throwing up after eating food almost every time for a while now PE was normal. Sedated with DKT, cat is fractious

**SPECIES** Reticulocytes 106 3 - 50 K/ $\mu$ L Total Protein 6.0 6.3 - 8.8 g/dL ALT 25 27 - 158 U/L No urine

Feline Radiograph undefined mass in the cranial abdomen.

**BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Domestic Shorthair

**Urinary System**

**SEX**

Neutered male

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction and appeared normal. 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 was noted. Ureteral papillae were normal.

**AGE**

7 years

**WEIGHT**

10 ½ lbs

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. The right kidney measured 4.16 cm. The left kidney measured 3.17 cm with irregular contour.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUS

**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.

**IMAGING PERFORMED BY**

Dr. Gramazio

**Spleen**

**HOSPITAL NAME**

Shohola VH

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.

**REFERRING VET**

Dr. Gramazio

**Liver**

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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.

**DATE**

9/19/22



**PATIENT**

Max Riley

**Gastrointestinal**

**SPECIES**

Feline

A 2.6 x 4.0 cm mass was noted. The extent of the mass was difficult to ascertain. It is not likely resectable as it appears to be concentric, yet ultrasound-guided FNA is indicated. The mass appeared to be associated with the gastric fundus. The small intestines and colon were unremarkable.

**BREED**

Domestic Shorthair

**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**

**AGE**

7 years

Concentric gastric mass occupying the gastric fundus.

Otherwise, unremarkable abdomen with moderate degenerative renal changes.

**WEIGHT**

10 ½ lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA is indicated. I suspect gastric lymphoma with a minor potential for granulomatous disease.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Gramazio

**HOSPITAL NAME**

Shohola VH

**REFERRING VET**

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**PATIENT**

Max Riley

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Neutered male

**AGE**

7 years

**WEIGHT**

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**REFERRING VET**

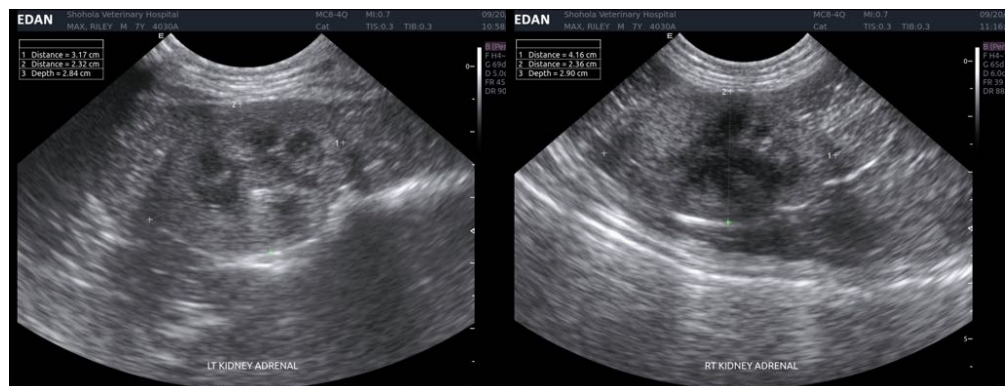
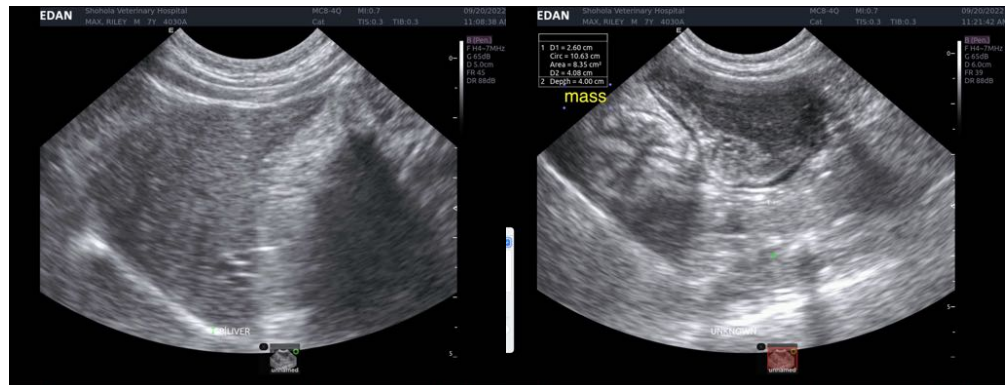
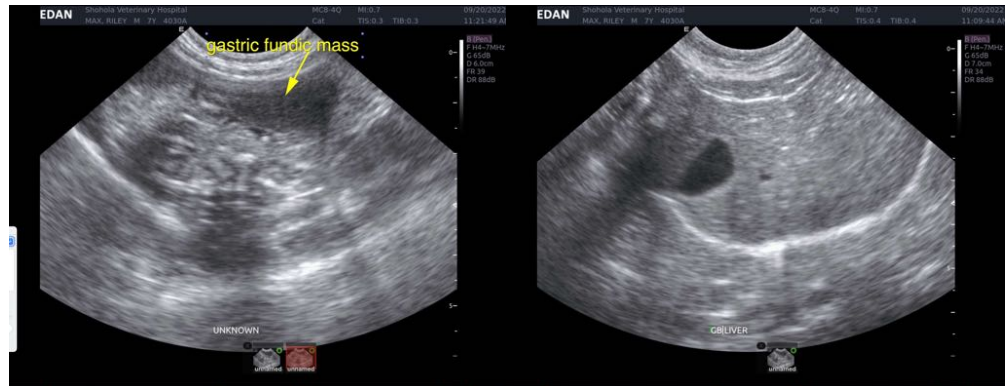
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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