



PATIENT

Morris Leroux

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years

WEIGHT

18 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Kaltsas

INVOICE

41015

DATE

9/2/22

PRESENTING CLINICAL SIGNS

FIV +, Chronic Herpes virus (ocular). Owner reported PU/PD and very wet litterbox in July. Normal BW at that time (7/26). Presented for unilateral epistaxis 8/15, non-responsive to antibiotics and antivirals. Repeat BW (9/1) showed azotemia and mild anemia not previously present. ADR per owner. Abnormal PE/Chem/CBC/UA Results: PE: BCS 9/9 BW (9/1) BUN 53, Creat 3.3, Hct 34%.

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 **right kidney** was significantly enlarged at 7.01 cm with pericapsular inflammatory pattern and loss of corticomedullary definition. Subcapsular halo noted with thickened, irregular cortex. Pericapsular inflammation and nodular changes noted in the cortex.

The **left kidney** measured 6.27 cm. Pericapsular inflammation and nodular changes noted in the cortex.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

Spleen

The **spleen** revealed multifocal target lesions and measured at upper limits of normal (1.0 cm). Some of the target lesions deviated the splenic capsule.

Liver

The **liver** was slightly heterogeneous. The gallbladder and common bile duct were unremarkable. Normal size.

Gastrointestinal

The upper **gastrointestinal tract** revealed a focal gastric nodule/thickening measuring 1.5 cm with loss of mural detail. The small intestine and colon were unremarkable. A 3.0 cm irregular, hypoechoic mesenteric lymph node was enlarged, irregular.

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.

ULTRASONOGRAPHIC FINDINGS

- Multicentric lymphoma pattern primarily involving the kidneys, yet extending to mesenteric lymph nodes, spleen, and gastric wall.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA kidneys, spleen, and lymph node all indicated with immediate chemotherapeutic intervention. Presumed lymphoma. FIP is a mild underlying potential, but less likely.



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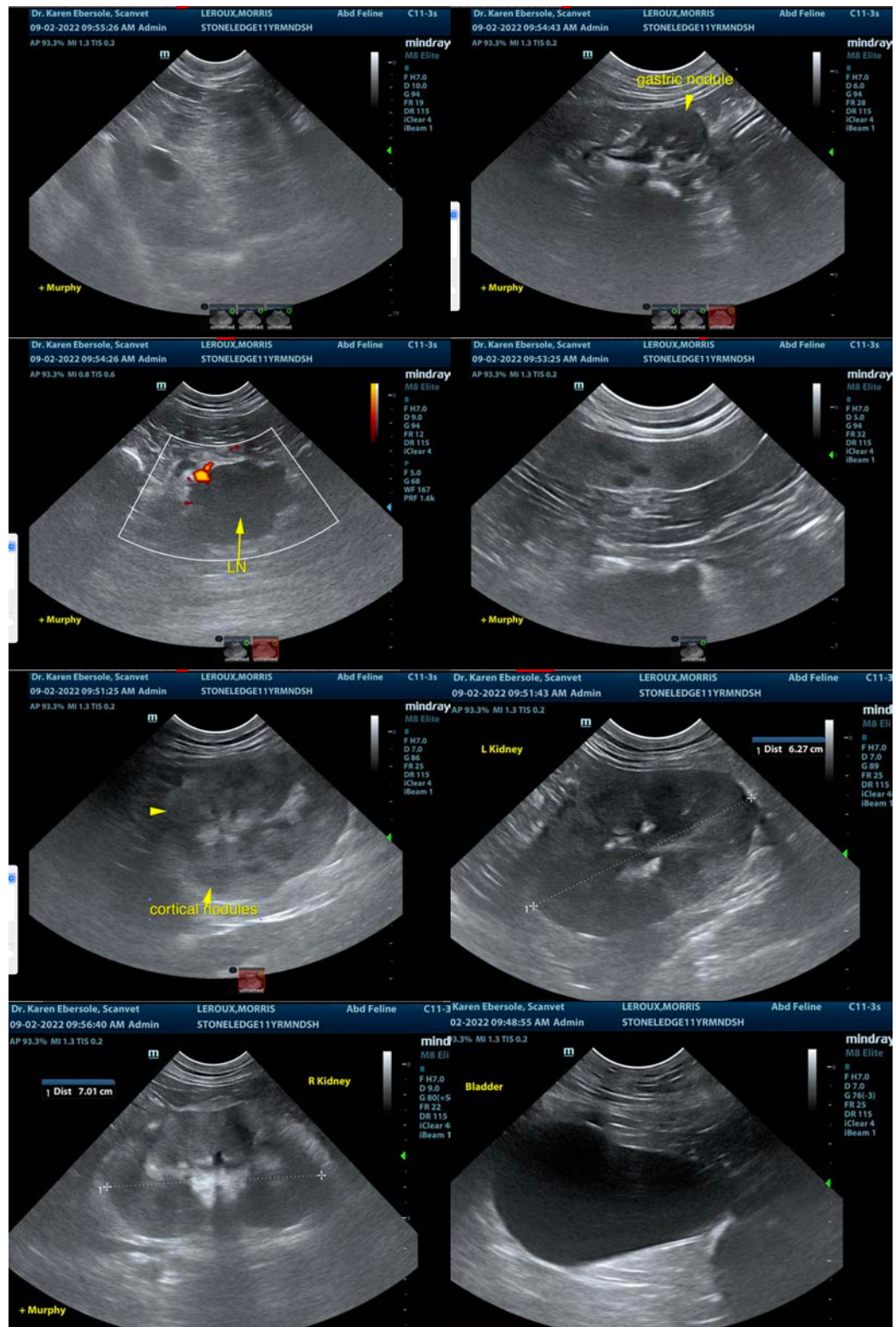
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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

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