



PATIENT

Baby Lett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

12 ½ years

WEIGHT

9.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Ginny Dodd DVM,
 DABVP (CFP)

HOSPITAL NAME

Monroe Road AH

REFERRING VET

Dr. Jones

INVOICE

68394

DATE

11/6/25

PRESENTING CLINICAL SIGNS

History: anorexia, vomiting, nothing per os for 2-3 days
 Abnormal PE/Chem/CBC/UA Results: PE: abdomen feels tense and painful, grade 2/6 heart murmur, mm pink, CRT 2 sec, CBC- neutrophilic leukocytosis, monocytosis, eosinophilia, basophilia CHEM: amyl 1711, lip 1073, Na>, Cl> Osm > BNP normal

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 **left kidney** was at the upper limits of normal in size, yet irregular with loss of structural detail. The left kidney measured 4.09 cm. Reactive mesentery was noted around both kidneys.

The **right kidney** measured 6.9 cm with a 4.6 cm hypoechoic, undifferentiated mass that was deriving from the cranial pole. Regional lymph nodes were enlarged and measured up to 1.76 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. The right adrenal gland measured 0.78 cm.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

Liver

The **liver** was diffusely hyperechoic to the falciform fat. The gallbladder and common bile duct were unremarkable. Pleural effusion was noted through the diaphragm.

Gastrointestinal

The **pyloric** outflow was mildly thickened with trace amounts of free fluid noted in the abdomen with extensive amount of reactive mesentery. Variable areas of intestinal thickening were also noted.



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Pancreas

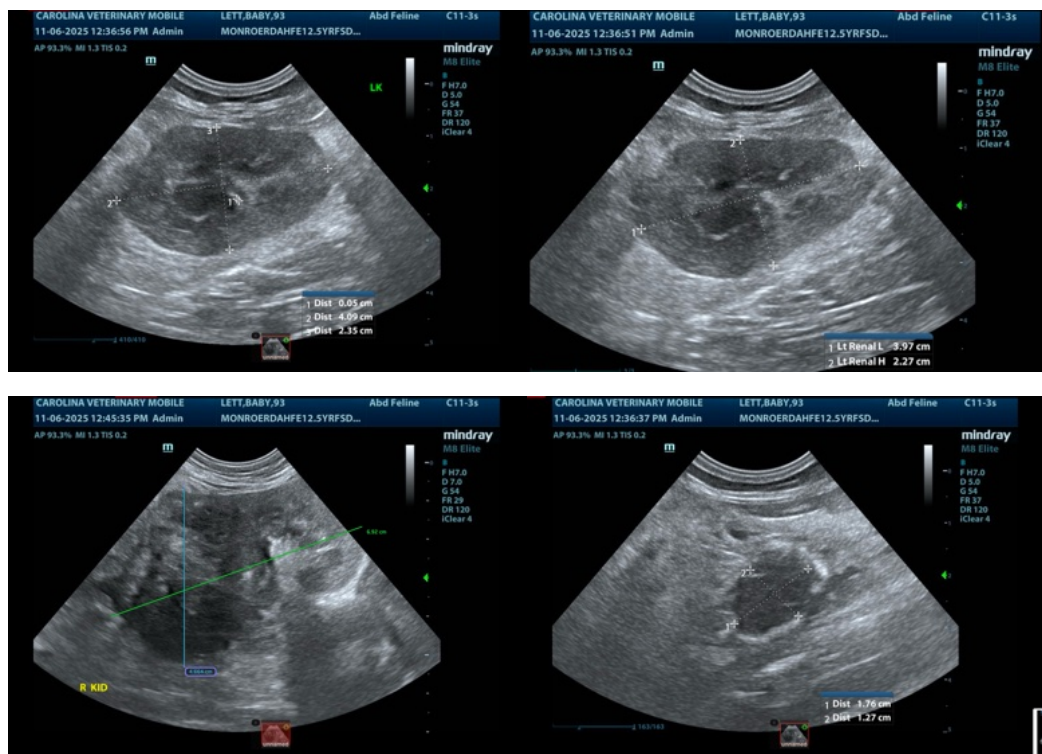
The **pancreas** was involved in an extensive amount of inflammatory process deriving from the other pathology.

ULTRASONOGRAPHIC FINDINGS

- Multi-centric round cell neoplastic pattern, likely initiating in the right kidney; however, both kidneys appeared involved with regional lymph nodes and undifferentiated tissue.
- Pancreas involved in extensive inflammation.
- Pleural effusion.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The prognosis is poor. The pleural effusion would suggest metastatic disease. However, an echocardiogram is warranted to assess for primary cardiac disease to ensure it is not playing a role. FNA of the right kidney and accessible lymph nodes is recommended with immediate chemotherapeutic intervention. Round cell neoplasia/lymphomatosis, less likely carcinomatosis, and a minor potential for FIP.





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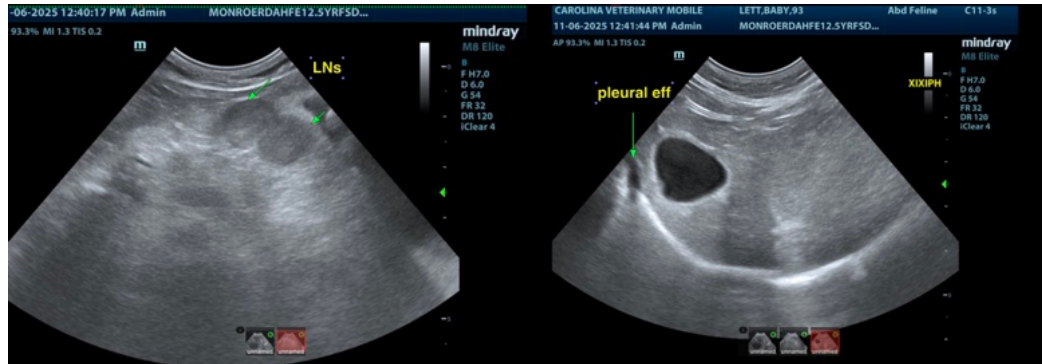
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

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