

**PATIENT PRESENTING CLINICAL SIGNS**

**Bella Sylvestre** -hasn't been eating well since Christmas. -Was seen for vomiting with blood Dec 28. still vomiting but no blood -behavior has changes as well either hiding or laying with owner which isn't like her -tense on abdominal palpation, seems painful - lost weight ( Jan 26,2022 - 4.69kg, Dec 15 5.29kg) Prednisolone 5mg every 24-48 hours  
Abnormal PE/Chem/CBC/UA Results: please see attached bloodwork. CREA 67, UREA 3.9

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

**AGE**

13 years

**WEIGHT**

4.69 kg

**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 was 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 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.83 cm. The left kidney measured 3.93 cm.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Crystal Hill

**HOSPITAL NAME**

Buck AH

**REFERRING VET**

Dr. Yenssen

**INVOICE**

95601

**DATE**

1/28/22

**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 0.42 cm. The left adrenal gland measured 0.37 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 was noted.

**Liver**

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



**PATIENT**

Bella Sylvestre

lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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**Gastrointestinal**

A 3.8 x 3.47 cm gastric mass was noted and occupied the gastric fundus. This is non-resectable. The gastric mass continued into the gastroesophageal inlet.

**BREED**

Domestic Shorthair

**Pancreas**

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

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Spayed Female

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**ULTRASONOGRAPHIC FINDINGS**

Extensive gastric mass.

**WEIGHT**

4.69 kg

Minor, regional lymphadenopathy was present.

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Eric Lindquist, DMV  
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mass is non-resectable. This is likely lymphoma. Ultrasound-guided FNA is recommended for further definition.

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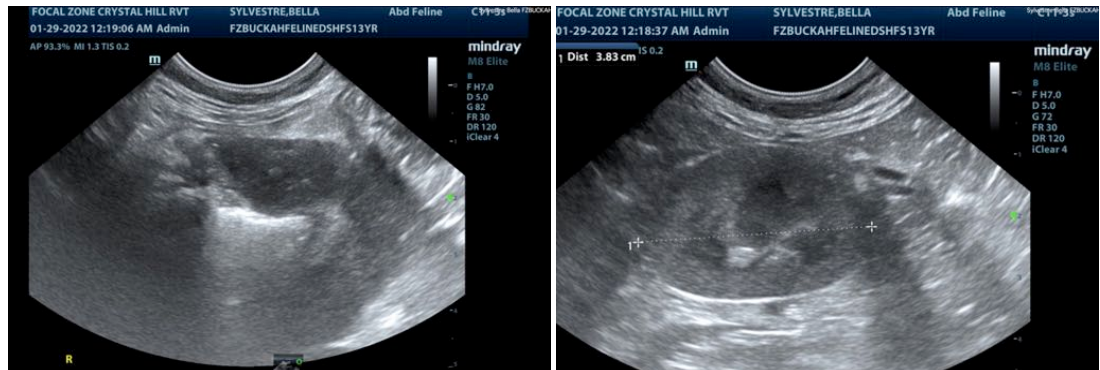
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**PATIENT**

Bella Sylvestre

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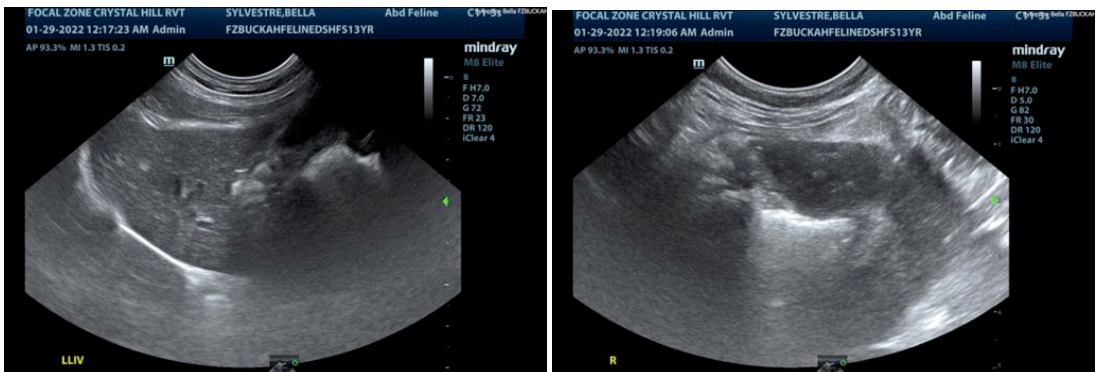
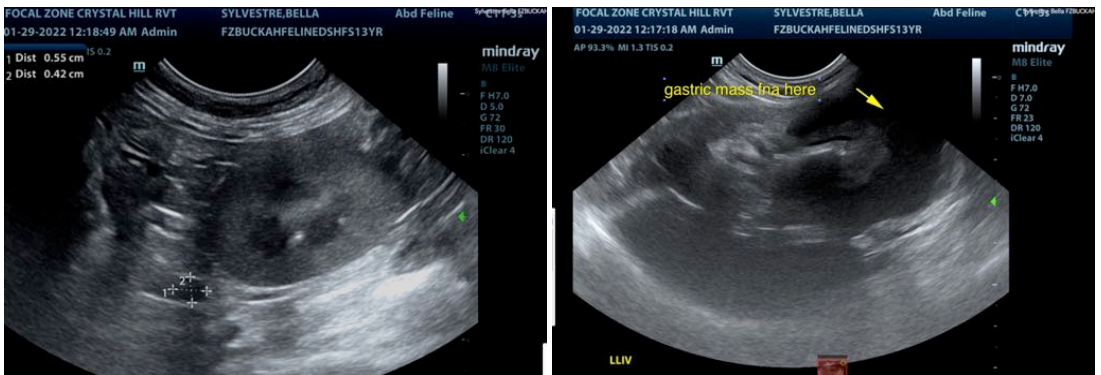
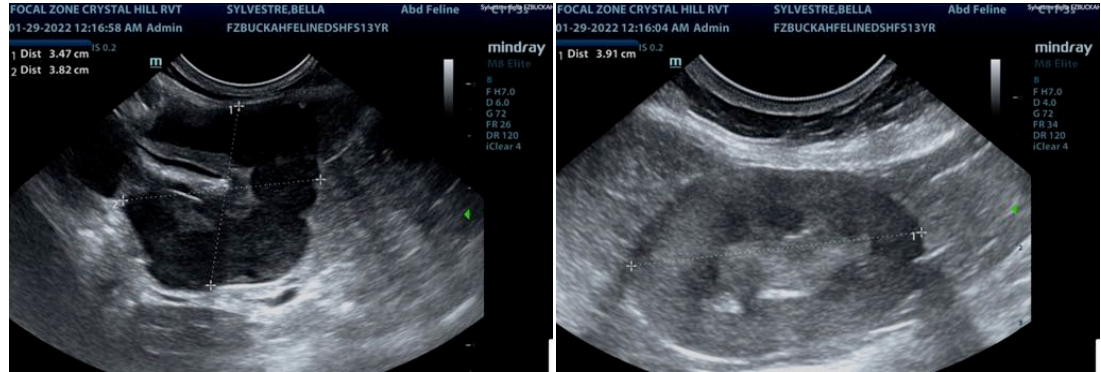
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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