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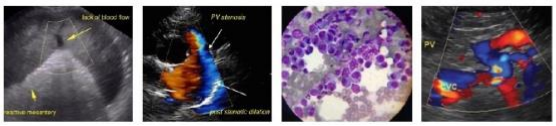

THE FOCAL ZONE
IMAGING PERFORMED BY
289-808-2608 info@thefocalzone.com

PATIENT

Ellie May Near

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

13 years

WEIGHT

6.3 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Simcoe AH

REFERRING VET

Dr. Leyton

INVOICE

14510

DATE

3/25/22

PRESENTING CLINICAL SIGNS

History: Presented March 22nd for not doing well, O noticed weight lost. P is in remission from DM (was on glargine). It was discontinued this year at the beginning of March. decreased appetite. SHe is currently on Gastro and DM diet 1/2 and 1/2. Drinking a lot, voiding normally. BM as per O they are regular. She is active, still jumping on things. On NOv 2021 was 7.68 kg on March 22 2022 was 6.3 kg ,BSC 7/9. M3/3 -Tp 39.0 C, MM: pink, moist. Heart and lungs normal at auscultation. Skin/coat dull. - Abdomen distended some tubular structured palpated on abdomen. P started growling when palpating her abdomen. -Rectal palpation reveled some feces and were soft able to change form easily. Good anal tone. -Enema was done. Discussed with O to repeat X-rays after enema and be fasted. O preferred and US to obtain more information. - O has also stopped giving Gabapentin for DJD / OA as was observing her being sedated. - This morning O informed me that P had a big lose BM as soon they were home from the enema. And This morning P had wet food and later 3 portions of the dry food. O said this is the most of food had had in a while. P today is very active and doing great. Was given Gabapentin about 35mins prior to scan.

Abnormal PE/Chem/CBC/UA Results: X rays 3 views (RL, LL and VD). Colon with heterogeneous material (feces) on descend colon seems slight more radio-opaque feces. small bladder, stomach with content in one of the view. Could visually well two kidneys in VD. Small intestines in LL and RL loss of detail as well, had like a mottled appearance. X rays will be sent to the email.

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 moderate 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. The left kidney measured 4.16 cm. The right kidney measured 4.26 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 left adrenal gland measured 0.42 cm. The right adrenal gland measured 0.46 cm.

Spleen

The **spleen** was enlarged, irregular and thrombosed at the splenic hilus.

Liver

Portions of the **liver** presented similar hypoechoic nodules in metastatic fashion. The gallbladder and common bile duct were unremarkable.

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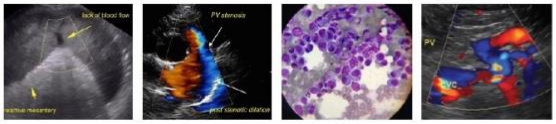

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Gastrointestinal

The **gastrointestinal tract** was enveloped by the nodular omental changes.

Pancreas

The **pancreas** revealed multifocal nodules and masses with coalesced omentum, consistent with carcinomatosis.

Free Abdomen

A moderate amount of mildly echogenic free fluid was noted in the **abdomen**.

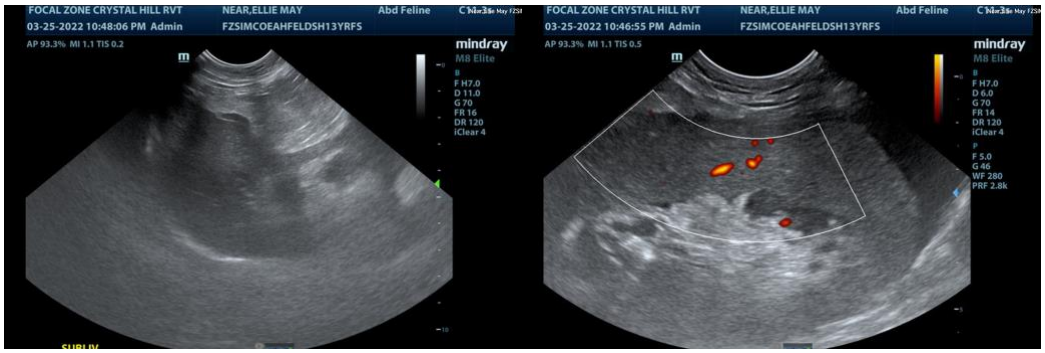
Hypoechoic, ill-defined omental nodular changes were noted adjacent to the urinary bladder.

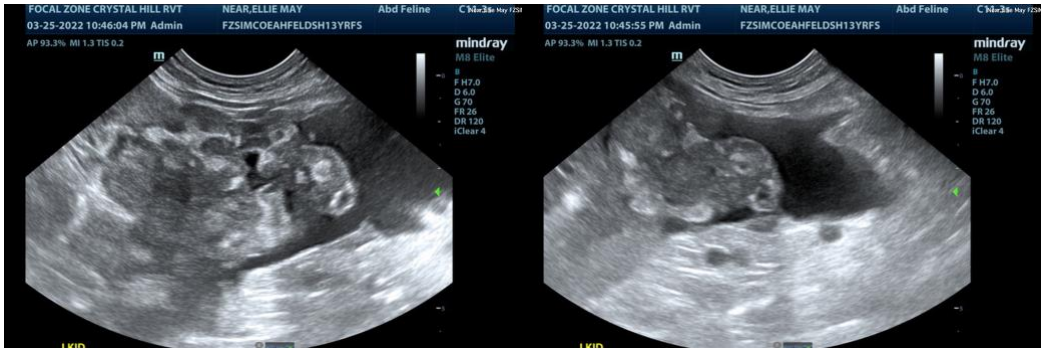
ULTRASONOGRAPHIC FINDINGS

- Extensive pancreatic mass and nodular omental changes
- Hypoechoic nodules in liver
- Enlarged spleen
- Age-related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Abdominal carcinomatosis, likely of pancreatic origin. FNA of the hypoechoic nodules and/or abdominocentesis and cytospin could be considered for further definition, however, prognosis is poor.





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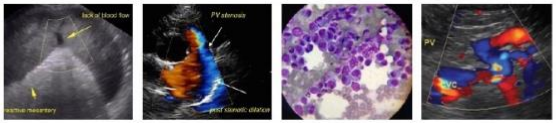

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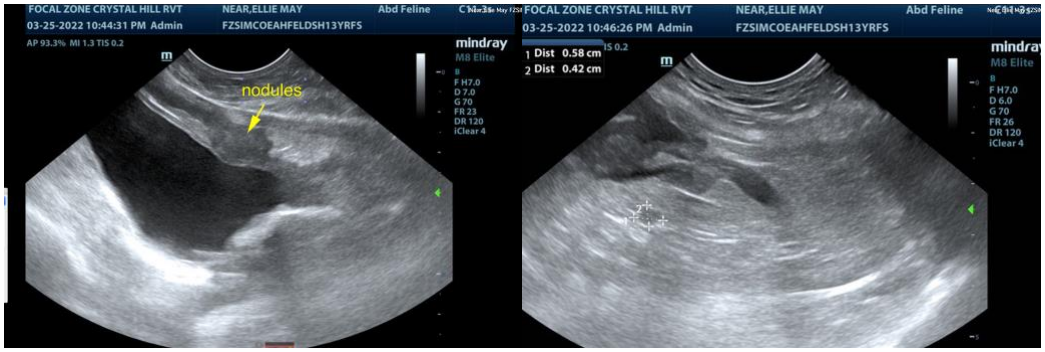

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Eric.Lindquist@SonoPath.com