



PATIENT

Yang Khalid

PRESENTING CLINICAL SIGNS

History: Lost 1.2 lbs, possible abdominal mass. Current meds: SSD/Clavamox
Abnormal PE/Chem/CBC/UA Results: 2+ bld on drop of urine

SPECIES

Mustelidae

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Ferret

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. A 1.14 cm calculus was noted. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

SEX

Female

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 2.62 cm with slight cortical cysts. The right kidney measured 2.52 cm.

AGE

6 ½ years

WEIGHT

1.7 lbs

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 0.43 cm and was normal in size and contour. The left adrenal gland measured 0.27 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

Spleen

The **spleen** is enlarged and measured 1.33 cm in width with multi-focal, hypoechoic nodular changes. The spleen revealed a honeycomb type pattern. The largest splenic nodule measured 0.5 cm.

HOSPITAL NAME

Tranquility VC

Liver

The **liver** revealed subtle, coarse architecture with minor, hypoechoic nodular changes. This is similar to what was noted in the spleen. 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.

REFERRING VET

Dr. Antonelli

INVOICE

32348

Gastrointestinal

DATE

8/16/22

The **gastrointestinal tract** was largely unremarkable other than minor thickening. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.



PATIENT

Pancreas

Yang Khalid

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.

SPECIES

Mustelidae

Free Abdomen

BREED

Iliac lymph node was enlarged, hypoechoic and irregular measuring 1.16 x 0.34 cm. Other lymph nodes are enlarged and irregular measuring up to 1.16 cm.

Ferret

SEX

ULTRASONOGRAPHIC FINDINGS

Female

Splenic infiltrative pattern with potential hepatic involvement.

Multi-focal lymphadenopathy, suspect lymphoma.

AGE

Concurrent bladder calculus.

6 ½ years

WEIGHT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1.7 lbs

FNA of the spleen and liver is recommended. The prognosis is guarded to poor.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Tranquility VC

REFERRING VET

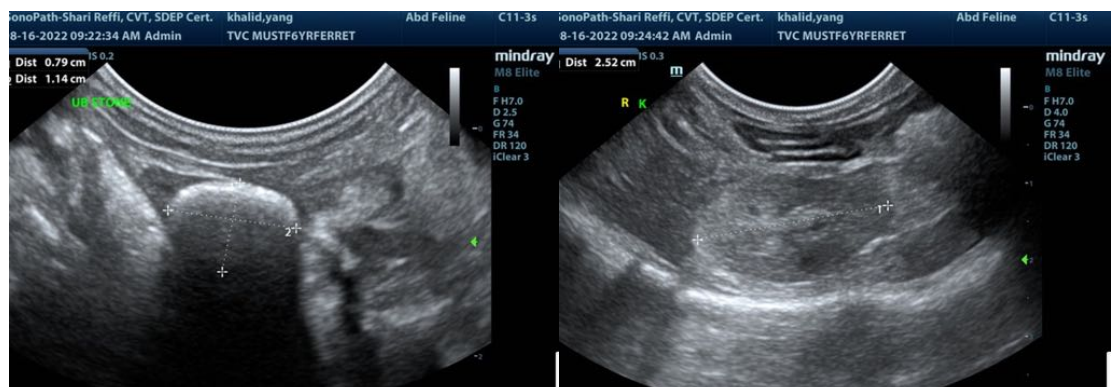
Dr. Antonelli

INVOICE

32348

DATE

8/16/22





PATIENT

Yang Khalid

SPECIES

Mustelidae

BREED

Ferret

SEX

Female

AGE

6 ½ years

WEIGHT

1.7 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Tranquility VC

REFERRING VET

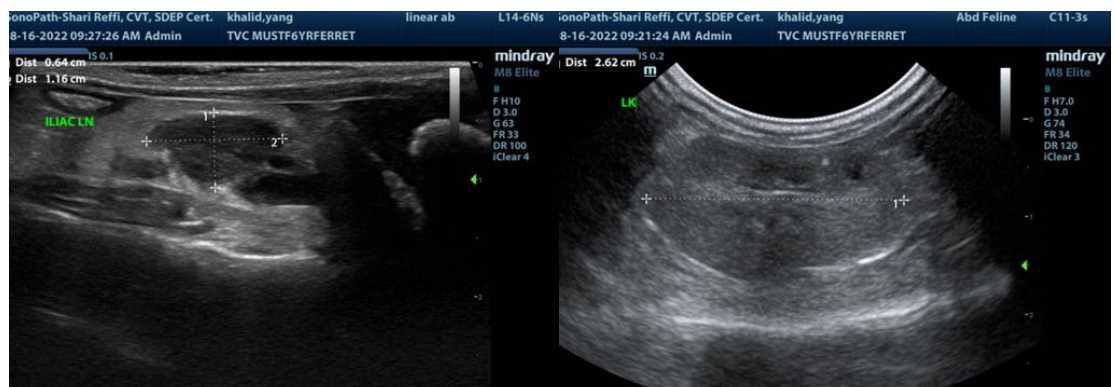
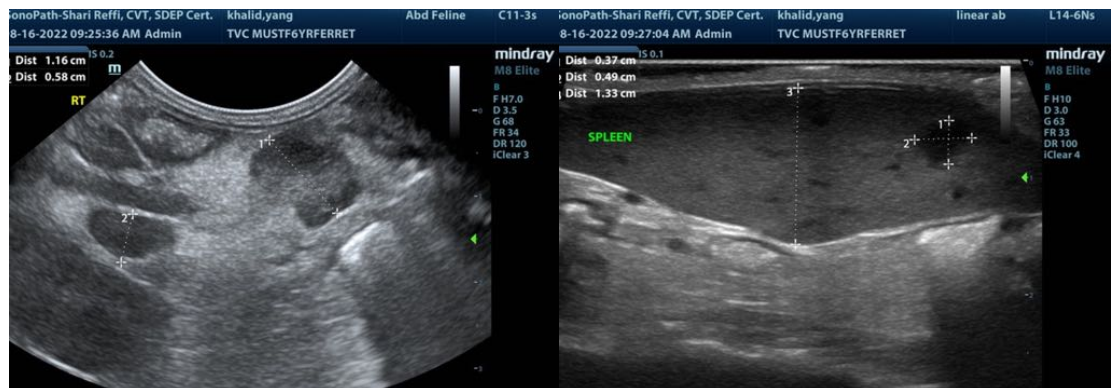
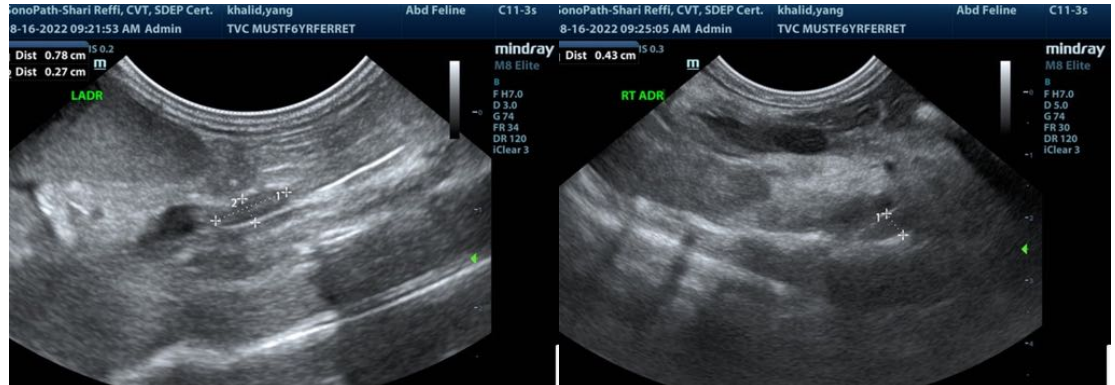
Dr. Antonelli

INVOICE

32348

DATE

8/16/22



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
Info@SonoPath.com