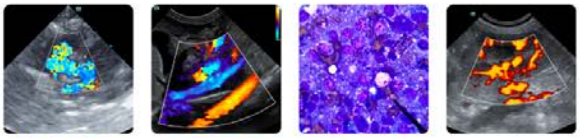

SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Black Dahlia Szczukowski

SPECIES

Feline

BREED

DLH

SEX

Female

AGE

11 Years

WEIGHT

4.66 kg

INTERPRETED BY

Greg Kuhlman, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Oxford Animal Hospital

REFERRING VET

Dr. Brodie

INVOICE

73600

DATE

3/12/26

PRESENTING CLINICAL SIGNS

Decreased appetite, decreased drinking, weight loss. QAR, prolonged skin tent, discomfort on abdominal palpation but no organomegaly noted.

Current Medications: cerenia 8mg once daily

Abnormal PE/Chem/CBC/UA Results: lab work attached

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder is moderately distended with anechoic urine. No uroliths are seen. The bladder wall is normal in appearance and thickness. No masses are seen. No papillae seen.

The right kidney presents normal size (3.8 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

The left kidney measures at the low end of normal for size at 3.1 cm. There is moderate loss of corticomedullary distinction and is mildly irregular in shape.

Adrenal Glands

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The right adrenal measures 4.2 mm in width.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The left adrenal measures 3.3 mm in width.

Spleen

The spleen is normal in size, shape, margination and echogenicity. No masses are seen. Normal blood flow.

Liver

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern.

The gallbladder presents normal size with anechoic contents. Normal gallbladder wall. No evidence of bile duct distention or obstruction.

Gastrointestinal

There is an intraluminal hypoechoic gastric mass present that measures 5.0 mm x 4.1 mm. It appears to be encompassing the majority of the gastric lumen. The mass does have blood flow determined by doppler exam, confirming it is a mass lesion and not a gastric ulcer. Caudal to the stomach there are several moderately to markedly enlarged gastric lymph nodes, the largest measuring 1.8 cm in diameter. The duodenum, jejunum, and ileum have normal wall layering and thickness. Colon contains normal contents with normal wall thickness.

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Pancreas

The right pancreas is diffusely mildly hypoechoic. No significant surrounding steatitis.

Free Abdomen

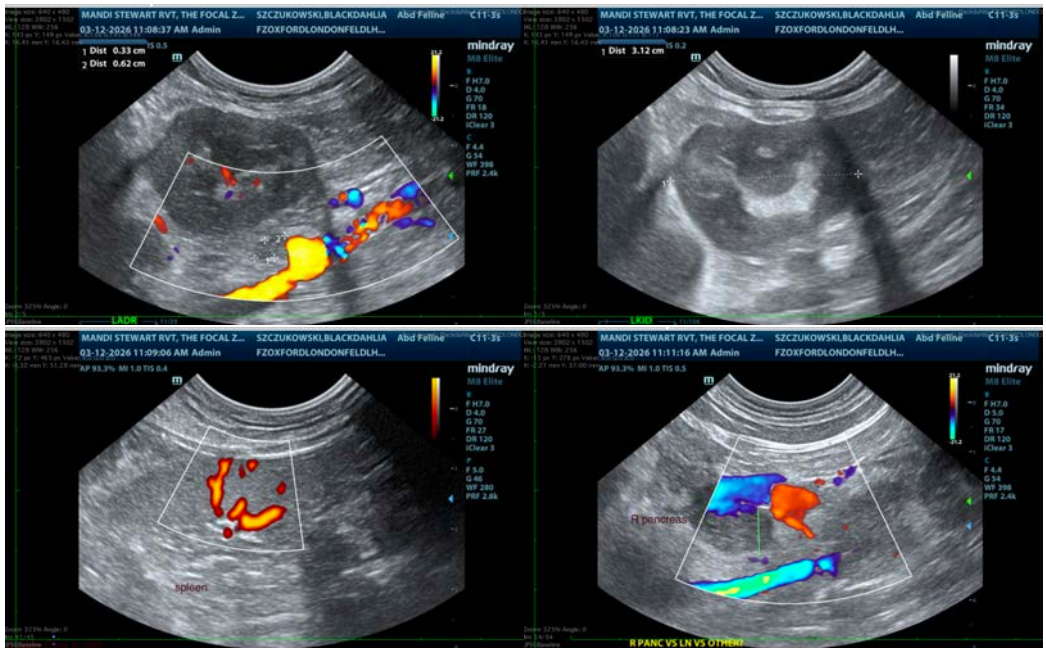
There are no enlarged abdominal lymph nodes seen on this exam. No free abdominal fluid is seen.

ULTRASONOGRAPHIC FINDINGS

- Gastric mass – Differentials include neoplasia such as lymphoma, less likely mast cell disease, possible adenocarcinoma or leiomyosarcoma. It is possible but unlikely that this mass lesion represents a hematoma from a gastric ulcer.
- Enlarged gastric lymph nodes – Most likely due to either round cell or metastatic neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend performing fine needle aspirates of both the gastric mass and any accessible perigastric lymph nodes and submitting for cytology. If cytology is inconclusive, either surgical or endoscopic biopsy of the gastric mass would be suggested at that time. If 3-view chest radiographs have not been performed, recommend do this to rule out pulmonary metastatic disease. Prognosis is guarded at this time pending results of cytology or histopathology.



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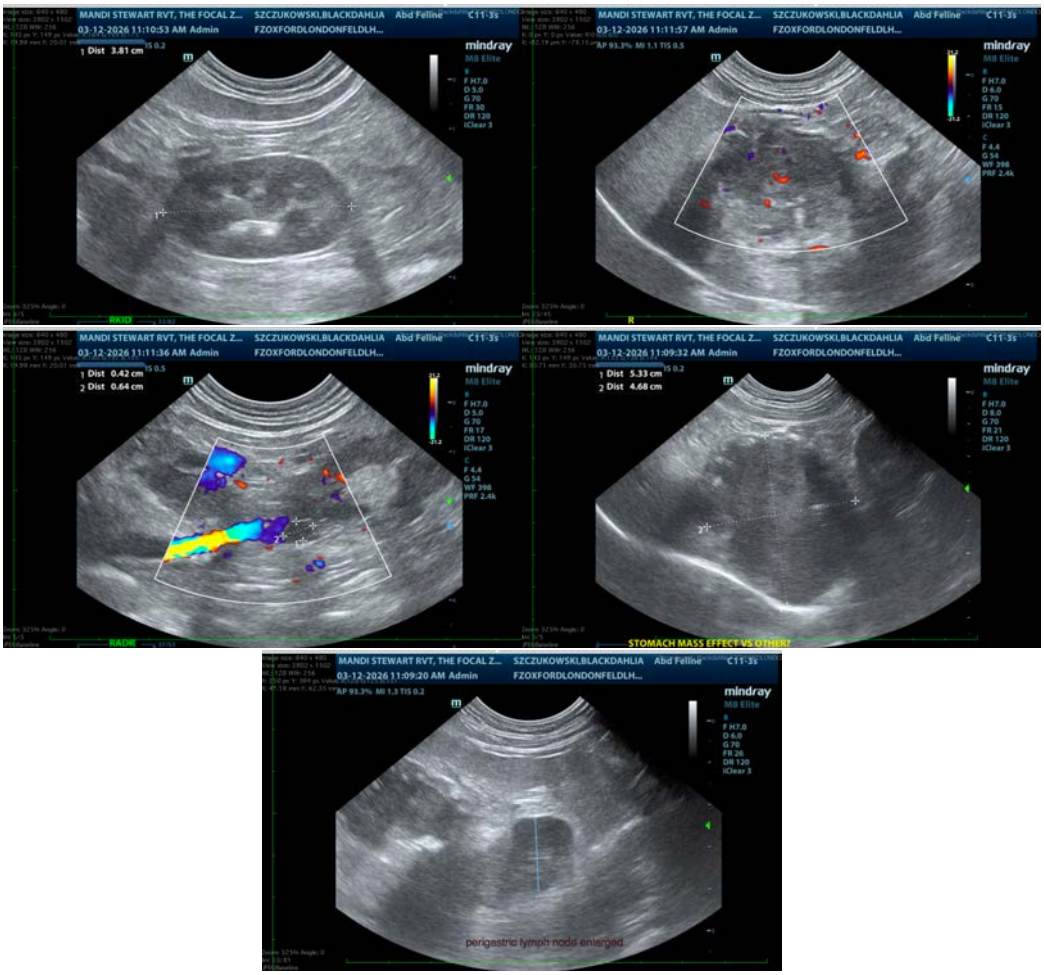

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Greg Kuhlman, DVM, DACVIM (SAIM)

Veterinary Internal Medicine Specialist
info@SonoPath.com