



**PATIENT PRESENTING CLINICAL SIGNS**

Jasper Hu History: Intermittent v+. Seemed to decrease on hypo allergenic diet initially but now v+ again  
Abnormal PE/Chem/CBC/UA Results: Cre 2.4, SDMA 16.8, Ca 11.1

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

9 years

**WEIGHT**

NP

**INTERPRETED BY**

Karen Ebersole, DVM,  
DABVP (Canine and  
Feline)

**IMAGING  
PERFORMED BY**

Jessica Miller, RDMS

**HOSPITAL NAME**

Animal General

**REFERRING VET**

Dr Ng Hudson

**INVOICE**

14201

**DATE**

8.23.23

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder was normal in size and shape. The serosal and mucosal surfaces were smooth and curvilinear. The bladder wall was normal in thickness for the volume of urine present. The urine was anechoic with no visible sediment or uroliths. The ureters were not visible, which is normal. The trigone was normal. The pelvic urethra was visualized to a depth of 3.00 cm and was normal in thickness and tone.

Both kidneys were of a normal size, shape, and position. The capsule was mildly irregular with no capsular expansion. There was mild to moderate increase in cortical echotexture. A slightly asymmetrical 1:3 cortex to medulla ratio was present, with a mild loss of corticomedullary distinction. These changes are largely as expected for the age of the patient. There was no pelvic dilation. The left kidney measured 3.70 cm in length. The right kidney measured 4.10 cm in length.

**Adrenal Glands**

Both adrenal glands were visualized and found to be normal in size and capsule contour. There was no capsular distortion. The parenchyma contained pinpoint to small areas of mineralization. This is an age-related finding and is not pathologic. The left adrenal gland measured 4.00 mm in width. The right adrenal gland measured 5.00 mm in width.

**Spleen**

The spleen was normal in size, shape, and position. There was a smooth capsule contour. The parenchyma was finely textured and homogeneous. There were no visible masses, nodules or evidence of infiltrative disease.

**Liver/Gallbladder**

The liver was normal in size and shape, with a smooth capsule contour. The hepatic parenchyma displayed normal echotexture and normal portal markings. The hepatic vasculature was normal in volume and structure. There was no evidence of inflammatory, neoplastic, infectious, or infiltrative disease. The gallbladder was normal in size and contents. The cystic and common bile ducts were normal with no evidence of obstruction or inflammation.

**Gastrointestinal**

The stomach was empty with normal wall thickness and layering. There was a mural mass in the distal duodenum that met neoplastic criteria. The mural mass was asymmetric in the duodenal wall (measuring approximately 3.00 cm in length and 1.50 cm in width). The mass was compressing the lumen and likely causing a partial obstruction. The mural mass was hypoechoic with no normal discernible layering visible. There was a second mass in the ileum that was smaller (measuring 0.70 cm in width) that was hypoechoic. There was significant mesenteric inflammation around the duodenal mass. It also displaced the right pancreas due to its size. The ileoceocolic junction was visualized and normal. The visible colon was normal.

**Pancreas**

The left pancreas normal. The right limb of the pancreas was normal, however, was displaced by the adjacent duodenal mural pathology.

**Free Abdomen**

There was one enlarged mesenteric, rounded, hypoechoic lymph node with reactive mesentery around it, near the mesenteric root.

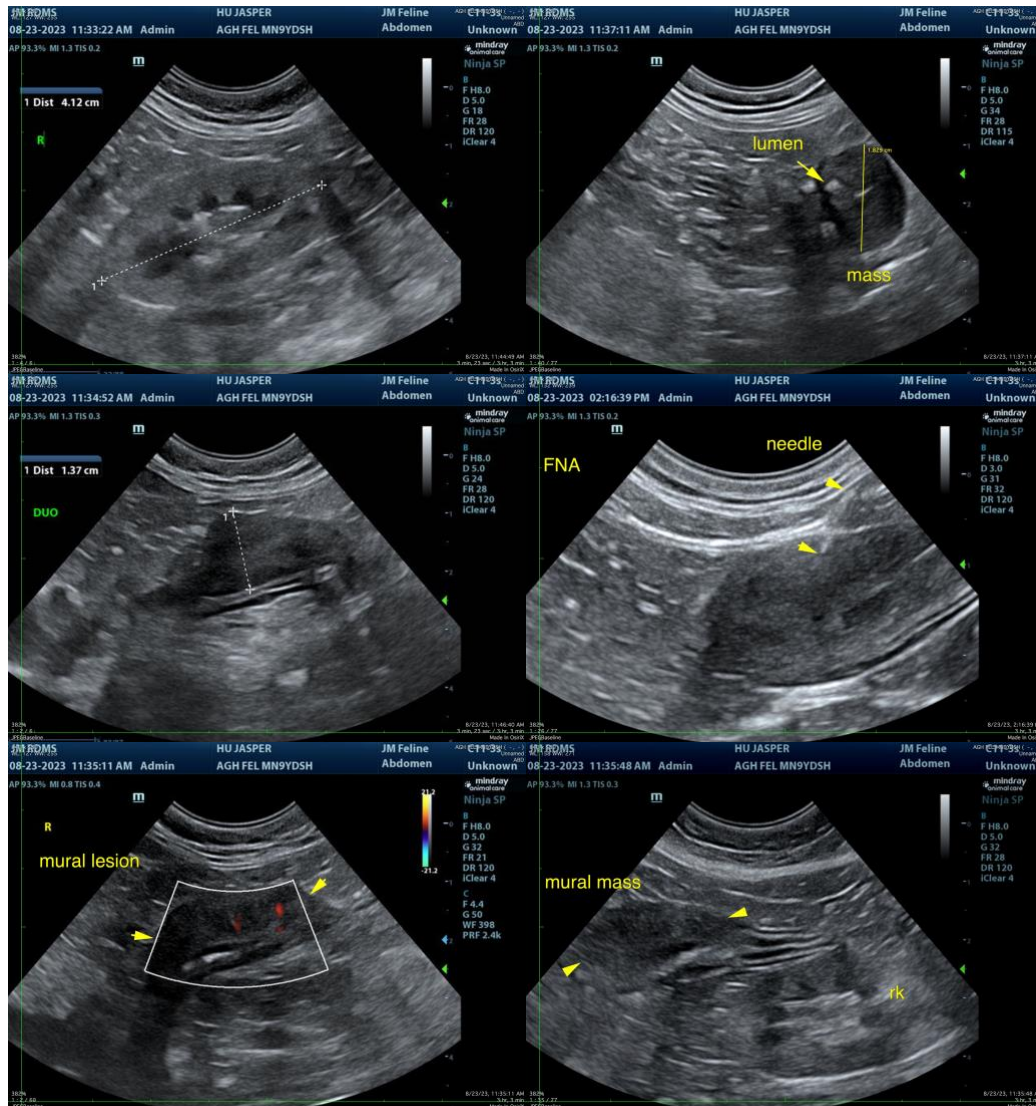


**PATIENT FINDINGS**

- |   |  |
|---|--|
| <p>Jasper Hu</p> <p><b>SPECIES</b></p> <p>Feline</p> <p><b>BREED</b></p> <p>DSH</p> <p><b>SEX</b></p> <p>Neutered Male</p> <p><b>AGE</b></p> <p>9 years</p> <p><b>WEIGHT</b></p> <p>NP</p> <p><b>INTERPRETED BY</b></p> <p>Karen Ebersole, DVM,<br/>DABVP (Canine and<br/>Feline)</p> <p><b>IMAGING<br/>PERFORMED BY</b></p> <p>Jessica Miller, RDMS</p> <p><b>HOSPITAL NAME</b></p> <p>Animal General</p> <p><b>REFERRING VET</b></p> <p>Dr Ng Hudson</p> <p><b>INVOICE</b></p> <p>14201</p> <p><b>DATE</b></p> <p>8.23.23</p> | <ul style="list-style-type: none"> <li>• Duodenal mural mass – lymphoma vs FIP vs severe inflammatory</li> <li>• Mural lesion in the ileum</li> <li>• Moderate aging changes in both kidneys</li> <li>• Mesenteric lymphadenopathy – neoplastic infiltration suspected but cannot rule out reactive lymphadenopathy</li> </ul> |
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Fine-needle aspirate of both mural masses was done without complication. The cytology should prove useful in differentiating between lymphoma, FIP, or a severe inflammatory lesion. FIP can present in a similar manner to lymphoma at times.





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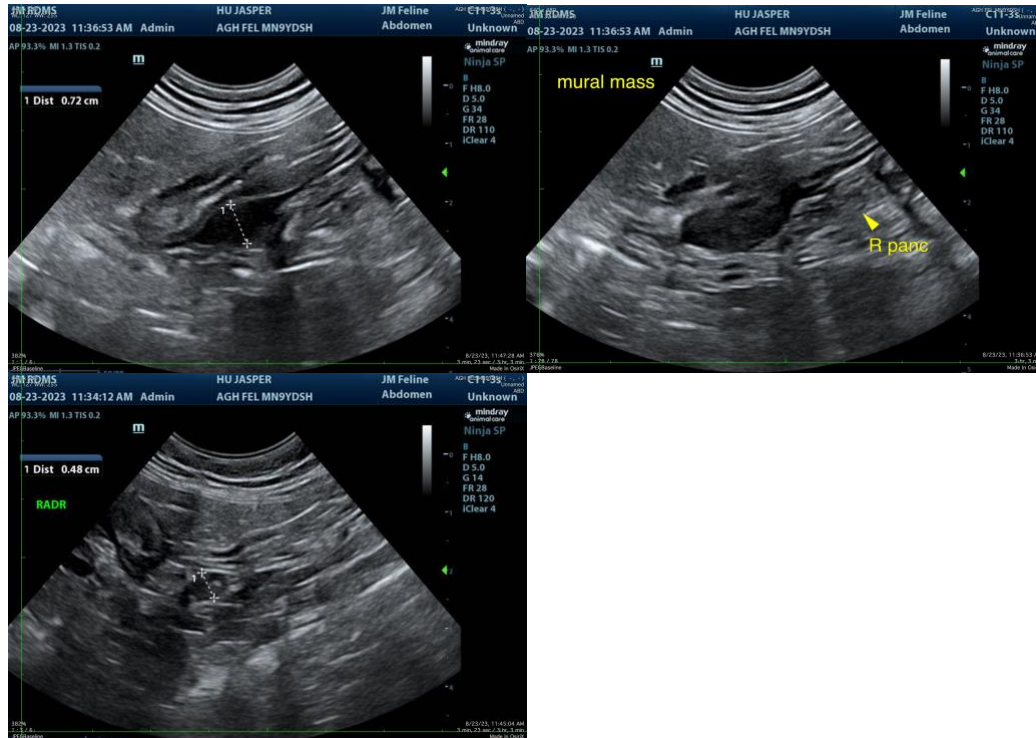
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Karen Ebersole, DVM, DABVP (Canine and Feline practice)  
info@SonoPath.com