

PATIENT

Hudson McCallum

PRESENTING CLINICAL SIGNS

PROBLEM: SPORADIC VOMITING HISTORY: OWNER REPORTS SPORADIC VOMITING, HAS VOMITED HAIRBALLS TYPICALLY, BUT FREQUENCY OF VOMITING EPISODES GETTING WORSE OVER THE LAST COUPLE OF WEEKS. SOME FROTHY, LIGHT PINK FLUID RECENTLY NOTED IN VOMITUS. OCCASIONAL COUGH, ONCE A WEEK. NO S/D. EATING AND DRINKING NORMALLY. NORMAL BM AND URINATIONS. SOME WT LOSS OVER TIME, USUALLY 15-16#. ATTITUDE: VERY SWEET APPETITE: WNL DIET: WERUVA SHREDDID CHX, FIRST MATE, BROTH APPEARANCE: BARH BCS(1-9): 6 WEIGHT: 14.0 pounds TEMP: 101.5 PULSE: 180 RESPIRATION: 60 INTEG: WNL EENT: WNL MS: WNL CIRC: WNL RESP: WNL GI: WNL GU: WNL LN: WNL NEURO: WNL ADDITIONAL COMMENTS: ASSESMENT: SPORADIC VOMITING, POSSIBLE HEMATEMESIS-- OPEN DIAGNOSIS R/O INFECTION, INFLAMMATION, IBD, METABOLIC DISEASE, NEOPLASIA

SPECIES

Feline

BREED

Maine Coone

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

AGE

13 Years

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

WEIGHT

14 Pounds

The left kidney has a normal shape and size (3.8 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

The right kidney has a normal shape and size (4.1 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

The left adrenal gland is normal in size measuring 0.53 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

HOSPITAL NAME

Sierra Pet Clinic

The right adrenal gland is normal in size measuring 0.38 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

Spleen

REFERRING VET

Dr. Sperka

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The spleen measures 1.05 cm in width at the level of the hilus. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

INVOICE

34082

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

DATE

1/7/22



PATIENT

Hudson McCallum

SPECIES

Feline

The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

Gastrointestinal

BREED

Maine Coone

The stomach contains minimal luminal contents. There is a focal area of severe thickening in the gastric wall, which appears very hypoechoic with a complete loss of layering. This area measures approximately 3.5 cm long, and the gastric wall in this area measures 1.5 cm thick. Some of the areas of the gastric wall appear more normal. Findings are most consistent with a gastric wall mass.

SEX

Neutered Male

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (between 0.13-0.38cm in wall thickness) and the jejunum measured as normal (between 0.15-0.36cm.)

AGE

13 Years

Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

WEIGHT

14 Pounds

Pancreas

The pancreas is prominent and hypoechoic as compared to the surrounding isoechoic mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is a prominent cranial abdominal lymph node measuring 1.15 cm x 0.97 cm. An additional lymph node is measured at 0.47 cm in the cranial abdomen. The omentum is generally of normal echogenicity.

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

Other

A brief view of the heart was submitted. No significant pericardial effusion was seen.

HOSPITAL NAME

Sierra Pet Clinic

ULTRASONOGRAPHIC FINDINGS

REFERRING VET

Dr. Sperka

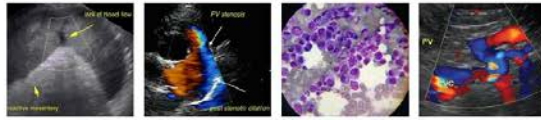
- Focal severe gastric wall thickening with complete loss of layering – consistent with infiltrative disease. Differentials would include neoplasia (LMA, ACA, etc.), severe ulceration, a leiomyoma or leiomyosarcoma, etc.
- Enlarged cranial mesenteric lymph nodes – most concerning for possible metastasis. Inflammatory change is also possible.
- Hypoechoic, prominent pancreas – The pancreatic changes are most consistent with mild pancreatitis or a recent episode of pancreatic inflammation.

INVOICE

34082

DATE

1/7/22



PATIENT

Hudson McCallum

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Feline

The gastric wall appears severely thickened and hypoechoic. Recommend a fine needle aspirate of the gastric wall. If this cannot be reached, or a good cytologic sample cannot be obtained, then consider surgical biopsies. Endoscopic biopsies could be considered, but I'm concerned that this mass lesion may be deeper than the mucosa. Recommend 3-view thoracic radiographs. Additionally, a fine needle aspirate of a cranial abdominal lymph node could be considered.

BREED

Maine Coone

SEX

Neutered Male

AGE

13 Years

WEIGHT

14 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Sierra Pet Clinic

REFERRING VET

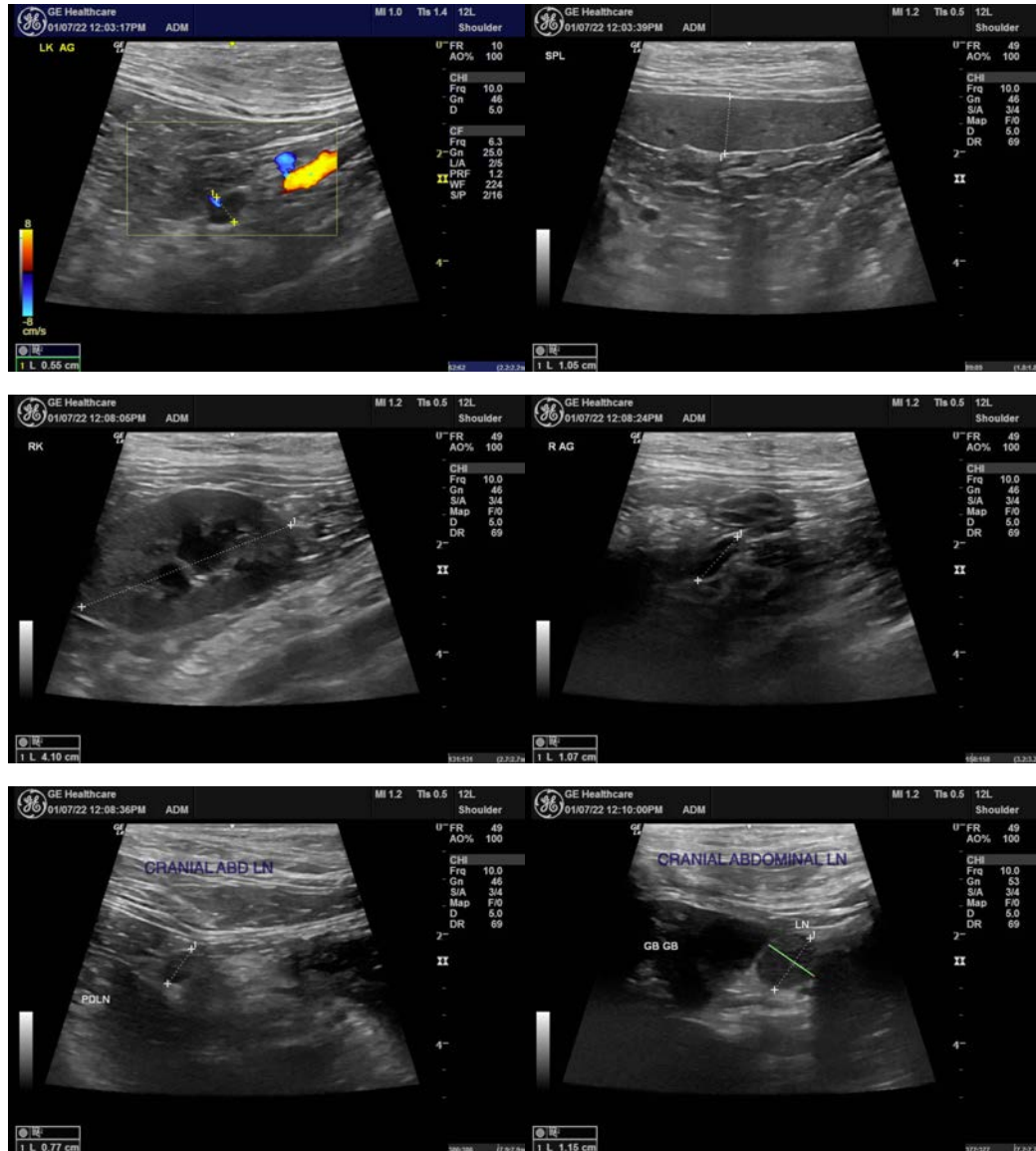
Dr. Sperka

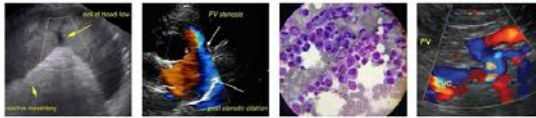
INVOICE

34082

DATE

1/7/22





PATIENT

Hudson McCallum

SPECIES

Feline

BREED

Maine Coone

SEX

Neutered Male

AGE

13 Years

WEIGHT

14 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Sierra Pet Clinic

REFERRING VET

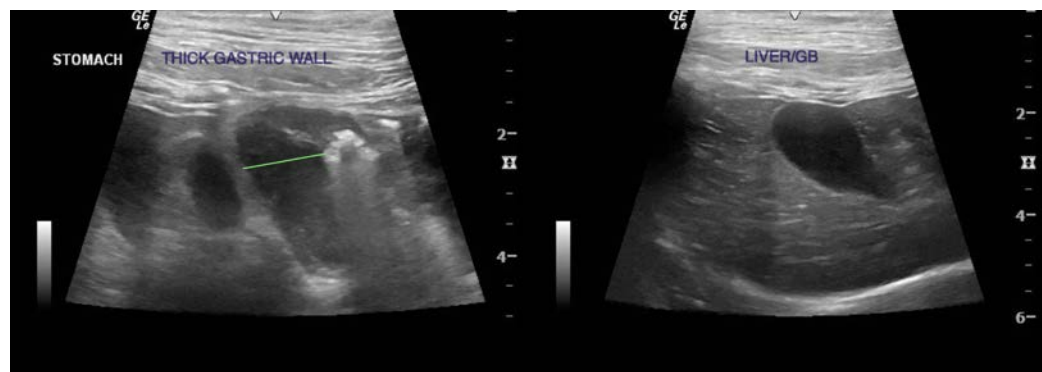
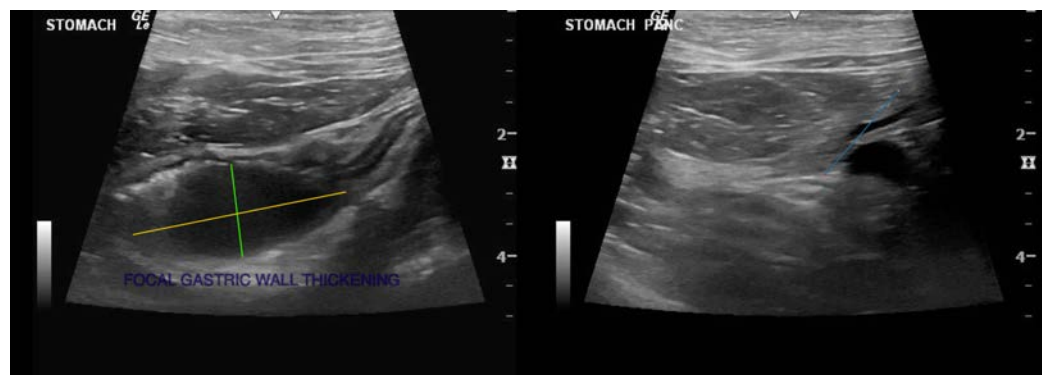
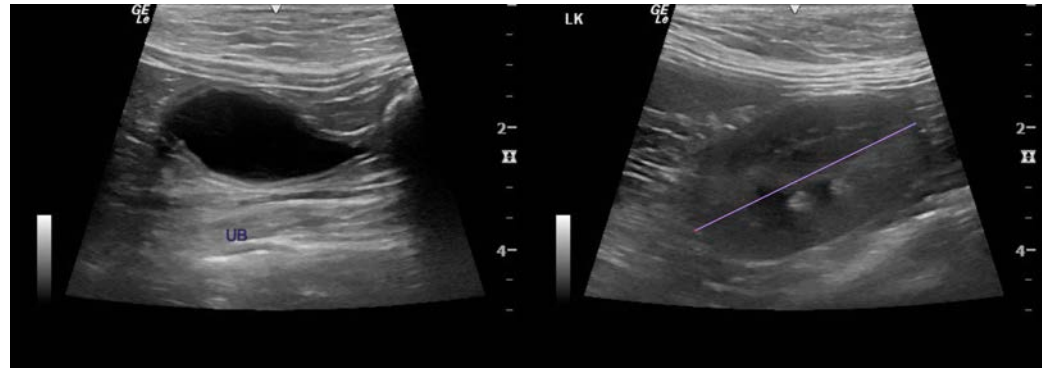
Dr. Sperka

INVOICE

34082

DATE

1/7/22



The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

kathleen.sennello@sonopath.com