



**PATIENT**

*The submitted study contained 19 videos and 8 still images for review.*

Max Leyba

**PRESENTING CLINICAL SIGNS**

**SPECIES**

Max is a MN feral cat that stays in a neighborhood and is sometimes taken care of by rescuer. Was brought today after a neighbor thought that he might have been attacked. Patient was bright and alert at presentation but showed signs of respiratory distress including abdominal breathing. After noticing pleural effusion, thoracocentesis was performed and around 290ml were removed.

Feline

**BREED**

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

DSH

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**SEX**

MN

**AGE**

10yr

Mildly prominent size and mild asymmetrical margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.7 cm in length. The right kidney measured 4.7 cm in length

**WEIGHT**

11.3

The area of the aortic trifurcation was free of pathology.

**Adrenal Glands**

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

**Spleen**

The spleen was indistinctly visualized without overt pathology subjectively measuring 0.76 cm in width.

**IMAGING PERFORMED BY**

Dr. Kim

**Liver/Gallbladder**

The liver was subjectively enlarged with symmetrical to mildly rounded contour and generalized mild uniformly increased parenchyma echogenicity. The hepatic and portal vasculature were normal in appearance without signs of congestion.

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Animal Hospital

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The proximal common bile duct was dilated and tortuous without overt post hepatic obstruction.

**REFERRING VET**

Dr. Chun

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

**INVOICE**

12656ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Intermittent non-specific hyperechoic jejunal mucosal speckling was present. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

**DATE**

01/10/2023

**Pancreas**



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The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

**SPECIES**

Feline

**Free Abdomen**

Mild volume peritoneal free fluid was present. Generalized hyperechoic lymphatic mesentery was present.

**BREED**

DSH

Multiple enlarged, hypoechoic mid to caudal abdominal mesenteric root lymph nodes were present with potential accumulated lymphadenopathy or lymphatic mass present in the area of the mesenteric root vasculature measuring ~ 6.0 cm x 4.8 cm. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by echogenic to reactive mesentery.

**SEX**

MN

Concurrent enlarged, hypoechoic medial iliac root lymph nodes were present. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by echogenic to reactive mesentery. The mesenteric root lymph nodes measured 1.6 cm.

**AGE**

10yr

**ULTRASONOGRAPHIC FINDINGS**

- Non-specific mildly prominent to chronic kidneys
- Multicentric hypoechoic to swollen intra-abdominal and medial iliac lymphadenopathy with potential mid abdominal lymphatic mass in the area of the mesenteric root vasculature
- Mild volume peritoneal free fluid
- Hepatomegaly exhibiting mild parenchyma hyperechogenicity

**WEIGHT**

11.3

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

The degree and extent of intra-abdominal and medial iliac lymphadenopathy is strongly suggestive of neoplastic criteria i.e., lymphoma or other round cell neoplasia. Potential for hepatic involvement is possible although not definitive.

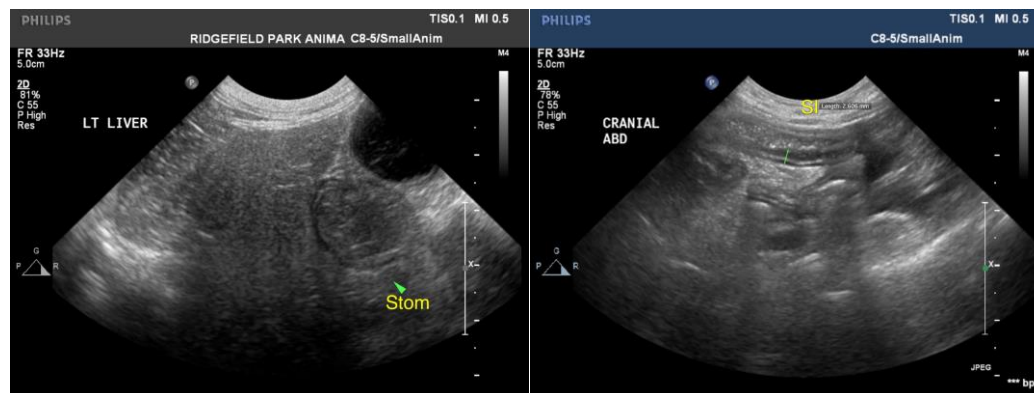
**IMAGING PERFORMED BY**

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The effusion is suspected to be secondary to lymphatic obstruction. Assuming normal clotting status and using a 25g needle, a hepatic and lymphatic FNA for screening cytology is warranted for further assessment and potential oncology consult with chemotherapeutic intervention.

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**SPECIES**

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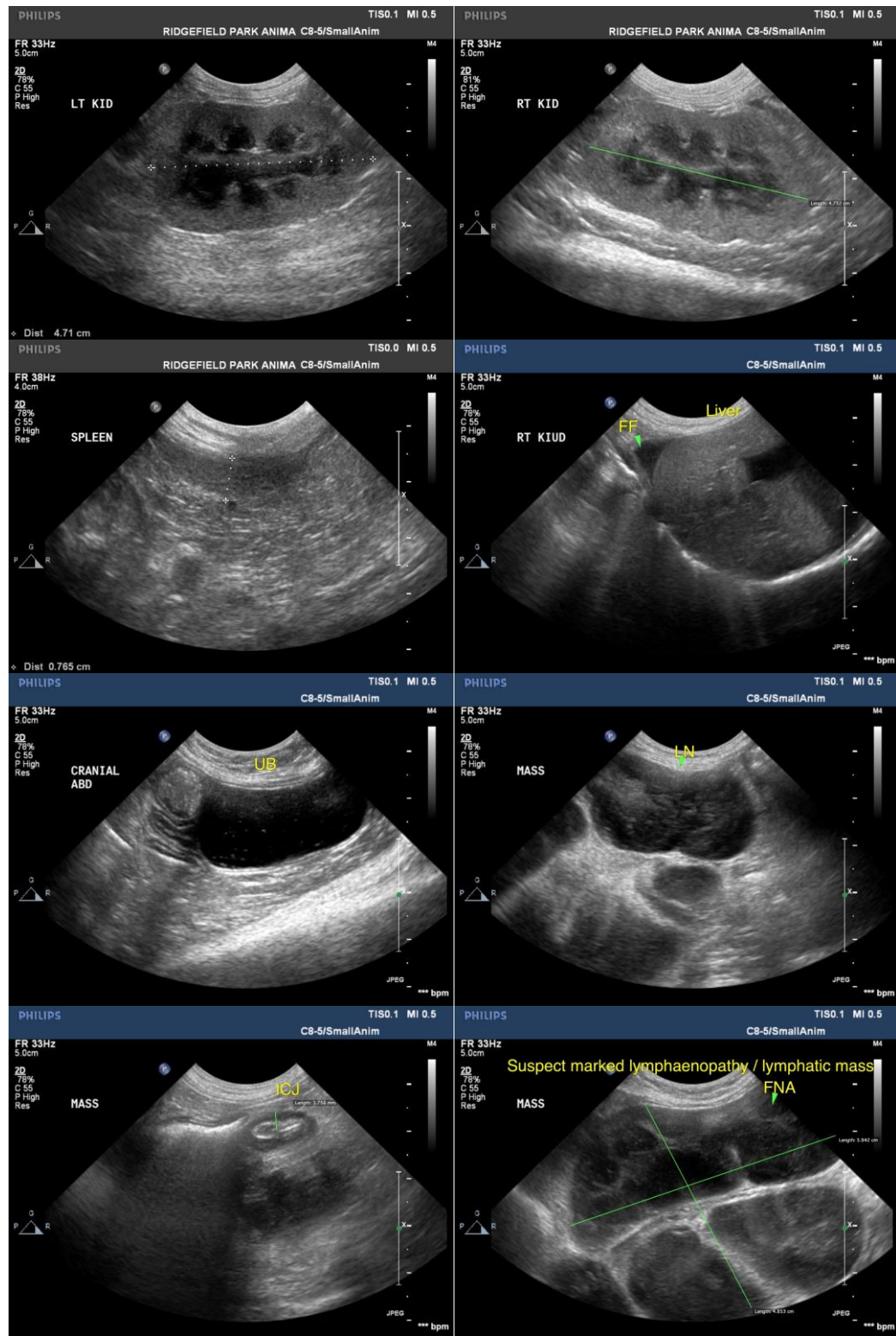
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



**PATIENT**

Max Leyba

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.

**SPECIES**

Feline

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)

[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)

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