**PATIENT**

Oliver Blancett

SPECIES

Feline

BREED

DMH

SEX

M

AGE

7mo

WEIGHT

4.2lb

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING
PERFORMED BY**

Rachel Runnells RVT

HOSPITAL NAME

SVS Imaging KC

REFERRING VET

Dr. Mulloy

INVOICE

12819ag

DATE

01/30/2023

PRESENTING CLINICAL SIGNS

Indoor only cat, current on all vaccines. First presented 12/14/22 with lameness on rear left leg, patient fell off table 5 pounds Temp 103.9 F. PE= applying weight to all four legs, very nervous. Gave antibiotic injection and ant inflammatory injection. Presented again on 1/16/23 at 4.8 pounds Temp 102.7 F, Patient still walking funny and being more affectionate. PE= response to palpation of lumbar back, treated with depo medrol injection. Presented 1/27/23 at 4.2 pounds and temp 102.7 F, rechecking leg- not walking well, not sure if weakness?

Abnormal PE/Chem/CBC/UA Results: Cbc= High WBC's (32k) Neutrophils (30k) RBC's 6.46, HGB 8.4, HCT 29% T/4= WNL Chem= AMY (1629) TP (9.4) GLOB (6.9) Combo test = negative for heartworms, fiv, and feluk. Xrays (1/27) = unremarkable thorax, serosal detail is decreased, left sided renomegaly and suspected right renomegaly, however retroperitoneal detail is decreased resulting in poor visualization of renal margins. Colon is ventrally displaced at level of kidneys, spleen not well visualized. Radiograph consult rule outs = FIP, abscess, pyelonephritis, perinephric fluid accumulation, and hydronephrosis

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**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 no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The kidneys were enlarged with moderately hyperechoic renal cortex and medulla echogenicity. A hypoechoic halo was present at the periphery of the cortex. Mild dilation of the renal diverticuli was present. Mild peritoneal to retroperitoneal free fluid was present. Mild bilateral pyelectasia was present. The left kidney measured 5.8 cm in length. The right kidney measured 5.3 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.28 cm width. The right adrenal gland was indistinctly visualized measuring 0.26 cm width.

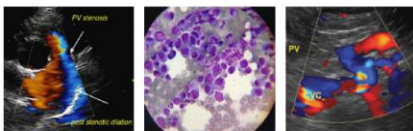
Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.96 cm in width at the level of the hilus.

Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably echogenic non-shadowing ingesta with no signs of ileus, obstruction or foreign material.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. 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.

BREED

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Pancreas

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.

SEX

M

Free Abdomen

No omental masses or overt lymphadenopathy was present.

AGE

7mo

ULTRASONOGRAPHIC FINDINGS

- Bilateral renal lymphoma pattern
- Associated mild retroperitoneal to peritoneal free fluid

Secondary

- Mild gastric ingesta, likely post prandial presentation

WEIGHT

4.2lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sonographic appearance of the bilateral kidneys is most consistent with bilateral renal lymphoma. Potential for significant bilateral nephritis or FIP is possible yet thought less likely. A screening renal cortex FNA cytology with potential oncology consult could be considered. Unfortunately an unfavorable prognosis is indicated.

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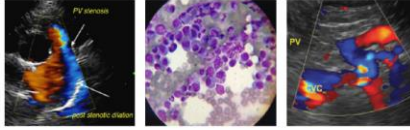
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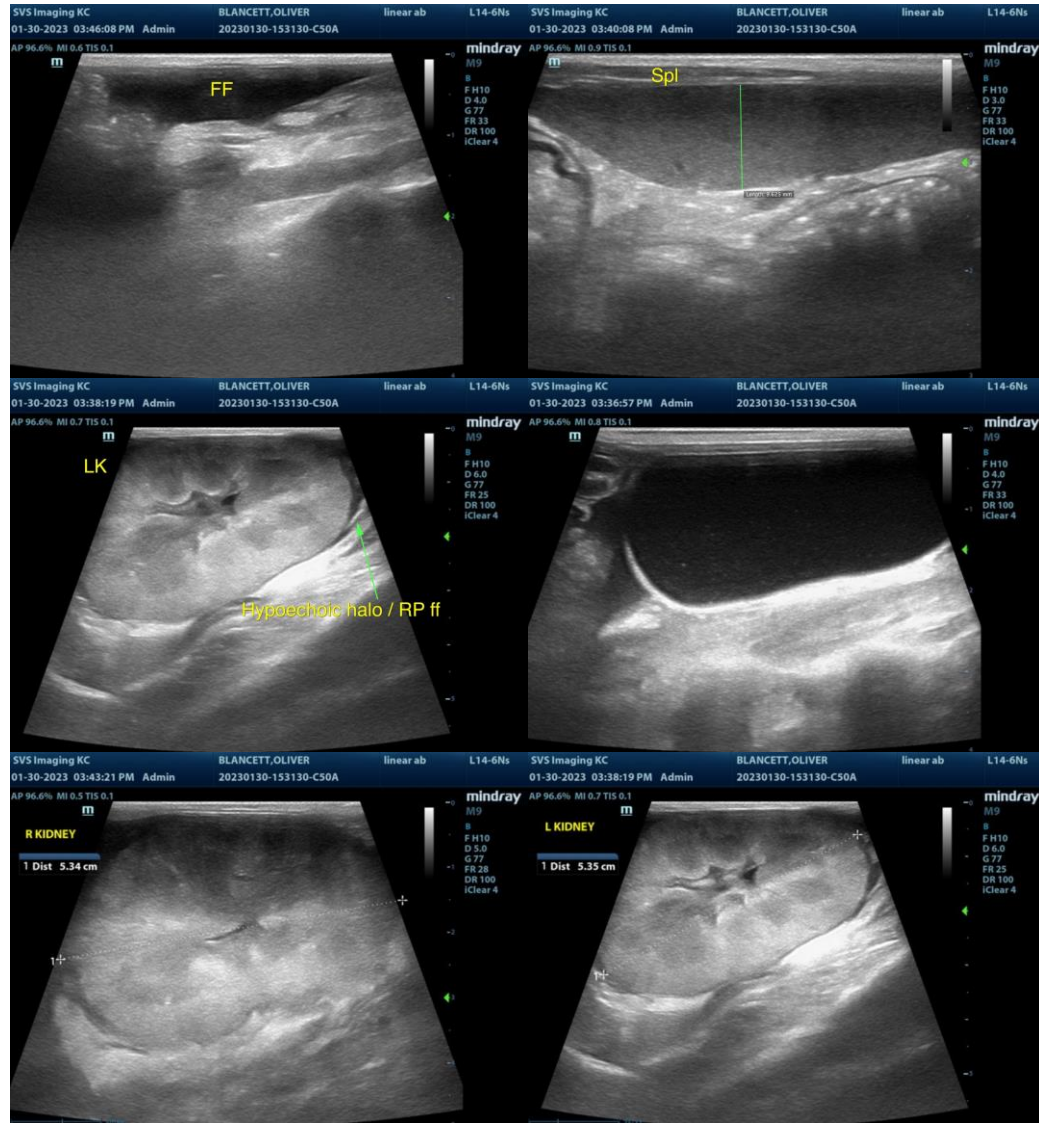
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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