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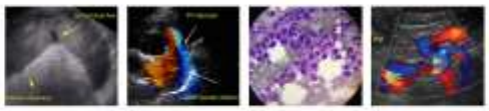
Pet Animal Ultrasound Service



SonoPath
Clinical Sonography & Telecytology
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1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Hugh Farrell

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11 years

WEIGHT

8.3 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Wignall AH

REFERRING VET

Heather Cringan, DVM

INVOICE

12429

DATE

10/21/21

PRESENTING CLINICAL SIGNS

Heart murmur ll/VI, intermittent gallop rhythm. Azotemia/ elevated kidney values. Weight loss, decreased appetite. Having bi-cavity ultrasound exams. BP- 148 mmHg x3

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 was noted.

The area of the aortic trifurcation was free of pathology.

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. The left kidney measured 5.2 cm in length. The right kidney measured 5.7 cm in length

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width. No overt pathology was noted in the area of the right adrenal gland.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease. The spleen was normal in size, measuring 0.7 cm in width.

Liver/ Gallbladder

The liver exhibited mild enlargement. The parenchyma of the liver was subjectively increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The caudate liver lobe adjacent to the right kidney exhibited generalized hypoechoic parenchyma exhibiting moderate coarse echotexture. Multiple, mildly expansive, subtle, hypoechoic to heterogeneous parenchymal nodular lesions were present. An example measured 2.0 cm - 2.5 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.

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. The gastric body wall width measured 0.25 cm.

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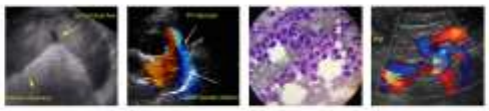

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The small intestine was sonographically unremarkable to the level of the Ileocolic junction. Normal jejunum measured 0.22 cm wall width.

A proximal colon mural mass exhibiting proximal colon mural hypertrophy, decreased mural echogenicity, and loss of district proximal colon wall detail was present. The mass measured approximately 3.2 cm x 2.2 cm.

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 were evident.

Free Abdomen

Associated minor colic lymphadenopathy and regional pericolic reactive mesentery was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bilateral renal lymphoma pattern
- Multifocal, mildly expansive, hepatic parenchymal nodules
- Proximal colon mural mass

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for a definitive diagnosis, the sonographic abnormalities are most consistent with multicentric neoplasia involving the bilateral kidneys, liver, and proximal colon. Multicentric lymphoma is considered a top differential diagnosis vs. other neoplasia with unlikely potential for multicentric Inflammatory or non-neoplastic disease.

Assuming normal clotting status, ultrasound-guided FNA of the proximal colon mural mass, a liver nodule, +/- renal cortex could be considered with potential for oncology consultation. However, a likely unfavorable long-term prognosis Is unfortunately indicated.

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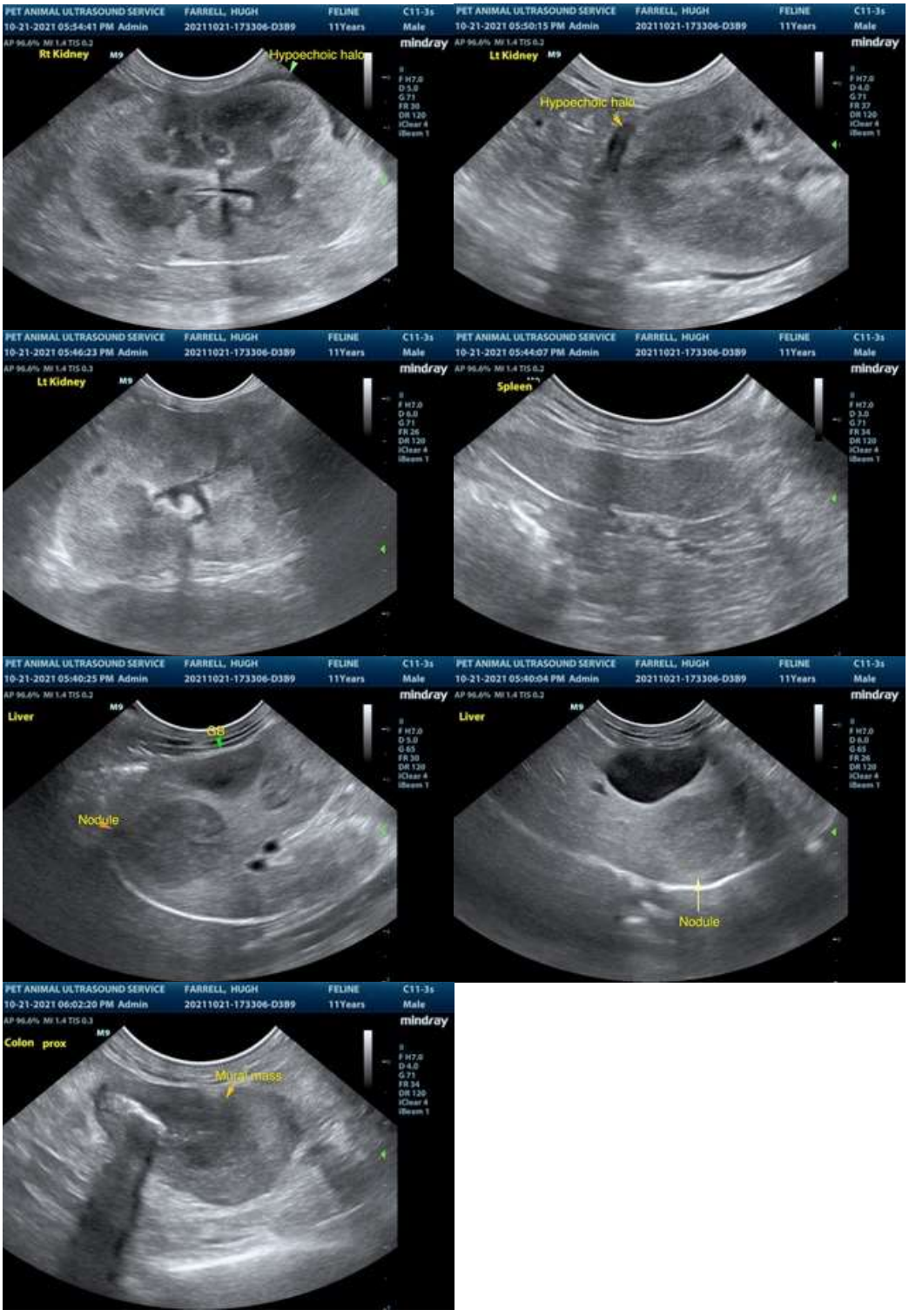

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not

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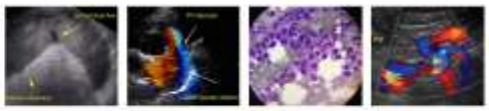

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visible in the image/video clips provided.

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)
info@SonoPath.com