



PATIENT	PRESENTING CLINICAL SIGNS
Oscar Dolly	Abdominal mass= Mass/Megly- mid cranial nodular mass about 2 inches in diameter. Free fluid wave, distended abdomen, ascites
SPECIES	
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	<i>Urinary System</i>
Dolly	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.
SEX	
MN	The area of the aortic trifurcation was free of pathology.
AGE	
15 years	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with mild uniform increased cortex echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.4 cm in length. The right kidney measured 4.6 cm in length.
WEIGHT	
9.75 lbs.	
INTERPRETED BY	<i>Adrenal Glands</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left and right adrenal glands were not definitively visualized owing to regional periadrenal omental artifact.
IMAGING PERFORMED BY	<i>Spleen</i>
Jenna Walsh, CVT	The spleen exhibited generalized enlargement, measuring 1.0 cm - 1.1 cm width at the level of the hilus. The spleen presented a subtly decreased splenic parenchyma echogenicity with moderate coarse echotexture. No distinct splenic masses or nodules were noted.
HOSPITAL NAME	<i>Liver/ Gallbladder</i>
Countryside AC	The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The common bile duct exhibited mild proximal dilation not consistent with post-hepatic obstruction.
REFERRING VET	
Dr. Cox	
INVOICE	<i>Gastrointestinal</i>
12463	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.
DATE	
10/27/21	



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Oscar Dolly

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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.

Pancreas

A nonhomogeneous mass was present in the area of the pancreas base and left pancreatic limb caudal to the stomach, measuring approximately 4.6 cm x 2.7 cm. The right pancreatic limb was enlarged in size with asymmetrical to swollen contour and hypoechoic to heterogeneous parenchyma.

Free Abdomen

Generalized, nonuniformly echogenic omentum primarily noted around the pancreas but extending throughout the peritoneal cavity was present. Concurrent mild to moderate peritoneal free fluid was noted. No evidence of significant lymphadenopathy, although potential for mild mid to cranial omental lymphadenopathy is possible.

Transdiaphragmatic view of the caudal thorax revealed potential for concurrent pleural effusion, although not definitive.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Pancreatic mass effect primarily involving the pancreas base and left pancreatic limb with probable concurrent right pancreatitis
- Associated generalized peritonitis - high possibility of regional omental seeding / carcinomatosis
- Hepatosplenomegaly
- Bilateral chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, pancreatic mass effect is highly suggestive of neoplasia with a high possibility of regional to generalized omental seeding as with carcinomatosis / similar. The potential for multicentric neoplasia potentially involving the liver and spleen is possible.

Assuming normal clotting status, FNA of the pancreatic mass +/- liver, spleen for further staging could be considered. However, this case appears to be nonsurgical. An unfavorable prognosis is unfortunately indicated. Palliative support is suggested.



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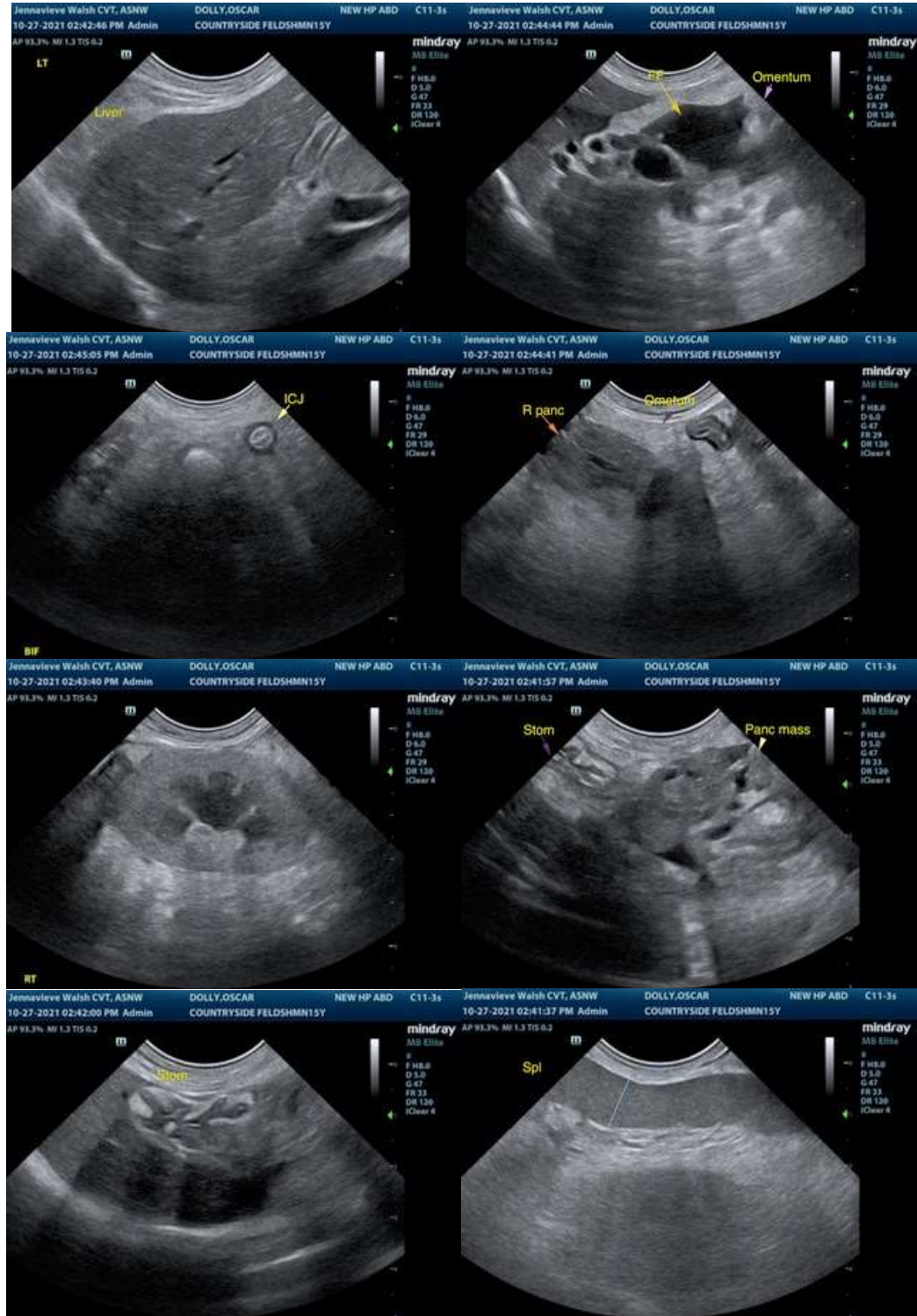
Dr. Cox

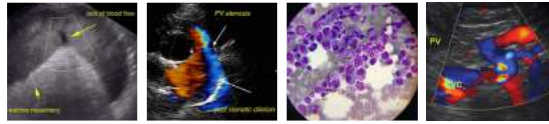
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com