



PATIENT	PRESENTING CLINICAL SIGNS
Maisie Feldman	Patient presents for abdominal mass. Chronic vomiting, lethargy, and anorexia. Current med: transdermal mirtazapine.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Echogenic to particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.
DSH	
SEX	The kidneys were enlarged with uniform increased cortex echogenicity. Maintained 1:3 cortex/medulla ratio with enhanced corticomedullary border demarcation. A hypoechoic halo was present at the periphery of the cortex. Mild dilation of the renal diverticuli was present. The left kidney measured 6.5 cm. The right kidney measured 6.3 cm.
Spayed Female	
AGE	The area of the aortic trifurcation was free of pathology.
5 Years	Adrenal Glands
WEIGHT	No overt pathology in the area of the left and right adrenal glands.
7.1 Pounds	Spleen
INTERPRETED BY	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.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Liver
IMAGING PERFORMED BY	The liver presented normal in size. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Increased portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. The gallbladder was non-distended in size with primarily anechoic luminal content. The common bile duct was dilated and tortuous. The degree of CBD dilation was not consistent with post-hepatic obstruction. This finding may suggest age related changes or secondary to underlying cholangitis / cholangiohepatitis especially if previous or current liver enzymes elevations have been noted.
Kelly Vazquez	
HOSPITAL NAME	
Cresskill AH	
REFERRING VET	Gastrointestinal
Dr. Joe Khodari	Regional moderate to severe gastric wall thickening and loss of gastric wall layer detail was present. The thickened gastric walls exhibited decreased echogenicity and an asymmetrical luminal surface. Mild retained anechoic fluid was present in the gastric lumen without evidence of foreign material. The stomach wall measured up to 1.8 cm wall width. Regional perigastric reactive mesentery noted.
INVOICE	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.
26145	
DATE	Normal visible colon wall layers were present with apparent formed feces in lumen.
10/7/21	



PATIENT

Pancreas

Maisie Feldman

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

SPECIES

Free Abdomen

Feline

Focally enlarged perigastric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident.

BREED

DSH

Small pockets of scant perigastric free fluid were noted.

SEX

Spayed Female

- Bilateral renal lymphoma pattern
- Gastric mass with associated perigastric peritonitis and hypoechoic lymphadenopathy
- Hypoechoic liver

AGE

5 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, the findings in this case are consistent with multicentric round cell neoplasia with primary concern for a high-grade lymphoma involving the stomach, bilateral kidneys, and perigastric lymph nodes. Potential for hepatic involvement. Further assessment may include gastric mural FNA (assuming normal clotting status) +/- renal cortical FNA and potential for oncology consult. However, a probable unfavorable prognosis is indicated.

INTERPRETED BY

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

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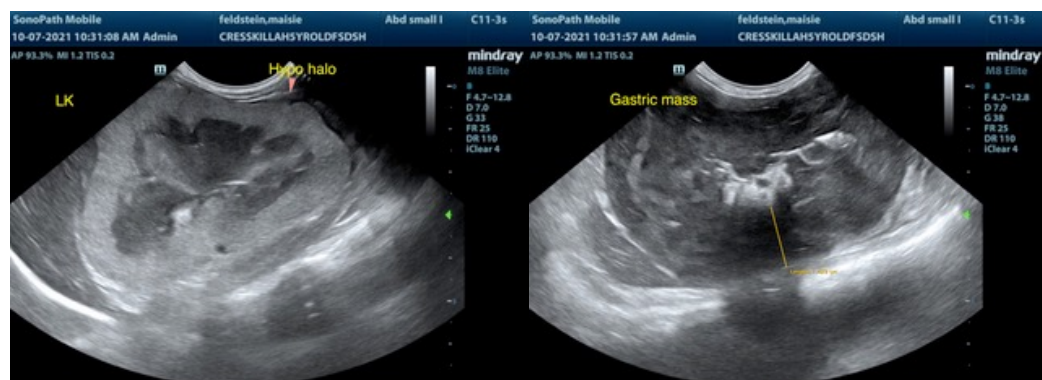
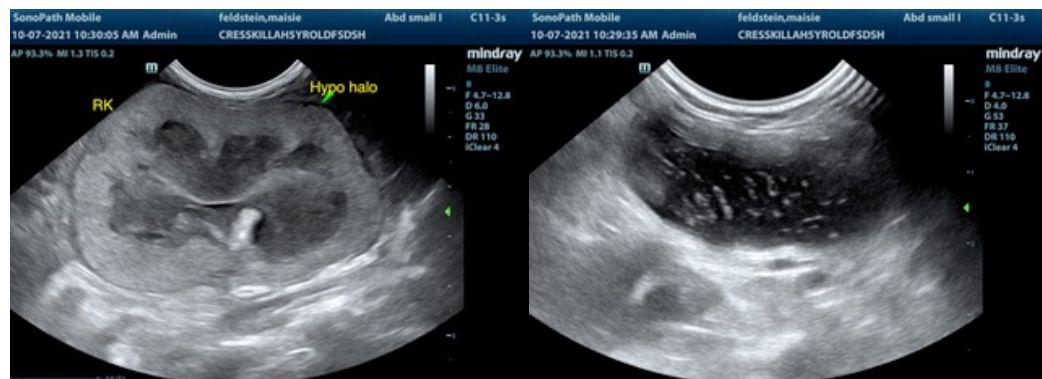
Dr. Joe Khodari

INVOICE

26145

DATE

10/7/21





PATIENT

Maisie Feldman

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

5 Years

WEIGHT

7.1 Pounds

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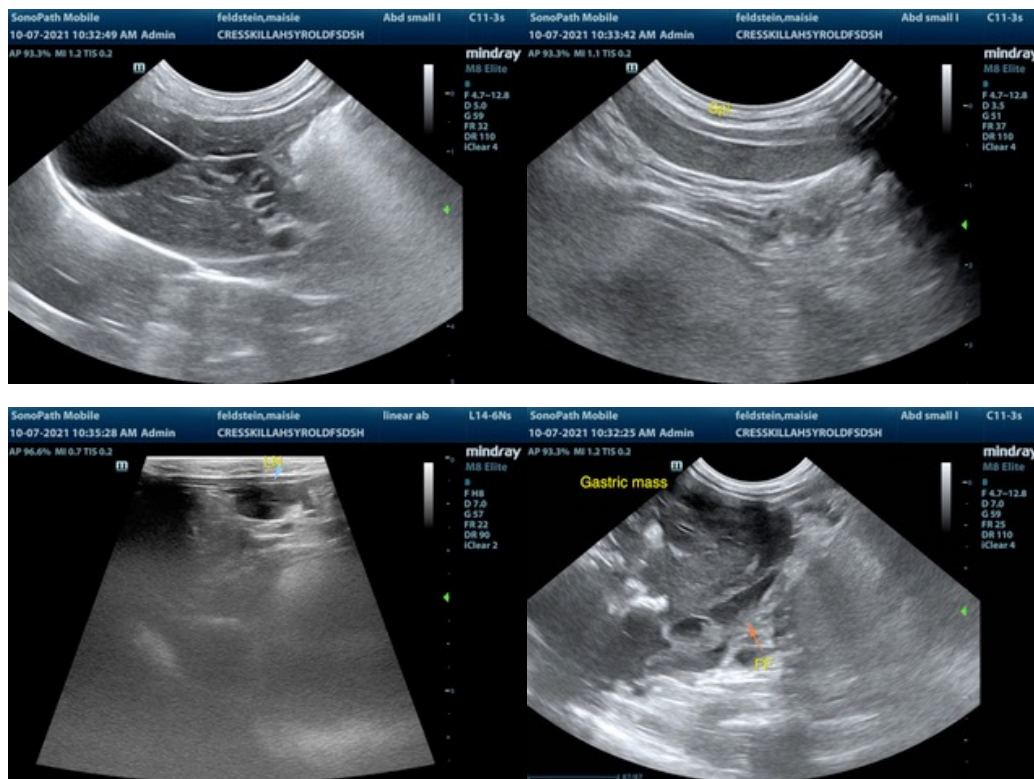
Dr. Joe Khodari

INVOICE

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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.

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