

PATIENT

Cosima Coppersmith

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12.5 Years

WEIGHT

4.7 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Lindsay Powell CVT

HOSPITAL NAME

Hershey Animal
Emergency Center

REFERRING VET

Dr. Leann Murphy

INVOICE

12062

DATE

11/04/25

PRESENTING CLINICAL SIGNS

Presented 11/1 for vomiting and lethargy. Ate that night but stopped eating Sunday. No further vomiting. Weight loss of 3 lbs since August

Abnormal PE/Chem/CBC/UA Results: MM pale pink/tacky Mild to mod painful on abdominal palpation DX from 11/1/25: CBC - HCT 28.5, neut 11.02, mono 0.85, eos 0.03, plt 121 Chem 15 + lytes - BG 181, glob 5.4 TT4 - 1.6 (normal) Panc lipase - 32.5 (elevated) Abd rads - - hepatic silhouette remains subcostal, however the margins are slightly rounded - splenic silhouette moderately enlarged with slightly plump, undulant margination - small intestines diffusely, mildly distended with soft tissue material and scant gas - colon diffusely gas-distended with the terminal descending colon predominantly empty and containing a mild amount of gas and scant fecal material Diagnostics from 11/4/25: EPOC: lcal 1.2 L, BUN 52 H, Crea 1.94 H, Glu 202 H PCV/TS: 25%, 8.0 g/dL, clear plasma Blood pressure: 200 mm Hg (Doppler)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

Nondependent 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.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was 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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. Mild medullary mineral and mild left kidney pyelectasia was present. The left kidney measured 3.1 cm in length. The right kidney measured 3.8 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 0.34 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.44 cm width.

Spleen

The spleen presented mildly enlarged, exhibiting symmetrical contour and primarily homogenous parenchyma. 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 1.1 cm to 1.2 cm width level of the mid spleen.

Liver

The liver presented nonenlarged, mildly rounded symmetrical hepatic capsule contour. A moderately sized nonhomogenous hyperechoic intraparenchymal hepatic mass measuring approximately 4.0 cm in diameter.



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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.

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 small intestine presented intact wall layering with overall maintained 1:3 muscularis/mucosa ratio. Mild thickened jejunum wall. Generalized empty intestinal lumen without mechanical/metabolic ileus to the level of the colon. The jejunum wall measured 0.26 cm to 0.27 cm width.

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

Pancreas

The left and right pancreas presented variably enlarged, capsule asymmetry and nonhomogenous hypoechoic parenchyma with potential areas of parenchymal expansion. The left pancreas measured 1.5 cm width. The right pancreas measured 2.3 cm width.

Free Abdomen

Generalized primarily perihepatic hyperechoic omentum and scant pockets of peritoneal effusion were present.

ULTRASONOGRAPHIC FINDINGS

- Hepatic mass- most consistent with neoplastic criteria.
- Variably swollen asymmetrical nonhomogenous to hypoechoic pancreas- active inflammation, necrosis, neoplasia, possible overlaying peripancreatic hypoechoic to swollen cranial mesenteric lymphadenopathy not excluded.
- Empty gastrointestinal tract with intact mildly thickened intestinal wall.
- Bilateral chronic renal changes.
- Mild splenomegaly- hyperplasia, hematopoiesis, splenitis, early neoplasia all possible.
- Generalized primarily peripancreatic hyperechoic omentum and mild volume peritoneal effusion.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given hepatic mass, pancreas presentation with potential for concurrent hypoechoic to swollen mesenteric lymphadenopathy, multicentric neoplastic criteria is highly likely with combination of neoplastic and inflammatory etiologies possible. Assuming normal clotting status and using a 25-gauge needle, hepatic mass, pancreas and splenic FNA cytology are warranted for further clarification. Three view chest radiographs are suggested if not done. Gastrointestinal support is indicated. Extremely guarded to unfavorable prognosis is likely.



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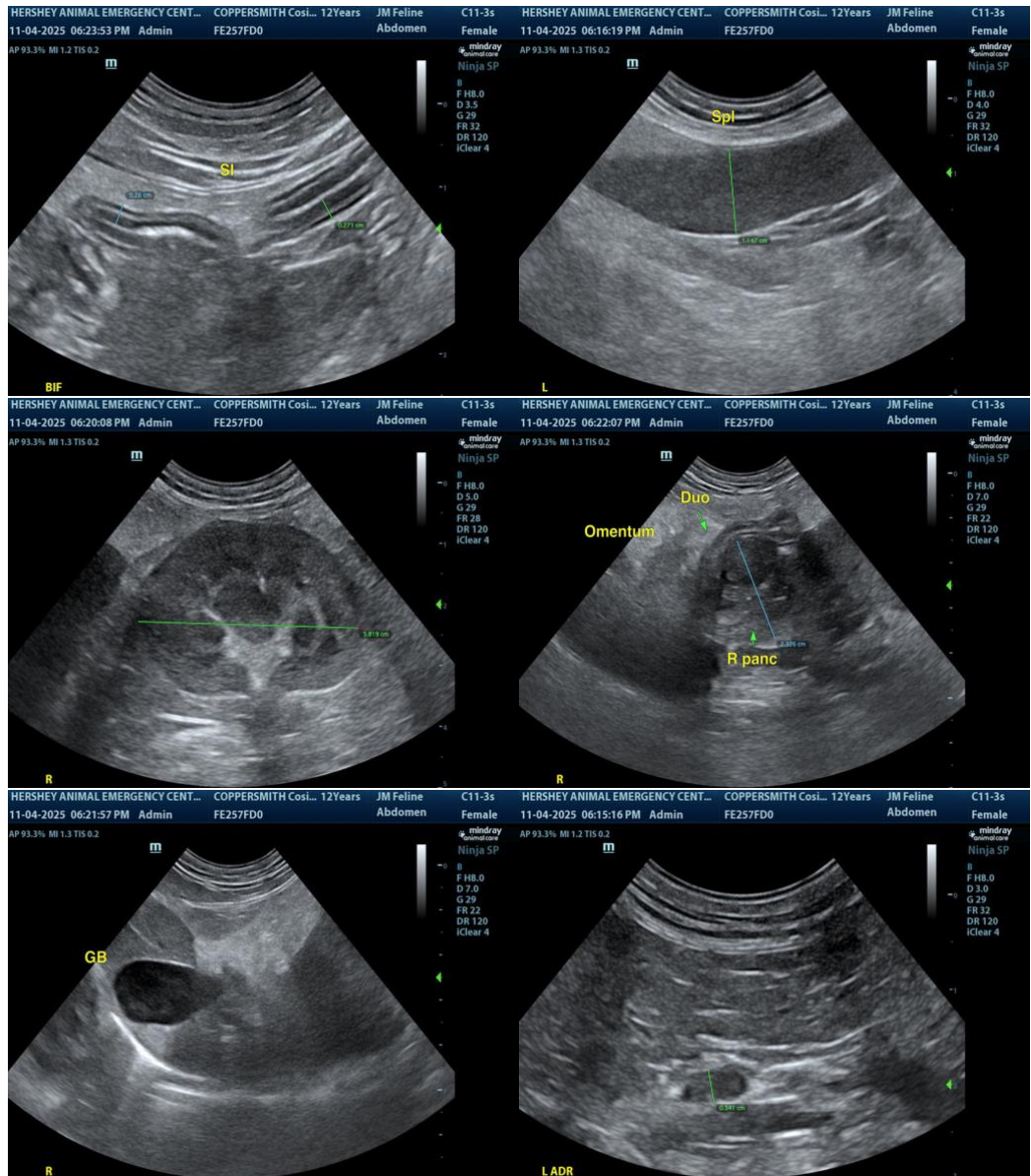
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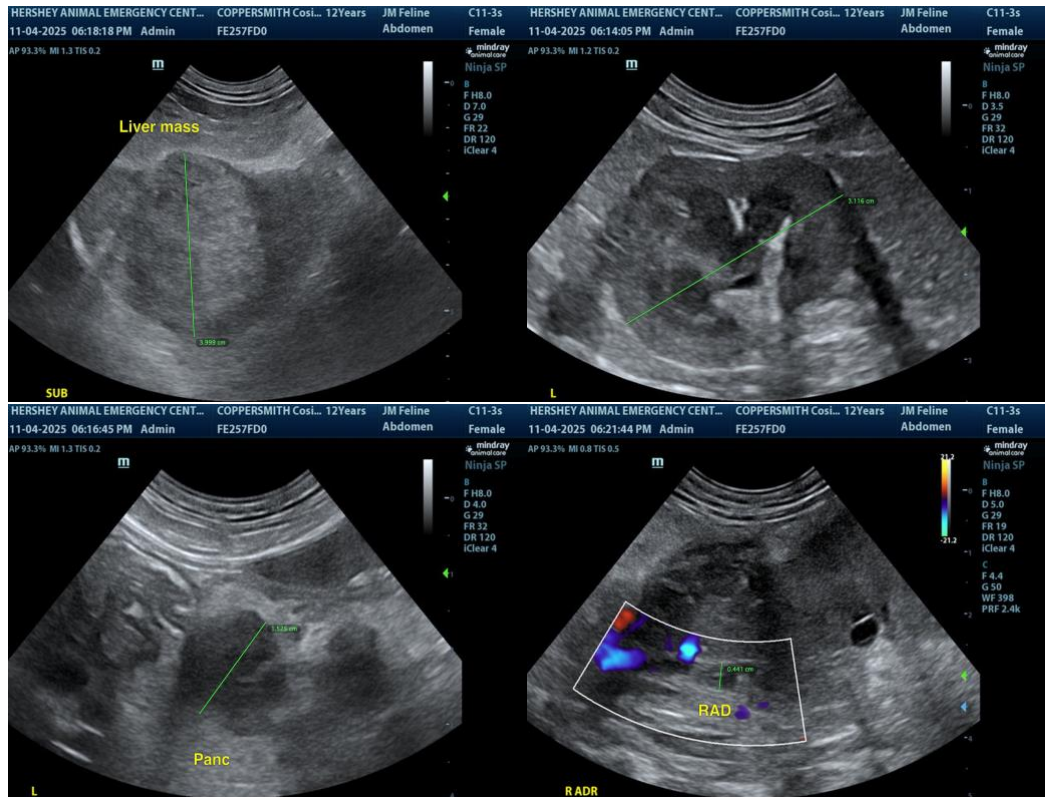
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com