



PATIENT

This submitted study contained 17 images for review - Limited Study

Tiger Matthers

SPECIES

Feline

PRESENTING CLINICAL SIGNS

Loss of appetite, and weight loss. He is still eating some, but not his normal.

Abnormal PE/Chem/CBC/UA Results: Slight anemia with regeneration. SDMA increased but no increase in other kidney values.

BREED

DSH

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE THORAX & ABDOMEN

SEX

NM

Brief examination of the thorax and area of the heart revealed evidence of pericardial, as well as pleural, free fluid. The brief examination of the heart subjectively revealed no overt evidence of left or right heart chamber enlargement, yet cannot be definitively excluded.

AGE

11 years

The liver appeared to be mildly enlarged with evidence of minor hepatic vascular congestion, which may be owing to sedation in this patient, although the potential for some degree of elevated right heart pressure possibly owing to pericardial effusion cannot be definitely excluded. Portions of the liver appeared to be within the caudal thorax cranial to the level of the diaphragm and suspected to be within the pericardial space adjacent to the heart. The gallbladder was not visualized within the liver in the cranial abdomen yet subjectively appeared to be within the suspected liver in the area of the pericardial space. A solitary, well-demarcated nonhomogeneously hyperechoic nodule to small mass was noted in the dorsal liver measuring approximately 3.3 cm in diameter.

WEIGHT

15.2 lbs.

INTERPRETED BY

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

A large, expansive, asymmetrically marginated hypoechoic Intestinal mass was present In the mid-abdomen potentially within the area of the ileocolic junction, measuring approximately 5.3 cm x 4.3 cm.

IMAGING PERFORMED BY

Sarah Pender, CVT

Concurrent to regional mesenteric hypoechoic to swollen lymph nodes were present. An example of a lymph node measured 1.5 cm x 1.1 cm exhibiting abnormal width to length ratio (>0.5). Generalized reactive mesentery and mild volume peritoneal free fluid was present.

HOSPITAL NAME

SVS Imaging QC

The left kidney exhibited mild chronic renal changes and loss of corticomedullary volume. The left kidney measured 3.9 cm in length.

REFERRING VET

Dr. Rigg

ULTRASONOGRAPHIC FINDINGS

- Suspect peritoneal pericardial diaphragmatic hernia
- Large, expansive intestinal mural mass - consistent with neoplastic criteria i.e., lymphoma, adenocarcinoma, or other potentially in the area of the ileocolic junction
- Associated regional hypoechoic to swollen mesenteric lymphadenopathy
- Tri-cavitary effusion
- Nonspecific, well-demarcated, mildly echogenic liver nodule - lipogranuloma, nodular to regenerative hyperplasia, primary vs. metastatic neoplasia possible

INVOICE

13301

DATE

2/11/22



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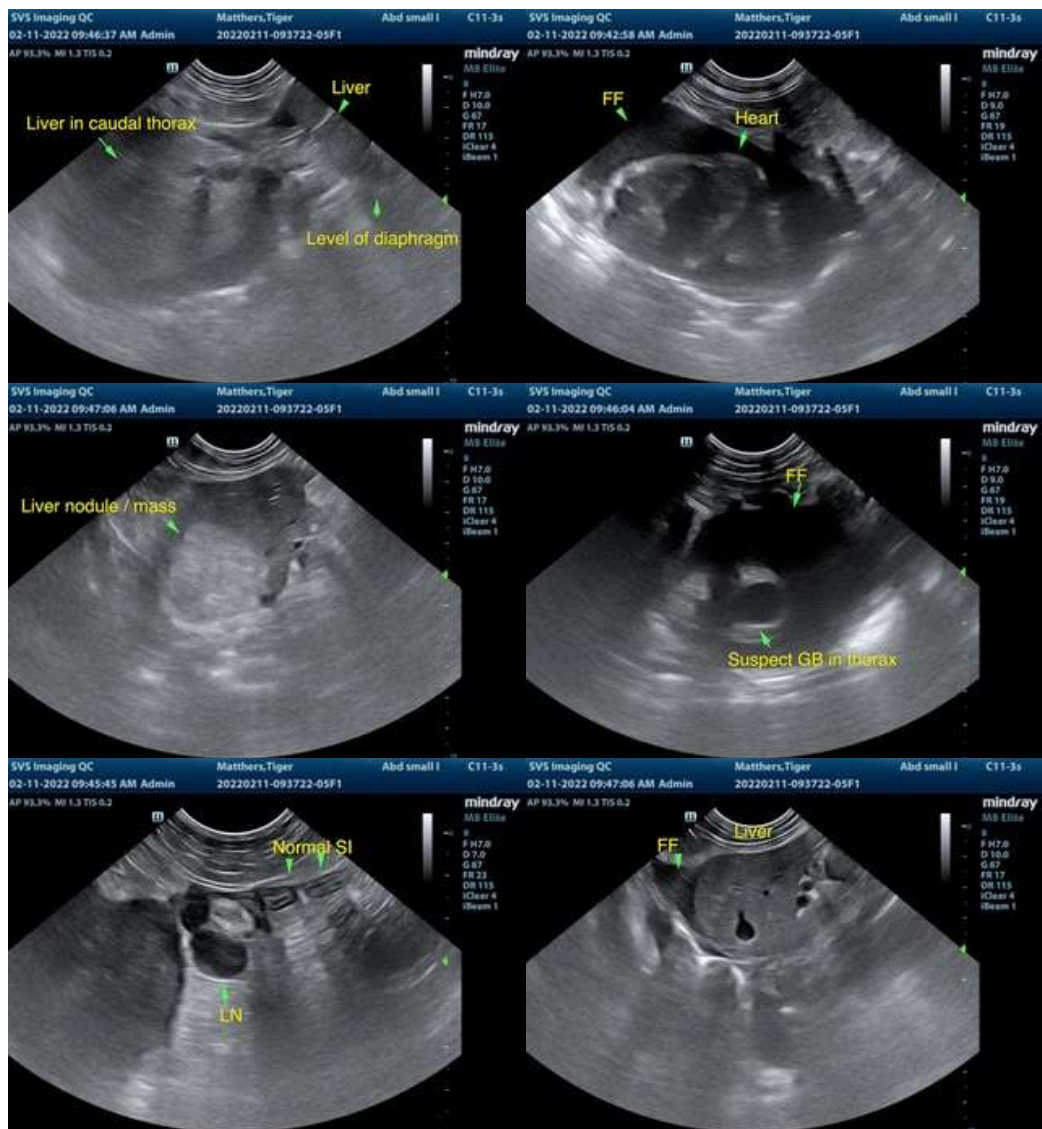
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tri-cavitary effusion in this case may potentially be secondary to nonobvious cardiac disease, given sedation prior to echocardiogram, yet concern for effusion owing to lymphatic obstruction or generalized neoplasia, given the presence of the intestinal mass, is warranted.

Further assessment may include effusion analysis, cytology, +/- culture and sensitivity if clinically indicated. Potentially, ultrasound guided FNA of the intestinal mural mass for screening cytology and potential oncology consultation may be considered if possible. Additional imaging in this patient would be required for further assessment. Very guarded to unfavorable prognosis likely indicated.



IMAGING PERFORMED BY

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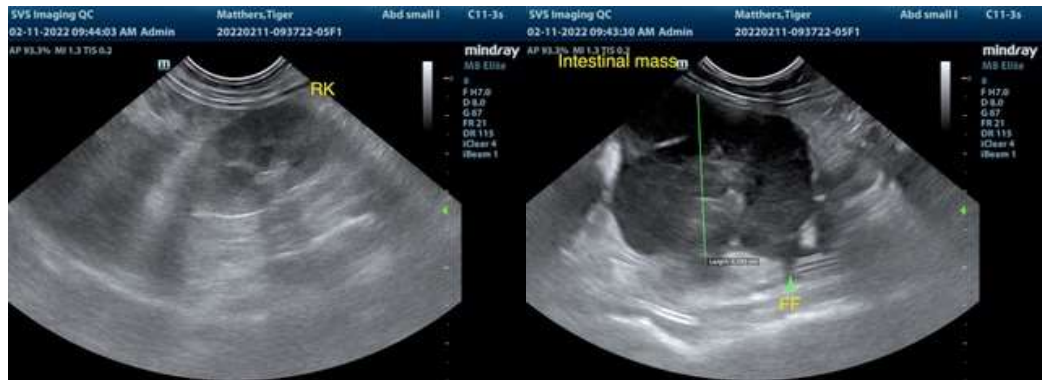
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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