

PATIENT

Papi Lancellotti

SPECIES

Canine

BREED

DSH

SEX

MN

AGE

6 years, 6 months

WEIGHT

12.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton VH

REFERRING VET

Dr. Timony

INVOICE

10739

DATE

3/27/26

PRESENTING CLINICAL SIGNS

History:

- Lethargy, inappetence, pyrexia (105.8F)/FUO
- Possible intestinal mass, felv/fiv neg
- no current meds

Abnormal PE/Chem/CBC/UA Results: Monos 2.23; PLT 85; Ca 8.2

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction 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 were noted.

No evidence of pathology in the area of the aortic trifurcation.

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 some increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.9 cm in length. The right kidney measured 4.1 cm in length.

Adrenal Glands

The left and right adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.30 cm width and the right adrenal gland measured 0.41 cm width.

Spleen

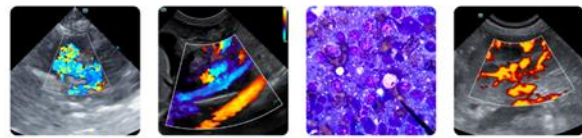
The spleen exhibited regional splenomegaly with potential for isoechoic nodular small mass. Nonhomogeneous, hypoechoic splenic parenchyma was noted. The area of splenomegaly measured ~1.7 cm in diameter.

Liver/ Gallbladder

The liver presented mildly enlarged in size. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen with a mild coarse echotexture. Increased prominence of the intrahepatic hyperechoic portal vascular borders. 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 without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach was moderately distended with retained anechoic fluid without evidence of obstruction to pyloric outflow. The stomach presented intact wall layering with a normal wall layer ratio.



PATIENT

Papi Lancellotti

SPECIES

Canine

BREED

DSH

SEX

MN

AGE

6 years, 6 months

WEIGHT

12.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton VH

REFERRING VET

Dr. Timony

INVOICE

10739

DATE

3/27/26

The small intestine presented primarily intact thickened wall with mild altered wall layer ratio and mild segmental duodenojejunal ileus. Within the midabdomen intestinal segments consistent with jejunum, a mass was present exhibiting thickened intestinal wall, mural hypoechoogenicity, and loss of intestinal wall layer detail. Thickened wall measured 0.67 cm wall width. Segmental associated paralytic intestinal ileus was noted. There is no evidence of intestinal mechanical obstructive pattern to the level of the colon.

Normal visible colon wall layers were present with semi-formed fecal matter in lumen.

Pancreas

The left pancreas was normal in size with asymmetrical contour and nonhomogeneous, hypochoic parenchyma.

Free Abdomen

Peri intestinal mesenteric lymph node was present. The lymph node exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph node was bordered by echogenic to reactive mesentery. The mesenteric lymph node measured 3.7 cm x 2.5 cm. Peri intestinal to peri lymphatic hyperechoic omentum and minor effusion were present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Moderate hypomotile stomach
- Diffuse enteropathy with jejunal mural mass
- Hypochoic to swollen peri intestinal lymphadenopathy
- Mildly enlarged hypochoic liver
- Hypochoic nonhomogeneous spleen with regional splenomegaly

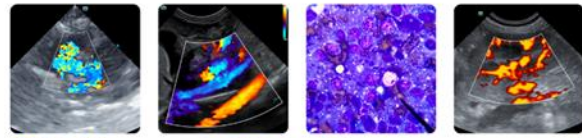
Secondary Findings

- Probable concurrent chronic active pancreatitis
- Bilateral chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Multicentric neoplastic criteria involving the intestine and lymph nodes is met with high suspicion for hepatosplenic involvement. Multicentric lymphoma or other round cell neoplasia is suspected. Technically, FIP is a potential yet thought less likely.

Assuming normal clotting status, FNA cytology could be considered for further assessment and oncology consult.



PATIENT

Papi Lancellotti

SPECIES

Canine

BREED

DSH

SEX

MN

AGE

6 years, 6 months

WEIGHT

12.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton VH

REFERRING VET

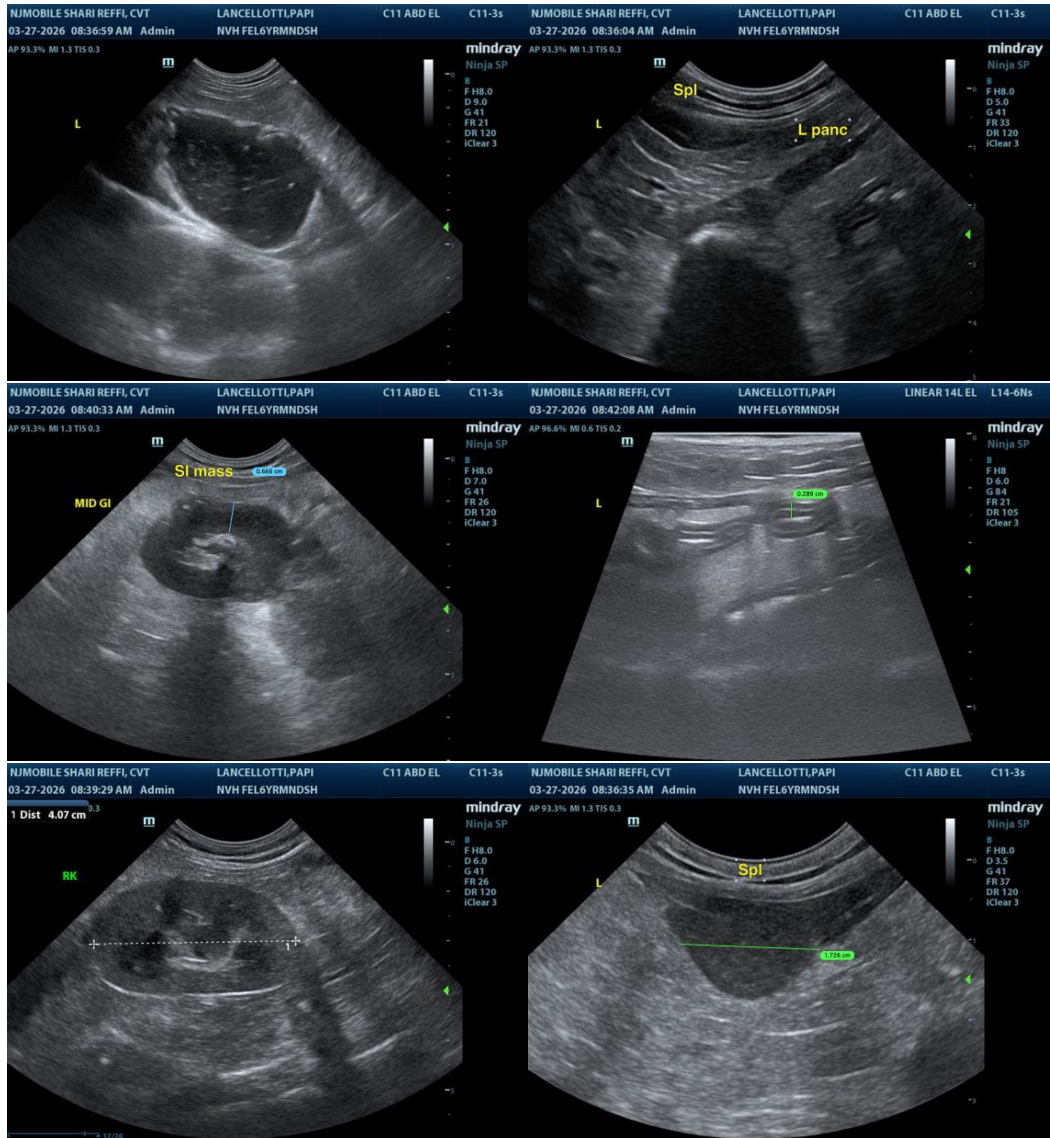
Dr. Timony

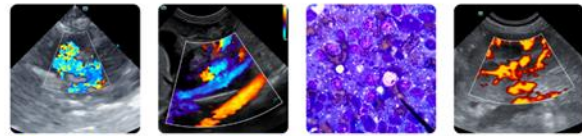
INVOICE

10739

DATE

3/27/26





PATIENT

Papi Lancellotti

SPECIES

Canine

BREED

DSH

SEX

MN

AGE

6 years, 6 months

WEIGHT

12.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton VH

REFERRING VET

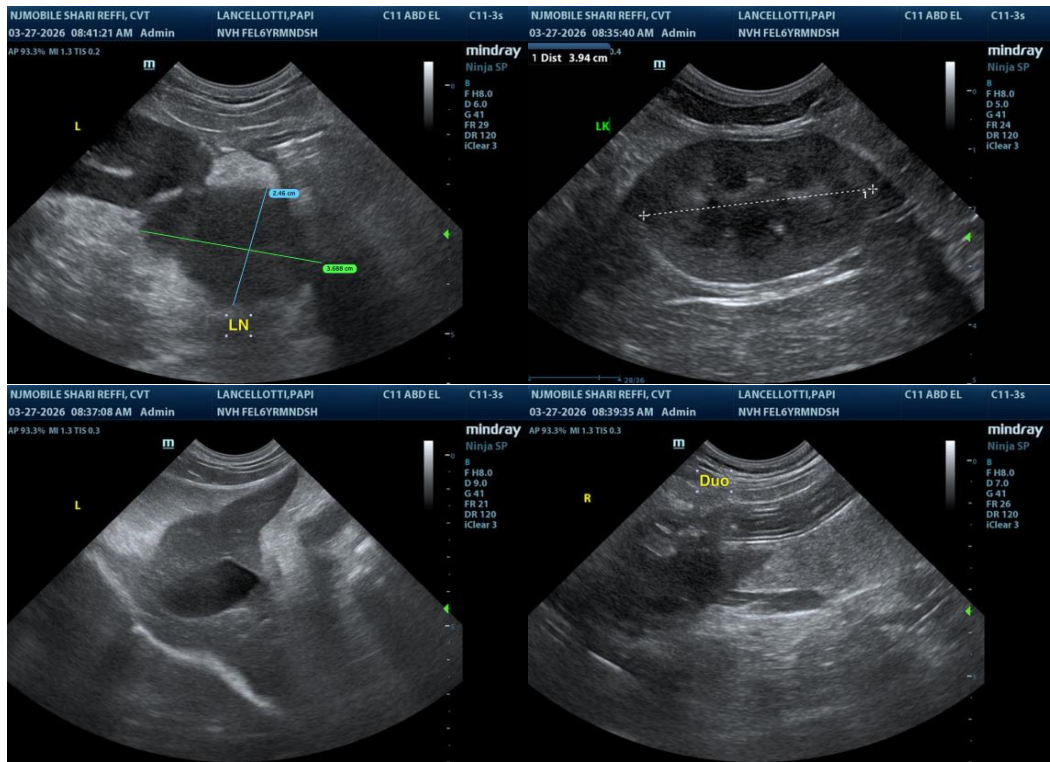
Dr. Timony

INVOICE

10739

DATE

3/27/26



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