



PATIENT	PRESENTING CLINICAL SIGNS
Lasagna Paddy	Lethargy Swollen left hindlimb History of FIV Not defecating Mildly distended abdomen
SPECIES	Abnormal PE/Chem/CBC/UA Results: Blood work–elevated amylase F PLI–negative FNA, cytology–pending Mild enlarged popliteal lymph nodes Radiograph–suspected enlarged sublumbar lymph nodes VS sublumbar mass, constipation
Feline	
	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild non-dependent hyperechoic sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus. The ureteral papillae were normal. The ureters were not visible which is normal.
SEX	No evidence of inflammatory or neoplastic changes were noted.
MN	
AGE	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 3.9 cm in length. The right kidney measured 4.0 cm in length.
4	
WEIGHT	Adrenal Glands
10.6	The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Liver/Gallbladder
Dr. Sharkaway	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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.
HOSPITAL NAME	Gastrointestinal
Kew Gardens Animal Hospital	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.
REFERRING VET	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.
Dr. Sharkaway	
INVOICE	Overtly intact visualized colon wall layering was present. The colon appeared to exhibit distention with formed to shadowing fecal matter.
13443ag	
DATE	Pancreas
04/10/2023	



PATIENT

Lasagna Paddy

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

SPECIES

Feline

Free Abdomen

Multiple potentially coalescing hypoechoic swollen lymph nodes vs unspecified mass was present in the area of the iliac trifurcation and sublumbal space dorsal to the urinary bladder, an example measured ~ 6-7 cm x 3.0 cm. Regional hyperechoic omentum/tissue and scant caudal abdominal to retroperitoneal free fluid was present.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

SEX

MN

- Potentially coalescing hypoechoic lymphadenopathy vs unspecified mass in the area of the iliac trifurcation and sublumbal space.
- Regional surrounding hyperechoic omentum/tissue with scant caudal abdominal/retroperitoneal free fluid.
- Subjective feces distended colon.
- Mild urinary bladder sediment.

AGE

4

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sublumbal to medial iliac lymphadenopathy to unspecified mass is most suggestive of neoplastic criteria although non-neoplastic etiology i.e., lymphadenitis, granulomatous lymphadenopathy (FIP) or other possible. Correlation with pending cytology with potential oncology consult is recommended.

WEIGHT

10.6

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Sharkaway

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

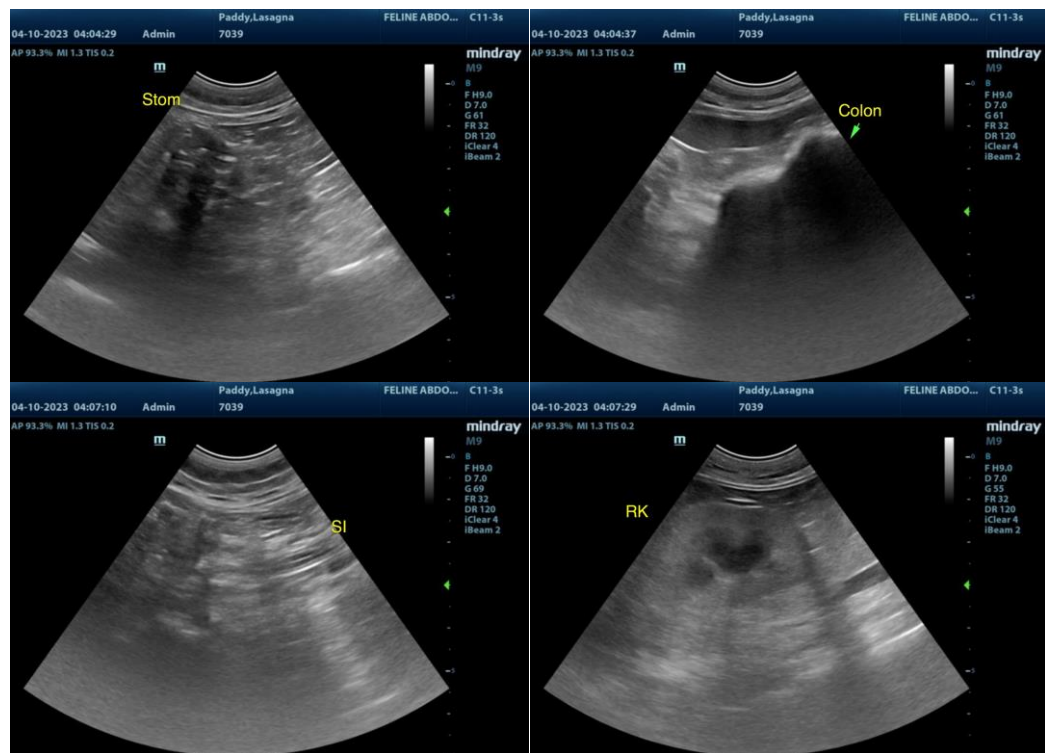
Dr. Sharkaway

INVOICE

13443ag

DATE

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PATIENT

Lasagna Paddy

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

4

WEIGHT

10.6

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HOSPITAL NAME

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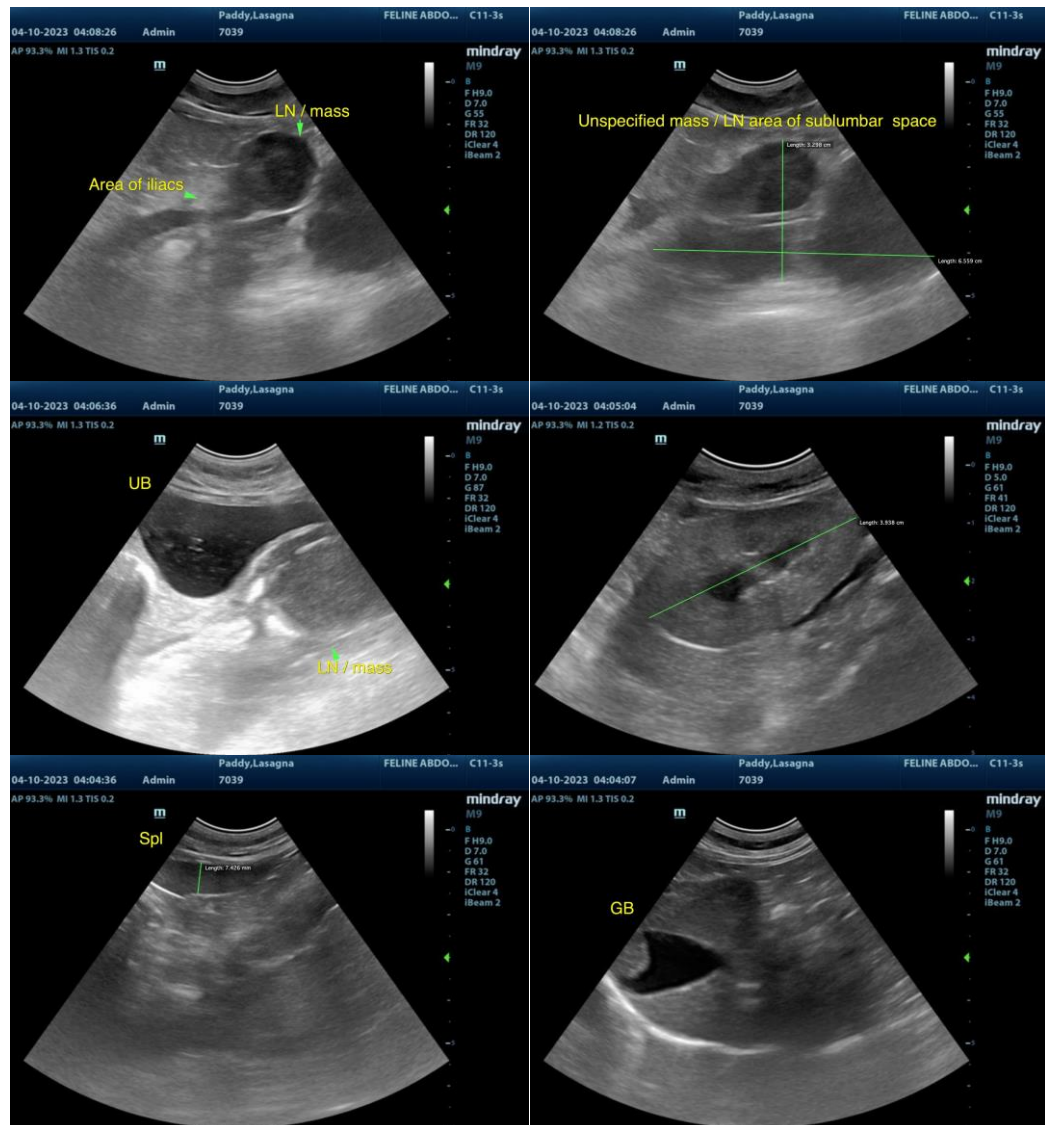
Dr. Sharkaway

INVOICE

13443ag

DATE

04/10/2023



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)
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