



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Simon Hooch
History: Initially presented because she fell off a surface (she never does this). Also, a mildly reduced appetite with no other owner-observed concerns.

SPECIES Abnormal PE/Chem/CBC/UA Results: Mildly poor condition, severe dental disease, grd III/VI systolic murmur with a gallop at the time of initial auscultation, mid-abdominal mass palpated. Elevated BUN/CREAT with borderline USG otherwise unremarkable No radiographs done
Feline

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED Siamese X
Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm 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.

SEX Spayed Female

AGE 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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. Mild pyelectasia was present. Multiple variably sized renal cysts were present in both kidneys. The left kidney measured 3.1 cm in length. The right kidney measured 3.8 cm in length.

WEIGHT **Adrenal Glands**
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.35 cm.

INTERPRETED BY The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.38 cm.

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

Spleen

IMAGING PERFORMED 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.

Dr. Alastair Westcott

HOSPITAL NAME

Liver

Dr. Alastair Westcott,
DVM

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Solitary, nonhomogeneous to cystic appearing nodule present in the right lateral to caudate liver, measuring 2.4 cm in diameter.

REFERRING VET

Dr. Alastair Westcott

INVOICE The gallbladder was non distended in size with mild gallbladder debris. The cystic duct and common bile ducts were normal without evidence of dilation.

14880

Gastrointestinal

DATE 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.

4/25/22



PATIENT

Simon Hooch

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.

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

SPECIES

Feline

Pancreas

The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.

BREED

Siamese X

Free Abdomen

A moderately sized, nonhomogeneous mass was noted in the cranial abdomen caudal to the gastric body and fundus, measuring approximately 4-5 cm in diameter. Regional mid abdominal mesenteric lymphadenopathy as well as nonuniformly echogenic omentum, exhibiting potential for concurrent omental nodule changes. Mild volume peritoneal free fluid noted. The free fluid was primarily anechoic with suspect mild echogenic cellular component.

SEX

Spayed Female

AGE

12 Years

ULTRASONOGRAPHIC FINDINGS

- Mid abdominal mass with associated regional nonuniform to nodular mesentery and mesenteric lymphadenopathy
- Mild volume peritoneal free fluid, exhibiting subjective mild echogenic cellular component
- Bilateral polycystic kidneys
- Focal nonspecific yet subjectively benign liver nodule- suspect incidental cystic biliary adenoma

WEIGHT

3.81 kg

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding of the abdominal mass, along with regional nonuniform potentially nodular omentum and concurrent mesenteric lymphadenopathy, is consistent with neoplastic mass criteria with strong concern for regional omental carcinomatosis, lymphomatosis or similar. Secondary peritoneal free fluid, exhibiting mild echogenic cellular component likely secondary to lymphatic obstruction consistent with carcinomatosis, lymphomatosis or similar. Given the mass location, pancreatic origin is a primary differential diagnosis, although lymphatic or nonspecific omental origin possible.

IMAGING PERFORMED BY

Dr. Alastair Westcott

Ultrasound guided FNA of the mass, as well as effusion analysis, cytology +/- culture and sensitivity, if evidence of inflammatory cells are noted, could be considered with potential for oncology consult, however, very guarded to unfavorable prognosis is unfortunately indicated.

HOSPITAL NAME

Dr. Alastair Westcott,
DVM

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PATIENT

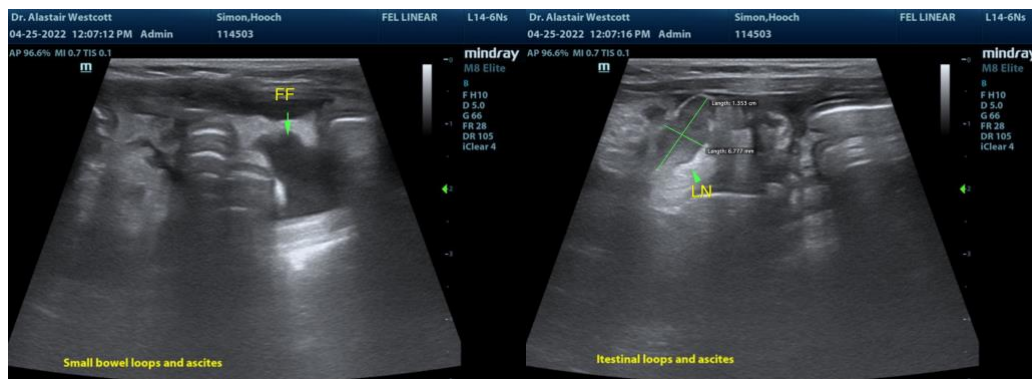
Simon Hooch

SPECIES

Feline

BREED

Siamese X



SEX

Spayed Female

AGE

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WEIGHT

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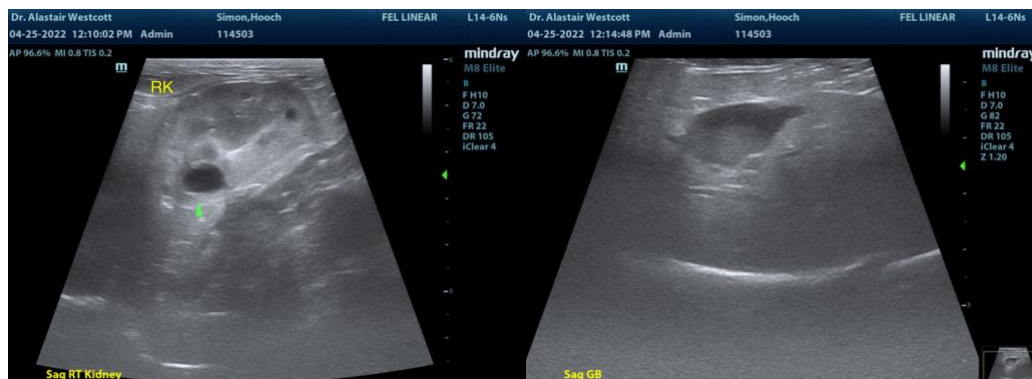
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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