



**PATIENT PRESENTING CLINICAL SIGNS**

Max Null P vomited all over the house yesterday. Has suspected FAD and pulls hair out. Also FIV positive. Painful on palpation of L cranial abdomen, tartar and gingivitis noted.  
Abnormal PE/Chem/CBC/UA Results: FIV Positive; No labs today See attached radiographs - L side mass like structure, dilated intestinal loops. Liver appears small

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED *Urinary System***

Maine Coon The urinary bladder was mildly subnormal in size owing to lack of urine distention. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**SEX**

Neutered Male 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 kidneys measured 4.3 cm each.

**AGE**

8.5 Years The area of the aortic trifurcation was free of pathology.

***Adrenal Glands***

**WEIGHT**

12.11 Pounds No overt pathology in the area of the left and right adrenal glands.

***Spleen***

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) The spleen exhibited mild generalized enlargement (1.1-1.2 cm at the level of the hilus) 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**

Amanda Lacey-Crool SDEP Certified

***Liver***

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. Mild luminal debris present. the debris was non-specific and likely incidental, potentially secondary to fasting. The cystic and common bile ducts were normal.

**HOSPITAL NAME**

Rivers Edge PMC

***Gastrointestinal***

**REFERRING VET**

Dr. Nova Prince-Kelly The stomach presented intact wall layering with a normal wall layer ratio. Minor retained anechoic antrum and pyloric fluid. No overt evidence of mechanical pyloric outflow obstruction or gastric foreign material. Pylorus wall measured 0.35 cm.

**INVOICE**

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The small intestine presented primarily intact wall layering and maintained 1:3 muscularis/mucosa ratio. A segment of small intestine in the subjective mid to left abdomen exhibited moderate retained fluid as well as segmental mild mural hypertrophy exhibiting decreased mural echogenicity and indistinct wall layering to a segmental strongly shadowing luminal echo measuring approximately 4.0 cm in length. Concurrent segments of empty small intestine noted adjacent to the strongly shadowing intestinal luminal echo and suspected to be distal. Regional peri intestinal reactive mesentery and intermittent

**DATE**

5/9/22



**PATIENT**

Max Null

minor, subjectively benign/reactive peri intestinal mesenteric lymphadenopathy. No evidence of peritoneal free fluid.

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

**SPECIES**

Feline

**Pancreas**

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.

**BREED**

Maine Coon

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Neutered Male

**AGE**

8.5 Years

**WEIGHT**

12.11 Pounds

- Mild retained gastric/pyloric fluid – no evidence of gastric foreign body or mechanical pyloric outflow obstruction.
- Segmental small intestinal wall thickening and concurrent obstructive pattern with segmental, strongly shadowing small intestinal luminal echo – consistent with small intestinal obstructive to partially obstructive foreign body with suspect secondary inflammatory mural changes.
- Regional peri intestinal reactive mesentery and intermittent, subjectively benign/reactive peri intestinal mesenteric lymphadenopathy.
- Non-specific mild splenomegaly

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mild splenomegaly, although non-specific, is not overtly consistent with neoplastic criteria, with considerations including patient variant, hyperplasia, hematopoiesis, or incidental splenitis. Assuming normal clotting status, ultrasound guided FNA of the spleen using 25-gauge needle could be considered for screening cytology, primarily to ensure only benign changes are present.

Exploratory laparotomy with expectation towards enterotomy and intestinal biopsies in the area of minor segmental mural thickening considered essential. Mild potential for neoplastic intestinal criteria possible and cannot be excluded, yet thought less likely. Given the timeframe between ultrasound study and interpretation, brief recheck sonogram prior to surgery to ensure that the shadowing intestinal luminal echo has not moved would be ideal and is recommended.

**INTERPRETED BY**

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

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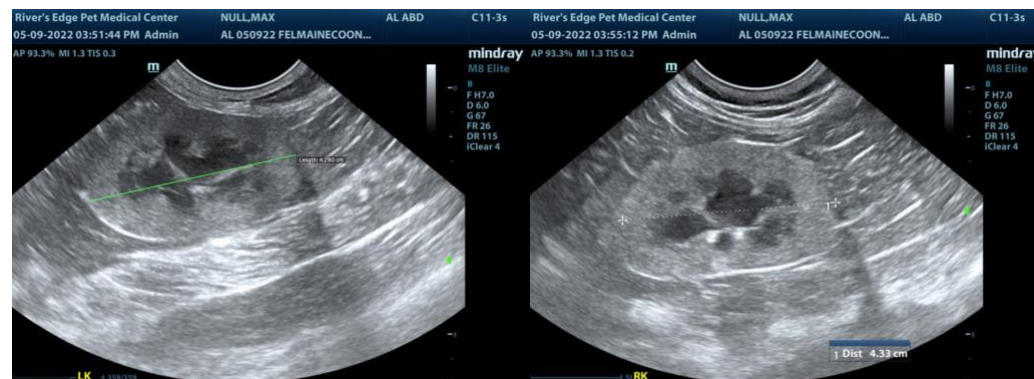
Dr. Nova Prince-Kelly

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**PATIENT**

Max Null

**SPECIES**

Feline

**BREED**

Maine Coon

**SEX**

Neutered Male

**AGE**

8.5 Years

**WEIGHT**

12.11 Pounds

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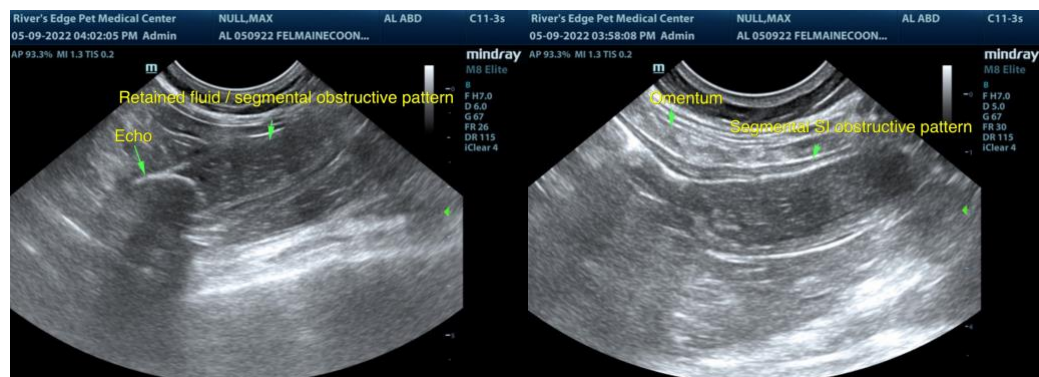
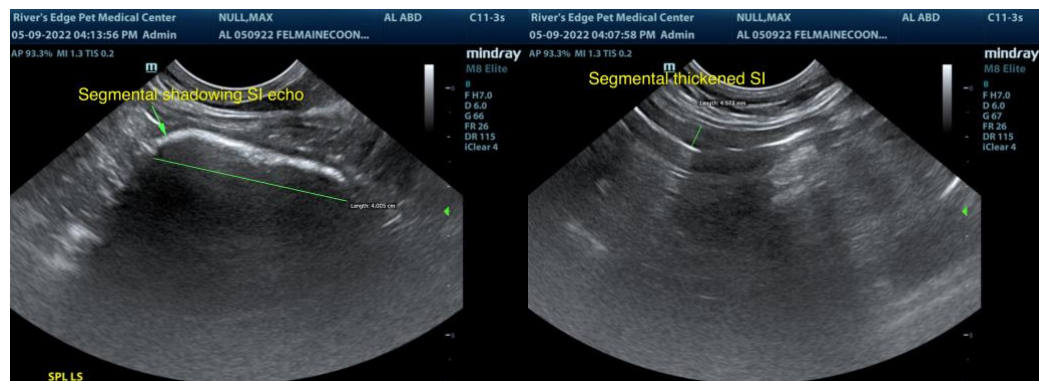
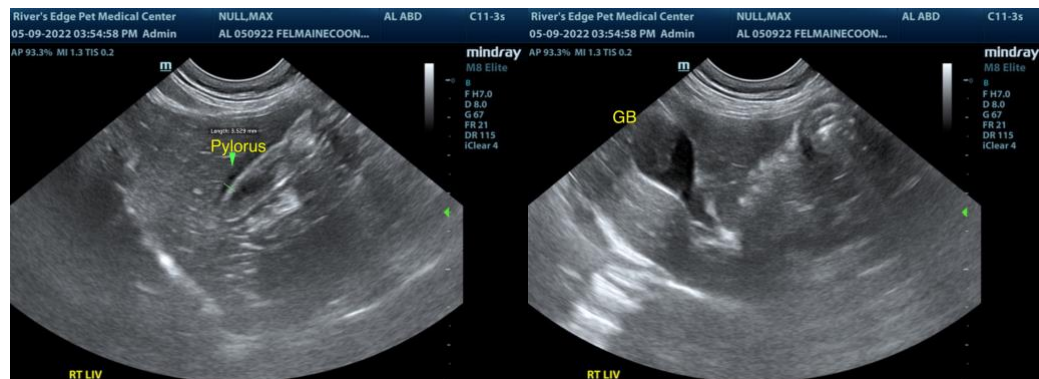
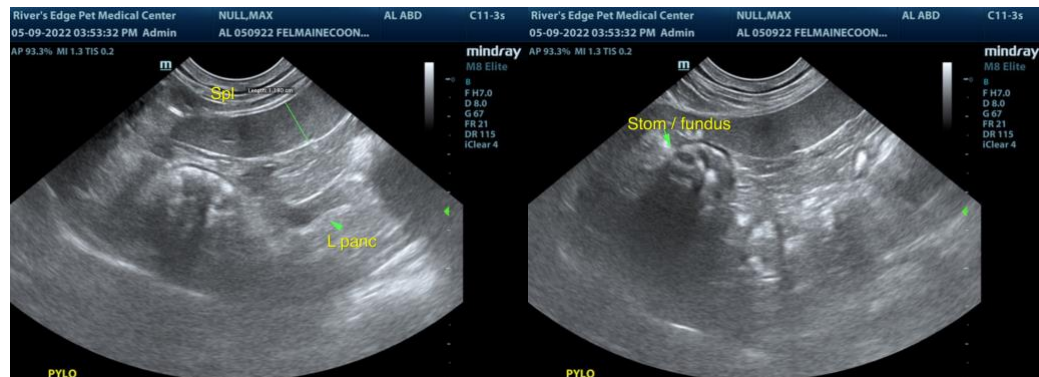
Dr. Nova Prince-Kelly

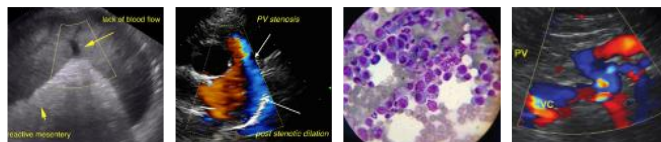
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## PATIENT

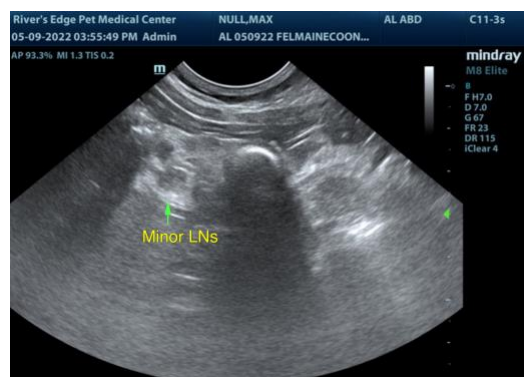
Max Null

## SPECIES

Feline

## BREED

Maine Coon



## SEX

Neutered Male

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.

## AGE

8.5 Years

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)

## WEIGHT

12.11 Pounds

info@SonoPath.com

## INTERPRETED BY

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DVM, DABVP  
(Canine and Feline)

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## REFERRING VET

Dr. Nova Prince-Kelly

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