



PATIENT PRESENTING CLINICAL SIGNS

Milo Lockard 3 day duration decreased appetite, bilious vomiting Cerenia, Pepcid, Zeniquin

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

BREED The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

DSH

SEX 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 4.1 cm in length. The right kidney measured 4.5 cm in length.

M/N

AGE **Adrenal Glands**

2016 The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.40 cm.

WEIGHT **Spleen**
 15.5

The spleen exhibited mild enlargement with a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was mildly rounded to asymmetrical 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. The spleen measured 1.3 cm in width at the level of the hilus.

INTERPRETED BY

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

Liver/ Gallbladder

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

The liver was enlarged in size with symmetrical contour and nonhomogeneous echogenic parenchyma with moderate coarse echotexture. No distinct hepatic masses noted. 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

Maple Hills VH

Gastrointestinal

REFERRING VET

Dr. Banzhoff

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. The gastric body wall measured 0.26 cm in width.

INVOICE

11379ag

The small intestine presented segmental intact yet prominent wall layering owing to prominent thickened muscularis layer. Thickened small intestine measured up to 0.3 cm width. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

DATE

8/16/22

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

Pancreas



PATIENT

Milo Lockard

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.

Free Abdomen

SPECIES

Feline

No peritoneal effusion was present.

BREED

DSH

Multifocal enlarged, hypoechoic intra-abdominal mesenteric root lymph nodes were present. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by hyperechoic to reactive mesentery. The mesenteric root lymph nodes measured 5.1 cm length and 3.2 cm width. An example of a hepatic lymph node measured 2.5 cm x 1.6 cm.

SEX

M/N

ULTRASONOGRAPHIC FINDINGS

- Multicentric hypoechoic swollen intra-abdominal lymphadenopathy
- Segmental infiltrative enteropathy
- Hepatomegaly with nonhomogeneous parenchyma
- Mild splenomegaly

AGE

2016

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

15.5

Although sampling is required for further assessment the abdominal lymphadenopathy is consistent with neoplastic lymphatic criteria i.e. lymphoma or other. Potential for non-neoplastic etiologies is considered less likely. Round cell neoplasia involving the segmental to generalized intestinal tract and potentially liver and spleen is of concern. Assuming normal clotting status an ultrasound FNA of an enlarged lymph node as well as screening hepatosplenic FNA using a 25g needle is warranted with potential for oncology consult. A very guarded prognosis is indicated pending cytology.

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REFERRING VET

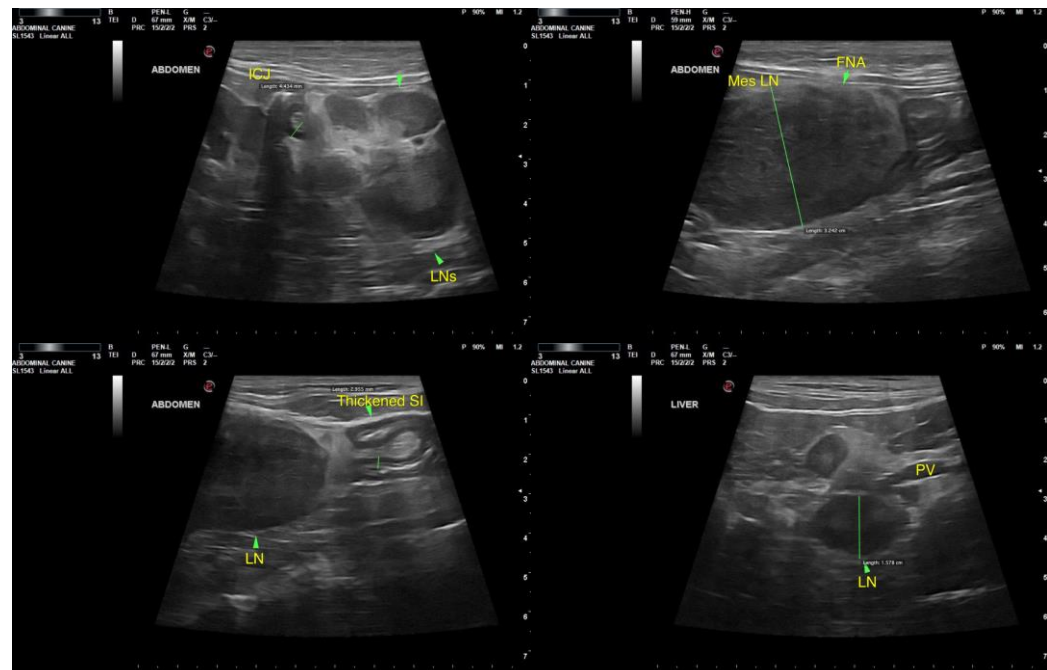
Dr. Banzhoff

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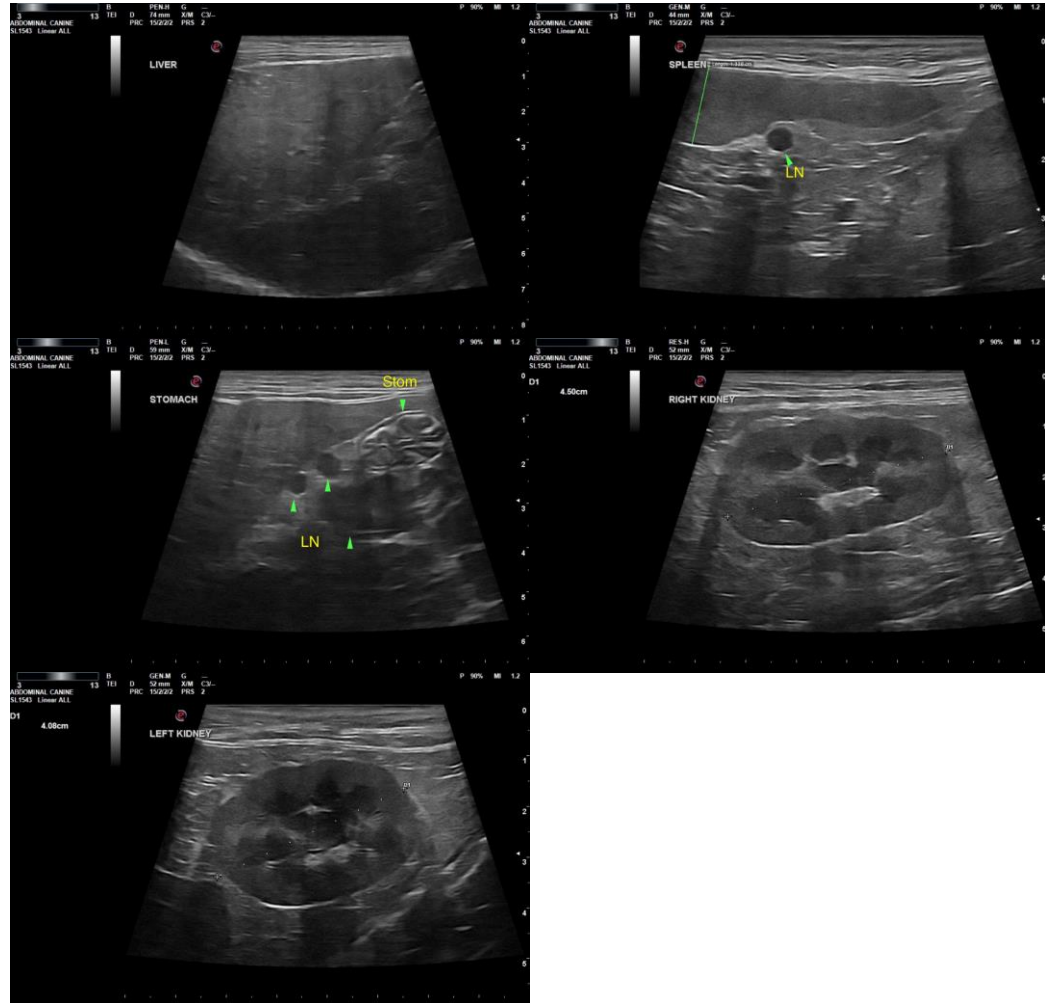
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
mac.daniel@sonopath.com