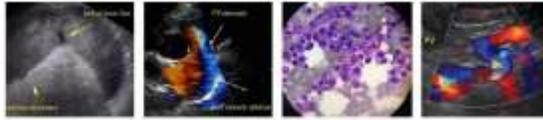


PATIENT	PRESENTING CLINICAL SIGNS
Ginny Boutros	2 weeks ago stopped eating, had been vaccinated 2 weeks prior currently on: mirtazapine, cerenia Abnormal PE/Chem/CBC/UA Results: fecal occult-positive for blood anemia noted mid july, has worsened Had UTI-E.coli on culture-resolved with ABs please see attached BW and rads
SPECIES	CBC hematocrit 0.16, reticulocytes 12.8, WBC 8.6 with lymphopenia and monocytosis, platelets 145
Feline	FeLV/FIV antibody / pcr: negative, infectious disease serology: negative
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Siberian	<i>Urinary System</i>
SEX	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.
FS	No evidence of pathology in the area of the aortic trifurcation.
AGE	The kidneys were enlarged with moderately hyperechoic renal cortex and medulla echogenicity. A hypoechoic halo was present at the periphery of the cortex. Mild dilation of the renal diverticuli was present. Minor retroperitoneal inflammation and scant retroperitoneal effusion present around both kidneys. The left kidney measured 6.0 cm in length. The right kidney measured 5.3 cm in length.
2 Years	<i>Adrenal Glands</i>
WEIGHT	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.35 cm width.
9 lbs	<i>Spleen</i>
INTERPRETED BY	The spleen exhibited borderline enlargement with maintained symmetric capsule contour and a primarily finely textured homogeneous parenchyma with subtle indistinct micronodular parenchymal changes noted on splenic linear probe evaluation. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
R. McKenzie Daniel, DVM, DABVP	<i>Liver</i>
IMAGING PERFORMED BY	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.
Kelly Reshny, RVT	<i>Gastrointestinal</i>
HOSPITAL NAME	The stomach presented intact wall layering with a normal wall layer ratio. Minor retained echogenic non-shadowing pyloric ingesta was noted. No evidence of ileus, obstruction or foreign material. The pylorus wall measured 0.24 cm width.
Hawkins AH	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. The jejunum wall measured 0.20 cm width. The duodenum wall measured 0.22 cm width.
REFERRING VET	Normal visible colon wall layers were present with apparent formed feces in lumen.
Hawkins	
INVOICE	
46903	
DATE	
8-9-21	



PATIENT

Pancreas

Ginny Boutros

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

No evidence of intraabdominal lymphadenopathy or peritoneal effusion was present.

BREED

Siberian

ULTRASONOGRAPHIC FINDINGS

- Bilateral renal lymphoma pattern.
- Borderline splenomegaly with very subtle micronodular parenchyma.
- Minor retained pyloric ingesta.

SEX

FS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

2 Years

Potential for renal lip or nonspecific nephritis possible although considered less likely differential diagnoses based on sonographic presentation. The borderline splenomegaly was nonspecific with considerations including mild splenomegaly owing to sedation if clinically applicable, patient variant, hyperplasia, hematopoiesis, while the possibility of early splenic neoplasia especially if renal lymphoma is confirmed, cannot be excluded. Assuming normal clotting status, renal cortical FNA +/- splenic FNA using a 25 gauge needle recommended for screening cytology.

WEIGHT

9 lbs

An oncology consult may be considered pending renal +/- splenic cytology if neoplasia is confirmed.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

Hawkins AH

REFERRING VET

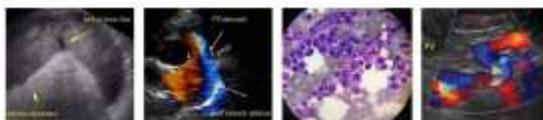
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8-9-21



PATIENT

Ginny Boutros

SPECIES

Feline

BREED

Siberian

SEX

FS

AGE

2 Years

WEIGHT

9 lbs

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

Hawkins AH

REFERRING VET

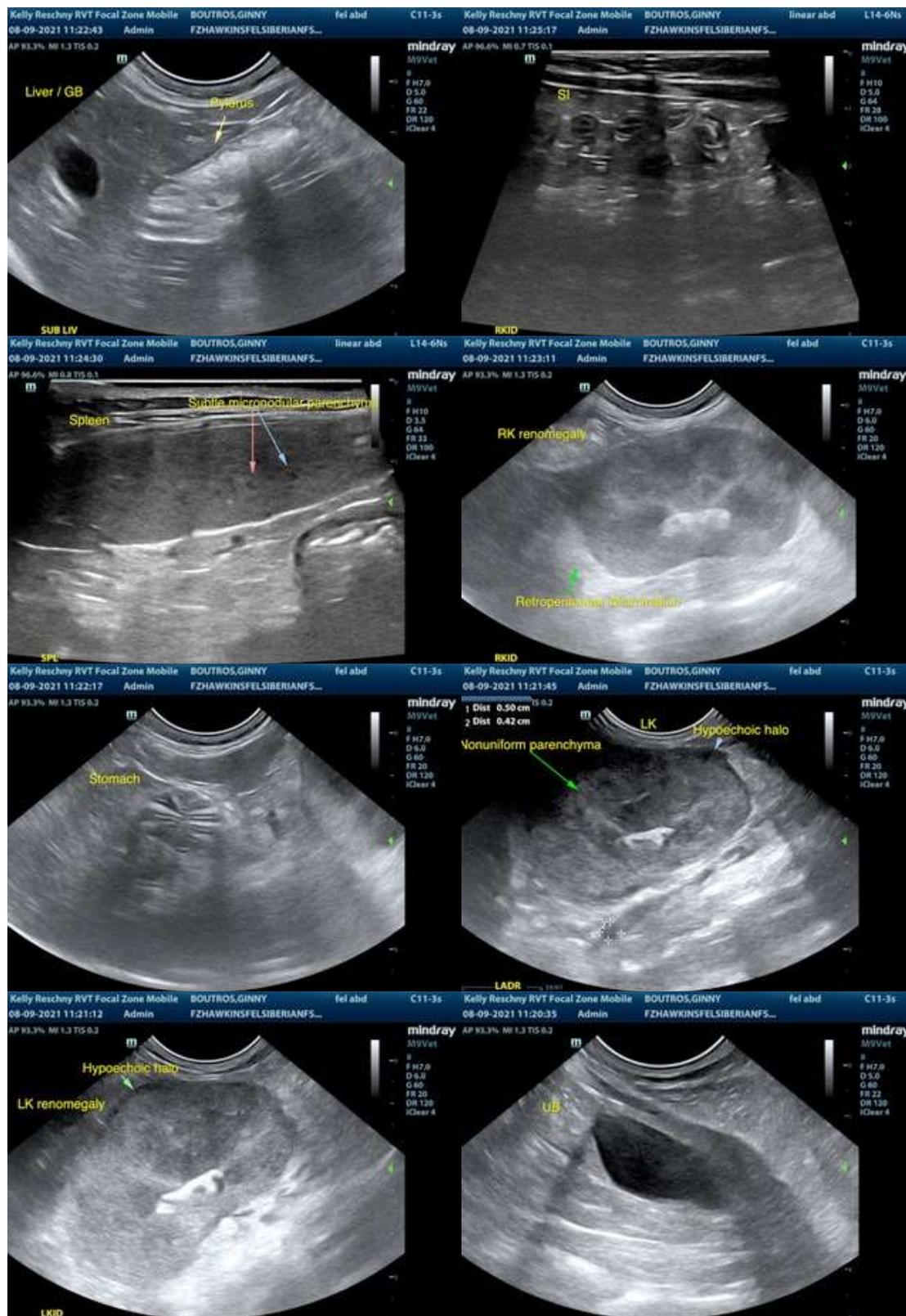
Hawkins

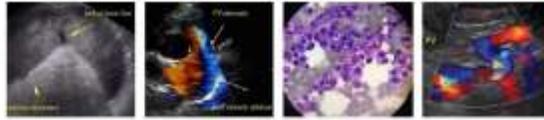
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8-9-21





PATIENT

Ginny Boutros

SPECIES

Feline

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.

BREED

Siberian

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com

SEX

FS

AGE

2 Years

WEIGHT

9 lbs

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

Hawkins AH

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