



**PATIENT PRESENTING CLINICAL SIGNS**

Lili Maniar lymphoma now in remission for 2 years

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Feline 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.

**BREED**

DSH

**SEX**

Spayed Female

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. The right kidney measured 4.2 cm.

The area of the aortic trifurcation was free of pathology.

**AGE**

9 Years

**Adrenal Glands**

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

**Spleen**

**WEIGHT**

16

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. The spleen measured 0.72 cm in width.

**INTERPRETED BY**

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

**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. The cystic and common bile ducts were normal.

**IMAGING PERFORMED BY**

Jenn

**Gastrointestinal**

**HOSPITAL NAME**

Rockaway AH

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate echogenic ingesta with subtle progressive distal acoustic shadowing. Gastric body wall measured 0.24 cm.

**REFERRING VET**

Dr. Maniar

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained echogenic, nonshadowing ingesta consistent with normal food without signs of ileus, obstruction or foreign material. Duodenum wall measured 0.27 cm. Jejunum wall measured 0.22 cm.

**INVOICE**

25149

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

**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.

**DATE**

9/2/21



**PATIENT**

**Free Abdomen**

Lili Maniar

No evidence of intraabdominal lymphadenopathy, masses or effusion.

**SPECIES**

**ULTRASONOGRAPHIC FINDINGS**

Feline

- Gastrointestinal ingesta – likely post-prandial presentation
- Otherwise sonographically unremarkable abdomen

**BREED**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

DSH

The gastric ingesta likely correlates with post-prandial presentation. However, possible gastric stasis may be considered if documented NPO. Potential for hairball opacity in the stomach also possible if previous history of hairballs.

**SEX**

Spayed Female

No evidence of visceral pathology, including no evidence of recurrent lymphoma.

**AGE**

9 Years

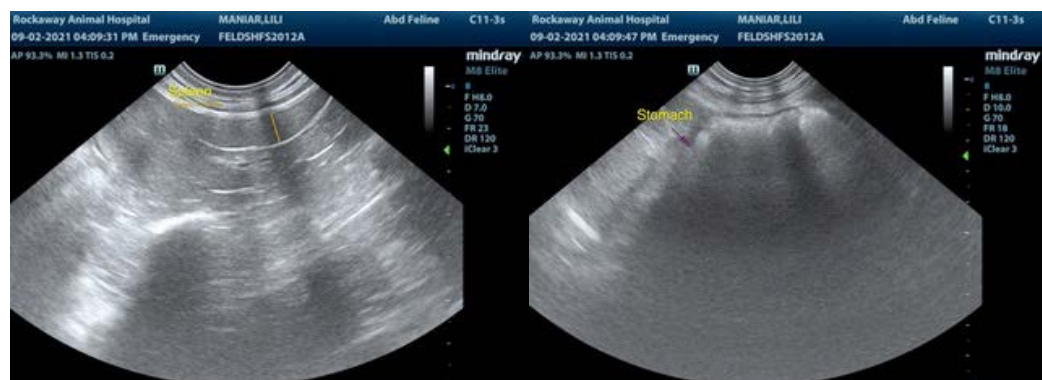


**WEIGHT**

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**PATIENT**

Lili Maniar

**SPECIES**

Feline

**BREED**

DSH



**SEX**

Spayed Female

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.

**AGE**

9 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.

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