



**PATIENT PRESENTING CLINICAL SIGNS**

**Puck Schuller** History: Severe icterus and lethargy. History of chronically elevated liver enzyme activity.  
Physical Examination: N/A.

**SPECIES** Urinalysis: N/A.

Feline CBC: N/A.

**BREED** Serum Biochemistry: N/A.

DSH Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Male **Urinary System**

**AGE** Full urinary bladder with a normal thickness and appearance of the wall. Small amount of floating hyperechogenic sediment present. No uroliths evident.

13 years Normal trigone area, proximal urethra, and iliac blood vessels.

**WEIGHT** Normal iliac lymph nodes. Ureters not visualized.

10 # Renomegaly (left 4.6 cm right 5.4 cm) with a hyperechogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

**INTERPRETED BY**

Remo Lobetti, BVSc,  
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**Reproductive System**

N/A.

**Adrenal Glands**

Normal shape, echogenic appearance, position, and size. Left 1.52 x 0.48 cm, right 1.63 x 0.43 cm

**IMAGING PERFORMED BY**

Dr Paul Kim

**HOSPITAL NAME Spleen**

Ridgefield Park Animal  
Hospital

Enlarged with an increased echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

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**Liver**

Enlarged with rounded edges and a diffuse hyperechogenic appearance, and loss of portal markings. Multiple irregular parenchymal cysts. No nodules or masses evident. Small gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct.

**INVOICE**

303734

**Gastrointestinal**

**DATE**

1/5/22

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness, and no distension of the lumen. Hyperechogenic nodule (1.1 cm) on the gastric wall.



**PATIENT** *Pancreas*

Puck Schuller Normal size and echogenic appearance. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Feline Mesenteric lymphadenomegaly (1.9 cm) with a rounded shape and hypoechogenic appearance. Moderate amount of acellular ascites.

**BREED**

DSH

**SEX**

Male

**AGE**

13 years

**WEIGHT**

10 #

**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Cystic hepatopathy.
- Renomegaly.
- Splenomegaly.
- Lymphadenomegaly.
- Gastric nodule.
- Ascites.

Secondary Findings:

- Urinary bladder sediment.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

With the appearance of the spleen, lymph nodes, kidneys, and gastric wall nodule, the most likely etiology would lymphoma, with peritonitis a less likely differential diagnosis.

Although the cystic appearance of the liver would be consistent with cystadenoma (and in line with the chronically elevated liver enzyme activity), neoplastic infiltration needs to be considered.

Further assessment would be analysis of the ascitic fluid and FNA cytology of the spleen, kidneys, liver, lymph node, and gastric nodule.

Specific therapy would be dependent on an etiological diagnosis.

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**PATIENT IMAGES**

Puck Schuller **Liver**

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male

**AGE**

13 years

**WEIGHT**

10 #



**Left kidney**

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**PATIENT Spleen**

Puck Schuller

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Male

**AGE**

13 years

**WEIGHT**

10 #

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**Stomach**



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.

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
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