



PATIENT

Marley Bruce

PRESENTING CLINICAL SIGNS

3 days history of lethargy , inappetence and vomiting 150 ml straw-brown color fluid was drained from abdomen
Abnormal PE/Chem/CBC/UA Results: significant elevation of fPLI , mild elevation of GGT and TBILL , WBCS

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE THORAX&ABDOMEN

An overview study including the thorax and abdomen in three imaging planes is provided for review.

BREED

DSH

RADIOGRAPHIC FINDINGS

Thorax

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

SEX

Female Spayed

In the lateral projections, a mild ill-defined, ovoid shaped, soft tissue opacity is seen dorsal to the 3rd&4th sternebra, cranial to the heart.

AGE

10 Years

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

HOSPITAL NAME

St. Catherine's Animal Hospital

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

Abdomen

REFERRING VET

Dr. Boctor

The surrounding bony structures are within normal limits.

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

INVOICE

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The abdominal peritoneal serosal detail is lost, and the peritoneal fat presents a severe soft tissue striation/soft tissue opacification – effacing the margins predominantly of the gastrointestinal tract. In the lateral views, there is the impression of an ovoid shaped soft tissue opacity in the mid, dorsal abdomen.

The liver is appropriate in position, size and presents uniform opacity.

DATE

8-19-22

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and



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lower urinary tract.

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The stomach is in its anticipated position and presents normal content.

The colon is seen in the expected position and presents with appropriate content.

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RADIOGRAPHIC DIAGNOSIS

- Suspect mid abdominal soft tissue mass
- Peritoneal effusion
- Suspect lymphadenopathy sternal lymph node

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The possible mid abdominal mass is concerning for lymphadenopathy of a mesenteric lymph node, intestinal mass or mesenteric mass – neoplasia (e.g. round cell tumor), granuloma, cyst or abscess are considerations. Complementing workup by an abdominal ultrasound examination appears ideal to rule in/out abdominal mass entirely. The peritoneal effusion in combination with the described macroscopic appearance is most likely inflammatory or neoplastic in origin. A complete fluid analysis of the peritoneal effusion is mandatory as well.

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The suspected enlarged sternal lymph node can present secondary reactive hyperplasia, due to peritoneal effusion/peritonitis or neoplastic transformation.

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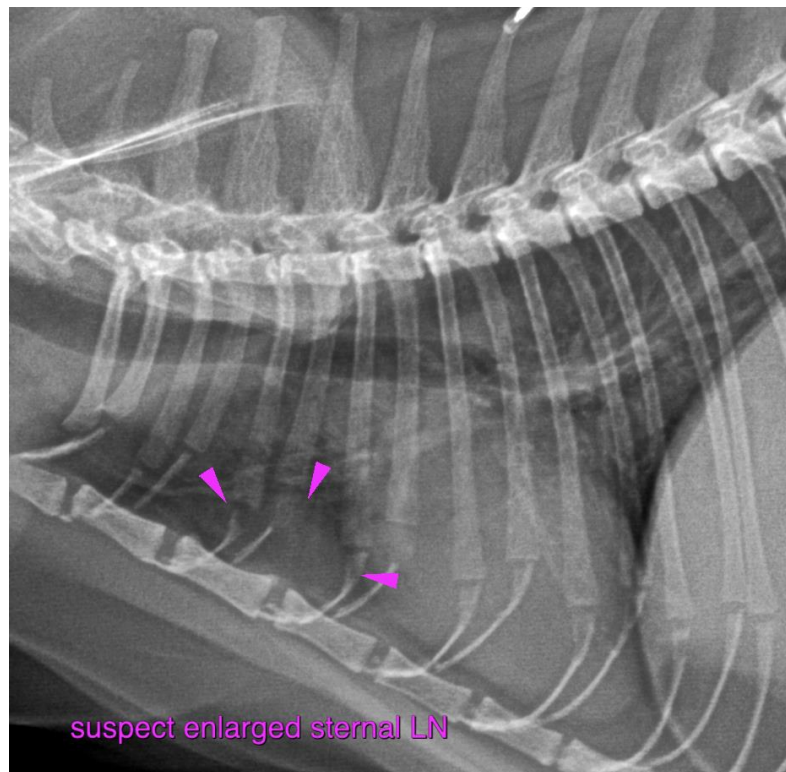
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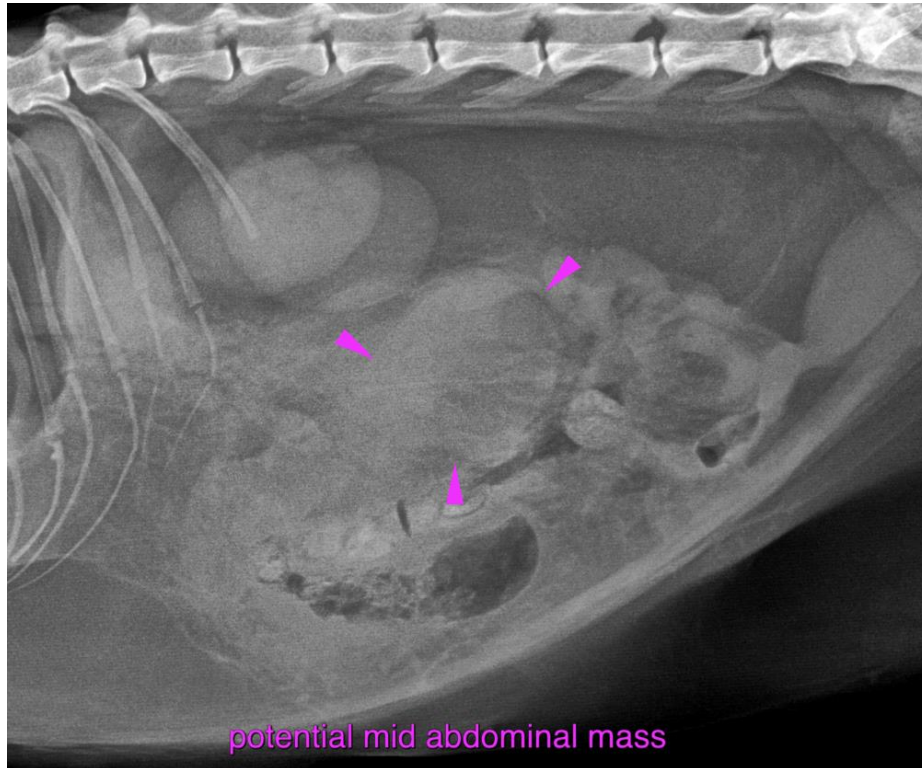
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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