



**PATIENT PRESENTING CLINICAL SIGNS**

**Hadies Groenewold** History: Hadies presented yesterday for acute onset of reduced appetite and lethargy. Examination identified pyrexia (40.3), lethargy, indications of jaundice and a palpable mid-abdominal mass. Hadies is still eating but intake is reduced by 50%.

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: Haematology - within normal limits Biochemistry - Elevated TBIL (73), normal liver parameters, the rest within normal limits. AFAST scan - no free fluid, mid-abdominal hypoechoic slightly heterogenous mass measuring 4cm x2cm. FNA performed - multiple aspirates

**BREED**

DSH

MICROSCOPIC EXAMINATION Across the smears examined, cytological findings revealed marked red blood cell contamination and mild protein deposition with the diagnostic most smears also revealing an increased heterogeneous population of lymphoid cells displaying a small to intermediate/large lymphoid cell ratio of approximately 70-30. A mildly increased population of neutrophils (mainly non-degenerate) were also seen scattered at the background of the diagnostic most smears examined. Occasional plasma cells are also seen. No obvious micro-organisms were seen.

**SEX**

Neutered Male

DIAGNOSIS Suspect reactive lymph node COMMENT Cytological findings here could be consistent with a reactive lymph node associated with mild neutrophilic inflammation. Recommend checking region drained by this lymph node for possible evidence of chronic antigenic stimulation. If no obvious evidence of chronic antigenic stimulation can be found, then an excisional biopsy of the affected lymph node and histopathological examination for further investigation would be warranted (particularly if repeat cytological aspiration/examination fails to reveal any further diagnostic information).

**AGE**

1 Year

**COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN**

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

A pre- and post-contrast CT study of the abdomen in a bone and soft tissue reconstruction is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**HOSPITAL NAME**

Colyton VH

The peritoneal fat presents mild fat-stranding and a mild to moderate amount of fluid attenuating material is noted in the peritoneal cavity.

In the mild abdomen, an irregular ovoidal shaped, soft tissue attenuating and moderate contrast enhancing mass is visible, measuring 4.3 x 2.3 x 4.9 cm insize.

**REFERRING VET**

Dalton Nguyen

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted. The renal lymph nodes are prominent.

**INVOICE**

17166

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**DATE**

9/2/22



**PATIENT** The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

Hadies Groenewold

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

**SPECIES** In the pleural cavity, a moderate amount of gravity dependent, fluid attenuating material is visible; the lung lobes are retraced from the thoracic wall and present a moderate decreased volume with atelectasis of the lung parenchyma.

Feline

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

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- Lymphadenopathy mesenteric lymph node & renal lymph nodes
- Mild peritoneal effusion
- Moderate pleural effusion, L>R

**SEX**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Neutered Male

The mid abdominal mass is compatible with significant enlargement of a mesenteric lymph node and secondary mild peritoneal effusion, there is evidence of accompanying pleural effusion as well. The top differential would be round cell neoplasia or pyogranulomatous inflammation (e.g. feline infectious peritonitis, Nocardiosis). Recommend tapping the peritoneal and pleural effusion & repeating FNA sampling of the enlarged mesenteric lymph node. As there is evidence of enlargement of the sternal lymph nodes as well, FNA sampling of the sternal lymph nodes should be considered as well.

**AGE**

1 Year

**INTERPRETED BY**

Diagnostic laparotomy including biopsy of the enlarged lymph node can be considered if FNA results and fluid taps yield no specific diagnosis.

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

**HOSPITAL NAME**

Colyton VH

**REFERRING VET**

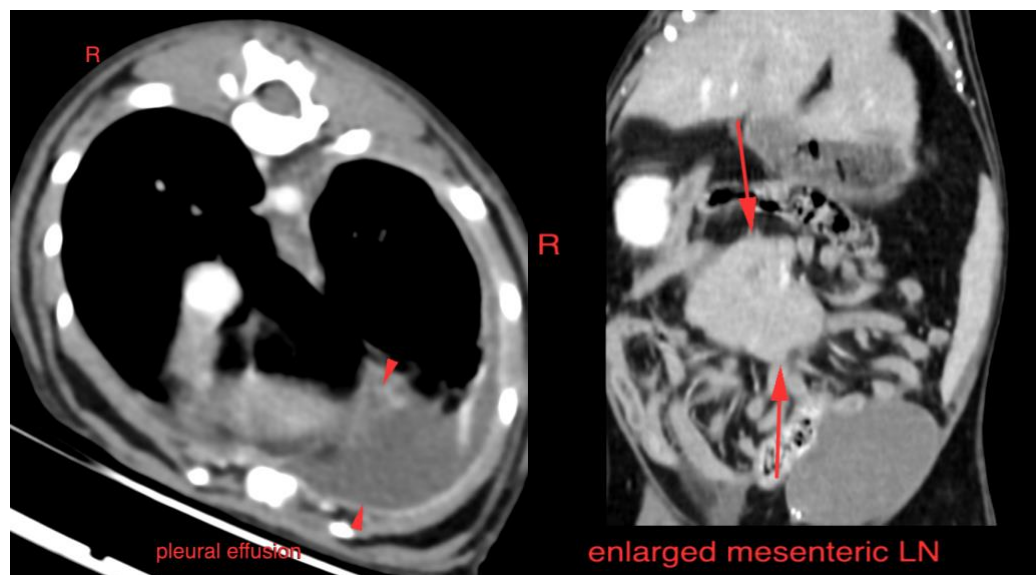
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**PATIENT**

Hadies Groenewold

**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.**

**SPECIES**

Feline

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

1 Year

**INTERPRETED BY**

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Dalton Nguyen

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