



TVC-CASE-27022

Cat | Domestic Short Hair (DSH) | 10 years and 1 day | Male (Neutered) | 3747-2

Finalized : 2022-06-23
Submitted : 2022-06-23

Ultrasound interpretation

Clinical Findings

History & Clinical Signs

10 year old DSH with vomiting bile occasionally, especially when he is not eating well. Off/on inappetence, O gives appetite stimulant, he usually eats. NO weight loss. Normal PE, other than an irregularity palpable in cranial abdomen. CBC/CHEM/UA WNL.

Prior ultrasound on 8/6/2020- read by Synergy- reported : (Copy of report and prior images attached to complement study)

1. Ileocolic lymphadenopathy
2. The appearance of the pancreas may equivocally represent mild active pancreatitis versus changes associated with prior or chronic pancreatitis
3. Hepatic hyperechogenicity
4. Mild splenomegaly
5. Echogenic urinary bladder debris

Number of Images Submitted: 61

Ultrasound Report

Findings

Urinary bladder: The urinary bladder contains a large amount of echogenic debris.

Kidneys: The left kidney approximates 4.2 cm in length and has adequate cortex and medullary distinction. The renal cortex is normal in echogenicity and echotexture. The margins are smooth. The right kidney approximates 4 cm and has adequate cortex and medullary distinction. The renal cortex is normal in echogenicity and echotexture. The margins are smooth.

Adrenals: The left adrenal approximates 4 mm in thickness. The right adrenal approximates 3.6 mm in thickness.

Pancreas: The right pancreatic lobe is normal. The left pancreatic lobe is normal. Fat stranding is not identified.

Stomach: And asymmetrical reticulated hypoechoic mass is identified in the region of the pylorus. The stomach contains fluid.

Spleen: The spleen approximates 1.3 cm in thickness. A capsular bulging hypoechoic nodule measuring 4 mm in diameter is identified.

Liver: At the caudal aspect of the liver, a poorly defined lobulated mass is identified approximating 7 cm in length and 4 cm in height. Cavitations are present. The parenchyma is heterogenous.

Gallbladder: The gallbladder contains anechoic fluid. The gallbladder wall is normal in thickness.

Small bowel: The small bowel approximates 3 mm in thickness. Normal wall layers are present.

Colon: The colon contains gas. Normal wall layers are present.

Lymph nodes: Lymphadenopathy is not identified.

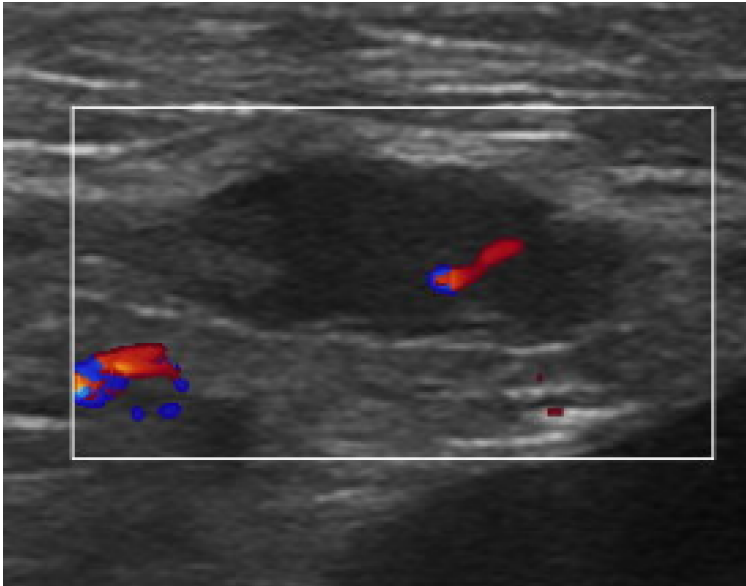
Peritoneal space: Moderate volume effusion is present.

Other: A hypoechoic oval-shaped nodule measuring 7 mm in diameter is identified intercolating with the abdominal wall.

Pyloric mass.



Abdominal wall mass.



Hepatic mass.



Interpretation

1. The appearance of the abdominal wall mass, nodules in the spleen, seen the liver, and mass in the pylorus is consistent with a malignant neoplastic process such as lymphoma or adenocarcinoma.
2. Malignant effusion.
3. Cystitis.

Recommendations

1. Aspirates of the pylorus, spleen, abdominal wall mass, and liver are indicated.
2. A diagnostic peritoneal centesis is warranted.
3. A urinalysis with culture and sensitivity may be helpful.

Signature

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