



## PATIENT

Corra Brown

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed Female

## AGE

9 years

## WEIGHT

3.4 kg

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Erin Wicks

## HOSPITAL NAME

Shores VEC

## REFERRING VET

Dr. Nelson

## INVOICE

95134

## DATE

1/11/22

## PRESENTING CLINICAL SIGNS

Presented at our hospital for lethargy, anorexia. Seen yesterday at rdvm for weight loss, diagnosed with elevated liver enzymes. Previous Health Concerns: none Current Medications: depomedrol, antibiotic injection, sq fluids (at rdvm yesterday); biomox, metronidazole, denamarin Appetite/When did they eat last: normal appetite with can food, decreased with dry food; not eating today  
Abnormal PE/Chem/CBC/UA Results: Oral-Nasal-Throat: icteric mm Ears: icteric Eyes: icteric sclera  
Labs from reg vet- BUN 13.4; CREA 0.7; Phos 2.5; Chol 230; ALT 388; AST 169; ALP >993; GGT 17; Tbili 10.7; trig 276

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.87 cm. The right kidney measured 4.29 cm with a cortical infarct at the dorsal cortex.

### Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient.

### Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

### Liver

The **liver** was swollen and diffusely hyperechoic to the falciform fat. The portal vein was enlarged and tortuous. This is likely owing to portal hypertension. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. The common bile duct measured 0.2 cm. There was no evidence of post hepatic obstruction. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



**PATIENT**

**Gastrointestinal**

Corra Brown

The **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**Pancreas**

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**SEX**

Spayed Female

**Free Abdomen**

Free fluid was noted in the abdomen.

**AGE**

9 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

3.4 kg

Diffuse hepatic disease.

Secondary portal hypertension or ascites owing to paraneoplastic effusion.

Right renal infarct.

Otherwise, unremarkable abdomen.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

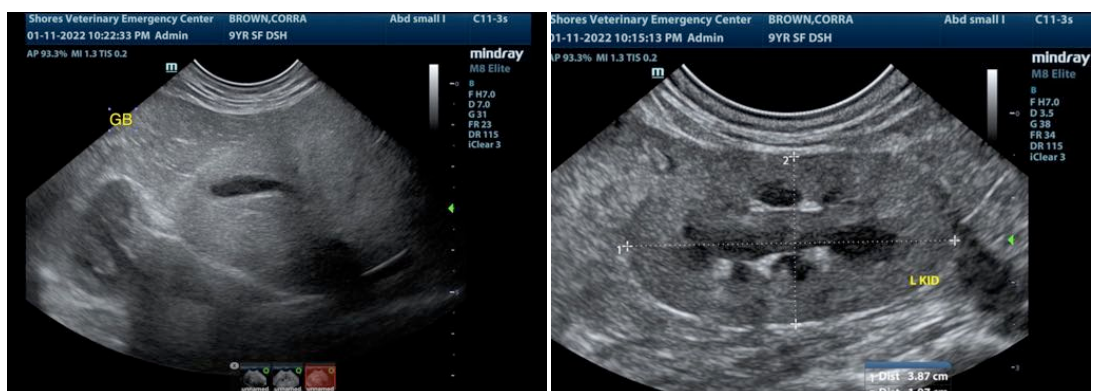
I suspect hepatic lymphoma or hepatic lipidosis with inflammatory event. Full coagulation panel with 25-gauge FNA of the liver is indicated. Lipidosis protocol is warranted in the meantime.

**IMAGING PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC



**REFERRING VET**

Dr. Nelson

**INVOICE**

95134

**DATE**

1/11/22



**PATIENT**

Corra Brown

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

**AGE**

9 years

**WEIGHT**

3.4 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC

**REFERRING VET**

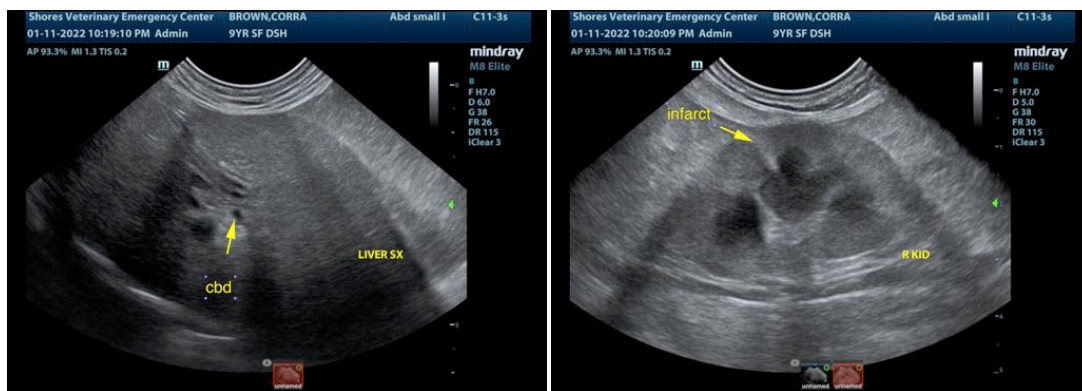
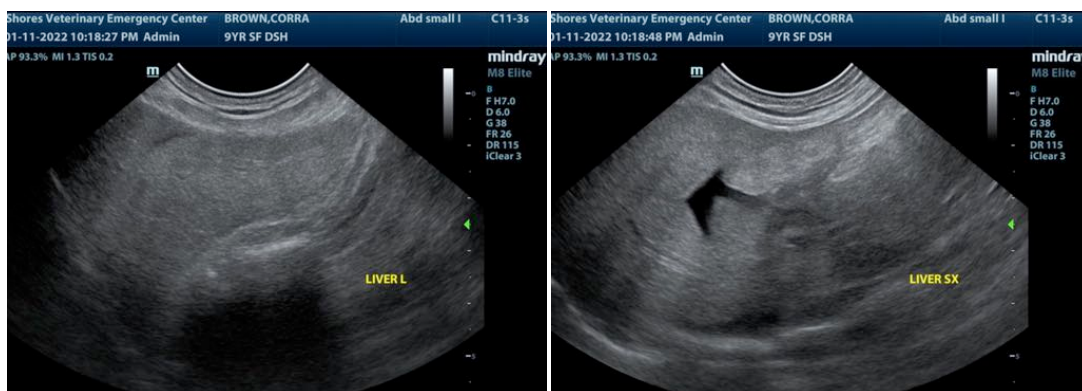
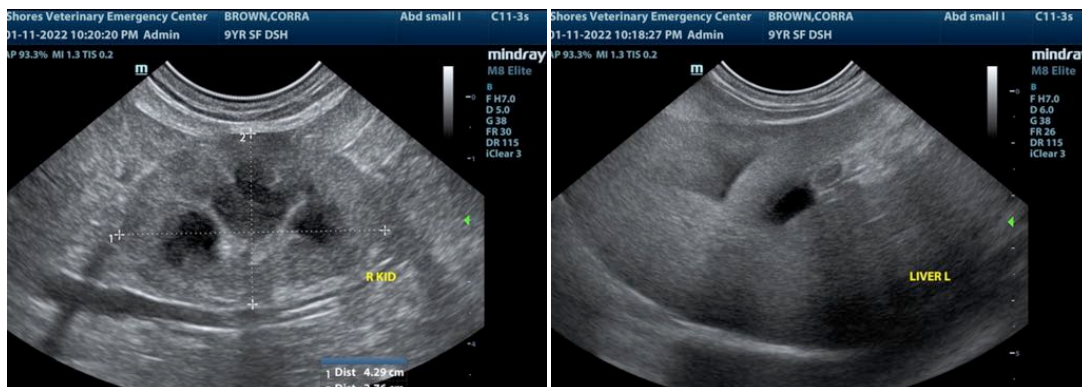
Dr. Nelson

**INVOICE**

95134

**DATE**

1/11/22



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.



**PATIENT**

**Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com**  
info@SonoPath.com

Corra Brown

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

**AGE**

9 years

**WEIGHT**

3.4 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC

**REFERRING VET**

Dr. Nelson

**INVOICE**

95134

**DATE**

1/11/22