



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Bailey Acker

SPECIES Feline

BREED Domestic Shorthair

14 yo FS DSH presented for intermittent decreased appetite, vomiting and weight loss. Pt was diagnosed with hyperthyroidism in Aug 2020. Pt was only on Methimazole for about a month at that time. Pt was off Methimazole for a year and presented again in November for diarrhea, decreased appetite and vomiting. Blood work at the time revealed hyperthyroidism, mild elevation of T. bili and GGT and mild elevation of glucose (likely stress). Normal ALT. Pt started back on Methimazole and have had to increase to 10mg po bid and pt still has intermittent vomiting and decreased appetite. Os are giving Methimazole by crushing it up and putting it on top of food, so it is unclear whether she gets all of it.

Abnormal PE/Chem/CBC/UA Results: 11/19/21: GGT 24, T. bili 0.7, glucose 164, T4 >8 12/13/21: T4 7.9 1/4/22: T4 9; Crea 0.5 1/8/22: Urinalysis USG 1.042

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX Spayed Female

Urinary System

AGE 14 years

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. 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.

WEIGHT 10.5 lbs

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.1 cm. The left kidney measured 4.09 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

IMAGING PERFORMED BY

Dr. Plourde

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.

HOSPITAL NAME

TotalBond VH

Spleen

REFERRING VET

Dr. Plourde

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner.

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Liver

DATE

1/14/22

The **liver** revealed coarse architecture with increased portal markings. Minor excessive gallbladder debris was noted as well as a tortuous cystic duct. A small echogenic focus was noted at the near termination of the common bile duct in this patient. This was presumed to be biliary calculus and was non-obstructive. The common bile duct measured 0.3 cm.



PATIENT

Gastrointestinal

Bailey Acker

The **gastrointestinal tract** revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malassimilation of nutrients if any weight loss is present. Intestinal wall thickness measured up to 0.31 cm. No obvious neoplastic patterns were noted and luminal content as unremarkable. The mesenteric lymph nodes were slightly enlarged and measured 0.8 x 0.4 cm.

SPECIES

Feline

BREED

Pancreas

Domestic Shorthair

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

SEX

Spayed Female

AGE

14 years

ULTRASONOGRAPHIC FINDINGS

Chronic inflammatory hepatopathy with biliary calculus and debris.

WEIGHT

10.5 lbs

Chronic IBD GI pattern.

Reactive spleen.

Slightly enlarged mesenteric lymph nodes.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound-guided FNA of the liver and spleen is warranted. The patient may be passing small calculi periodically. Treatment for cholangiohepatitis is indicated. A recheck sonogram is recommended in a week or earlier if bilirubin values accentuate. There is no overt evidence of neoplasia.

IMAGING PERFORMED BY

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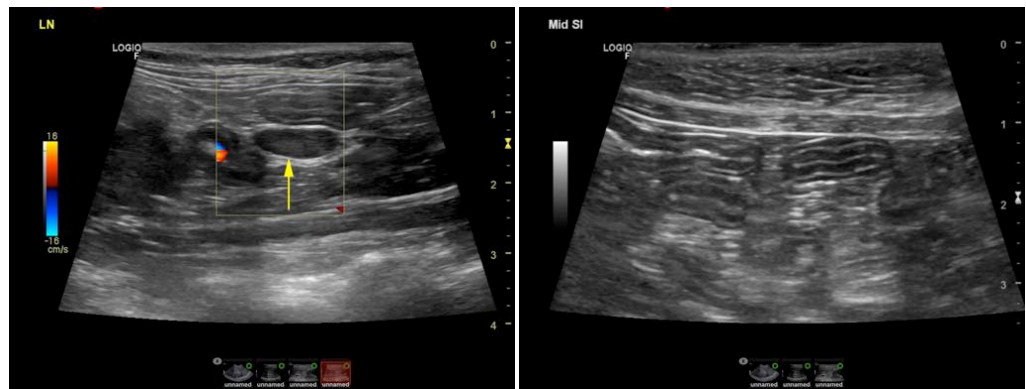
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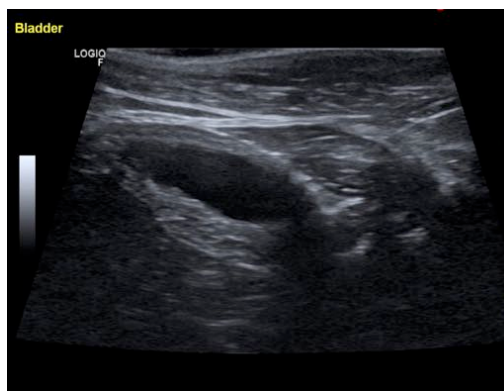
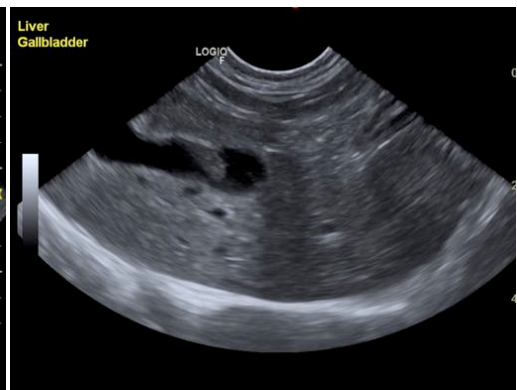
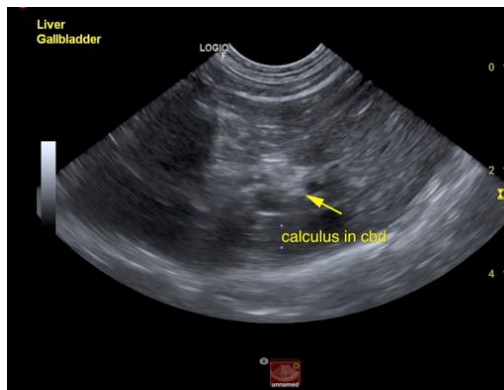
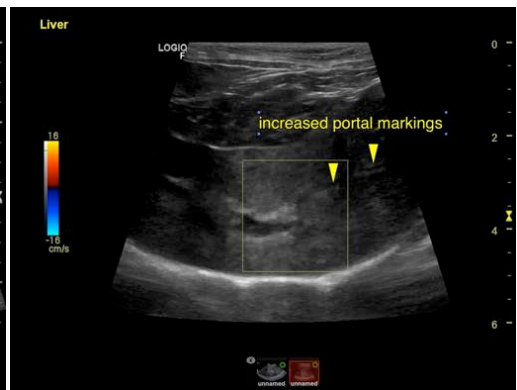
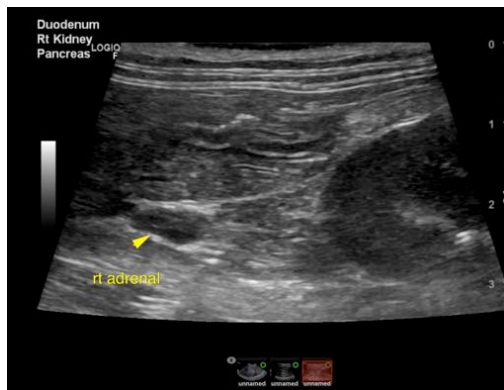
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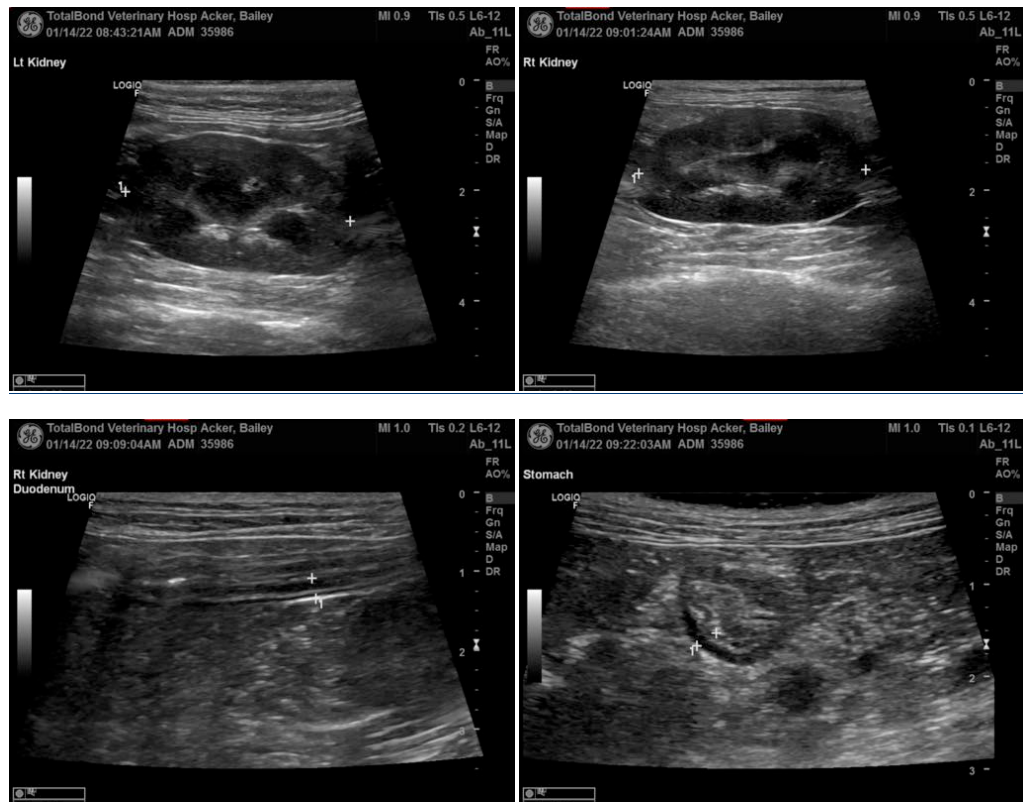
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AGE

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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.

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