



PATIENT PRESENTING CLINICAL SIGNS

Jazzy Clark
 History: Marked weight loss, ~2 pounds since July 2021 - R/O IBD, malabsorption/maldigestion, hyperthyroidism, renal disease. Increased appetite noted in recent exam, as well as muscle atrophy
 TLI/PLI/cobalamin/folate pending

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Oct 2021 showed CBC - Wnl; Chemistry profile - Superchem: wnl - note high normal BUN and creatinine - monitor; Heartworm test - HW antibody - negative; Thyroid hormones - TT4- 1.4 (0.8-4); Urinalysis - USG 1.059 pH 7 urine chems: 1+ pro urine sedi: nsf MA: 0.1 (<2.5) renal tech - inconclusive TLI/PLI/cobalamin/folate pending

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Neutered Male

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 were noted. Ureteral papillae were normal.

AGE

10 Years 8 Months

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.35 cm. The left kidney measured 3.85 cm.

WEIGHT

8.03 Lbs.

Adrenal Glands

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

The regions of the **adrenal glands** revealed no evident pathology.

Spleen

IMAGING PERFORMED BY

Carly Pate

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 were noted. The spleen measured 0.84 cm.

HOSPITAL NAME

VCA McKenzie AH

Liver

REFERRING VET

Dr. Arpaia

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

INVOICE

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Gastrointestinal

DATE

1/14/22

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropy" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Minor chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by



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intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.

Pancreas

SPECIES

Feline

The **pancreas** was slightly irregular and hypoechoic with undulating contour and possible low-grade inflammation. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.

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Free Abdomen

The mesenteric lymph **nodes** presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia. An example of a lymph node measured 0.33 cm.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Minor IBD GI pattern with probable low-grade pancreatitis
- Age-related renal changes
- Reactive mesenteric lymph nodes

AGE

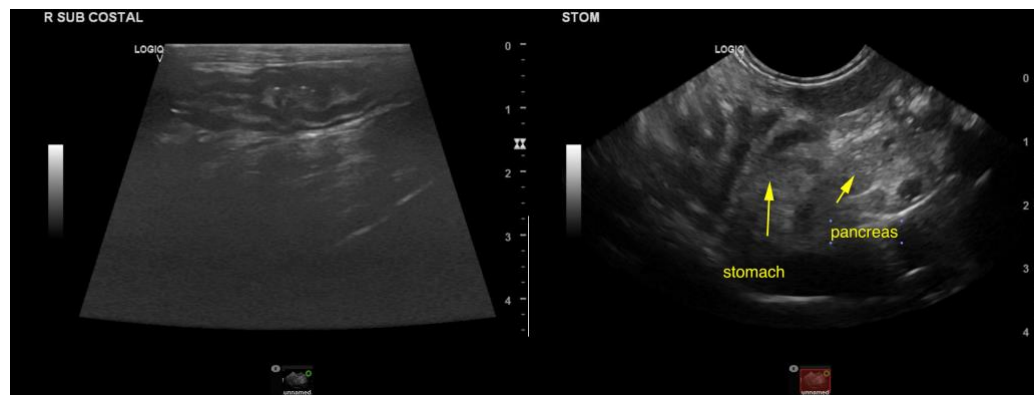
10 Years 8 Months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of neoplasia. The azotemia is likely prerenal owing to pancreatic +/- GI disease. 72-hour IV fluid protocol and reassessment of the clinical status recommended.

WEIGHT

8.03 Lbs.



INTERPRETED BY

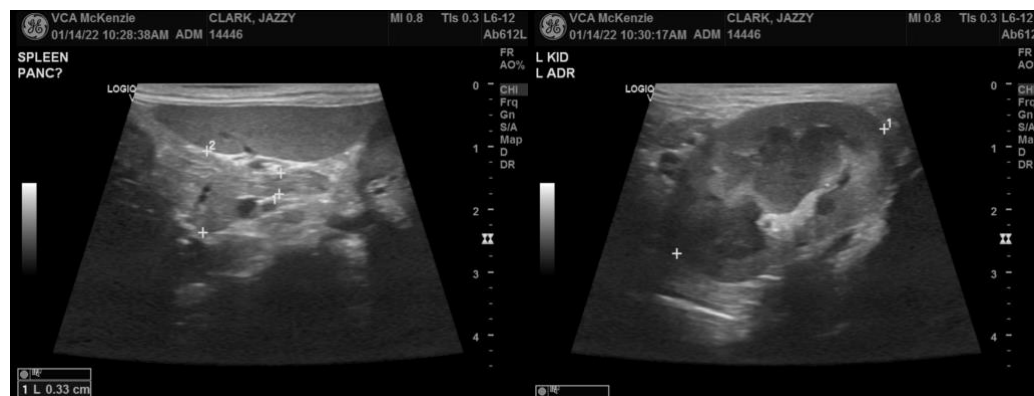
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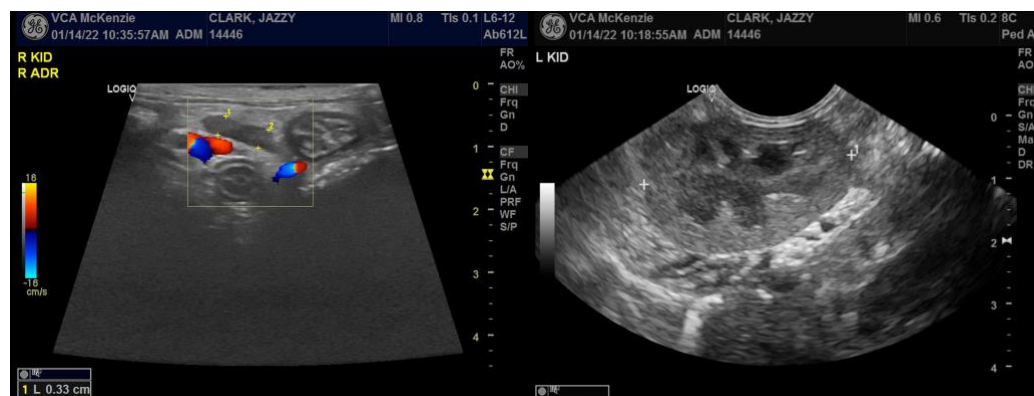
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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