



PATIENT

Raymond Busel

PRESENTING CLINICAL SIGNS

mild distal constipation, decreased appetite, scan for underlying dz increased ALT ALP T Bili Chol

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed sand accumulation. Minor apical ventral wall thickening noted and suspended debris. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

BREED

DSH

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.5 cm. The right kidney measured 4.7 cm .

SEX

Neutered Male

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

AGE

9 Years

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 were noted.

WEIGHT

16.9 Pounds

Liver

The **liver** was diffusely hyperechoic to falciform fat. The gallbladder and common bile duct were unremarkable. This is most consistent with hepatic lipidosis. Coagulation panel and 25-gauge FNA indicated to confirm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenn

Gastrointestinal

Examination of 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.

HOSPITAL NAME

Rockaway AH

Pancreas

Minor heterogeneous **pancreatic** changes noted in the left limb. Recent history of pancreatitis possible.

REFERRING VET

Dr. Maniar

ULTRASONOGRAPHIC FINDINGS

INVOICE

34270

- Hepatic lipidosis pattern
- Bladder sand
- Minor heterogeneous pancreas

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

1/15/22

Supportive care warranted with FNA of the liver. Treatment for lipidosis/inflammatory hepatopathy.



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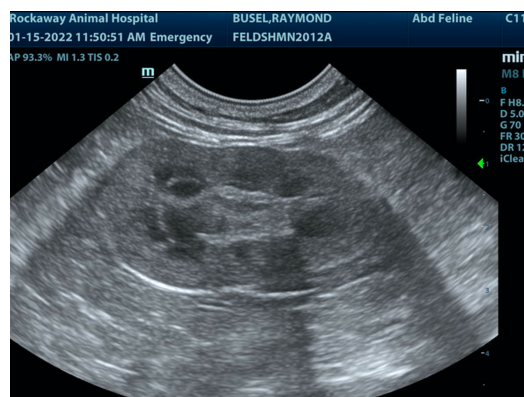
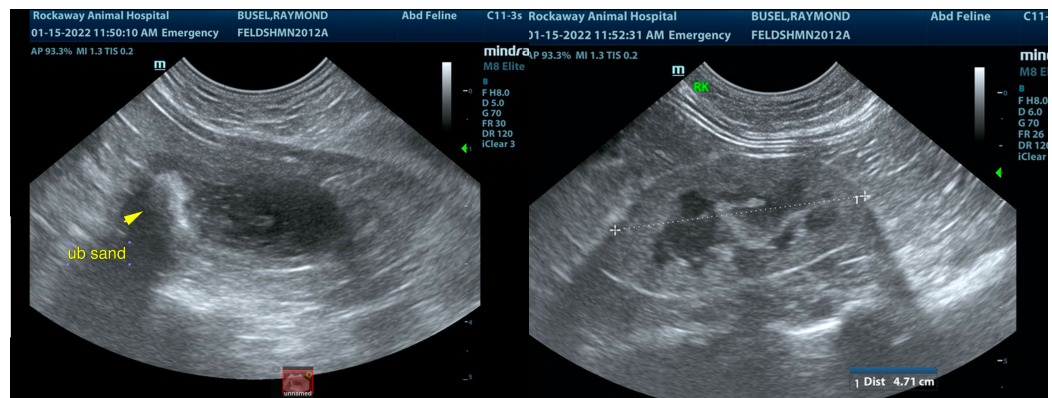
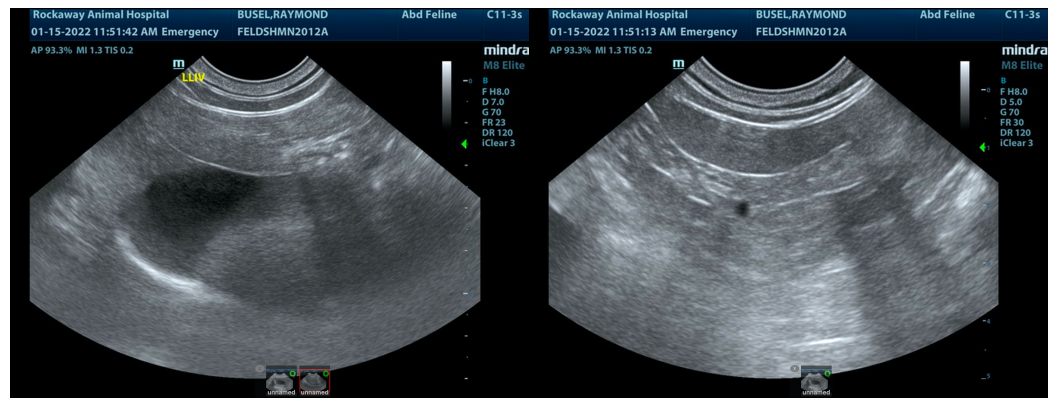
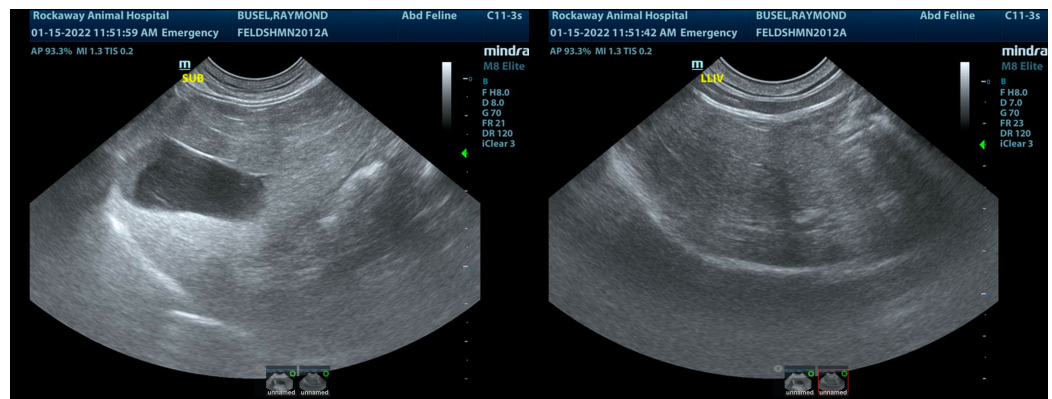
Dr. Maniar

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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.

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.

BREED

DSH

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

info@SonoPath.com

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