



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Princess White

SPECIES Feline

BREED DSH

SEX Spayed Female

AGE 14 Years

WEIGHT 9.9 Pounds

history of poor appetite starting in December, seen at rDVM were labs were performed and vax administered. worsened and began to vomit. O started to syringe feed as needed. Rechecked with Rivers edge 1/13 for further work up, repeat labs and radiographs performed and outpatient therapy administered-treated for suspect pancreatitis, minimal improvement, continued weight loss, re-presented today for worsened lethargy, vomiting and diarrhea, and continued anorexia, p was referred to WVH for abdominal u/s and hospitalization. On intake p lethargic, clinically dehydrated at 5-7%, flea dirt present in coat, and hypothermic (Temp 96.5). Hypersalivation and possible oral pain, dental disease, pale mm. Aspirates taken from enlarged Inn (results pending)

Abnormal PE/Chem/CBC/UA Results: Labs: 1/13 BUN 11L, Creat 1.4 N, HCT 19.6%, MCHC 36.2H, RBC 6.15 L, retic 13.5 N, some bands present

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.0 cm with slight pyelectasia.

Adrenal Glands

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

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.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

The **stomach** itself was unremarkable. Minor distal small intestinal thickening noted without loss of mural detail. Reactive mesenteric lymph node noted at 0.9 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Harmon

INVOICE

34223

DATE

1/17/22



PATIENT

Pancreas

Princess White

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 subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

SPECIES

Feline

BREED

DSH

- Geriatric abdomen
- Slight mesenteric lymphadenopathy, reactive pattern
- Minor chronic pancreatic changes

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of specific disease. No evidence of neoplasia. The presentation is most consistent with inflammatory bowel and lymphadenitis. Malassimilation may be associated. Mild potential for emerging lymphoma. However, given the anemia, CBC path review and bone marrow aspirate warranted. Full CNS and thoracic examination recommended.

AGE

14 Years

WEIGHT

9.9 Pounds



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Harmon



INVOICE

34223

DATE

1/17/22



PATIENT

Princess White

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

14 Years

WEIGHT

9.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

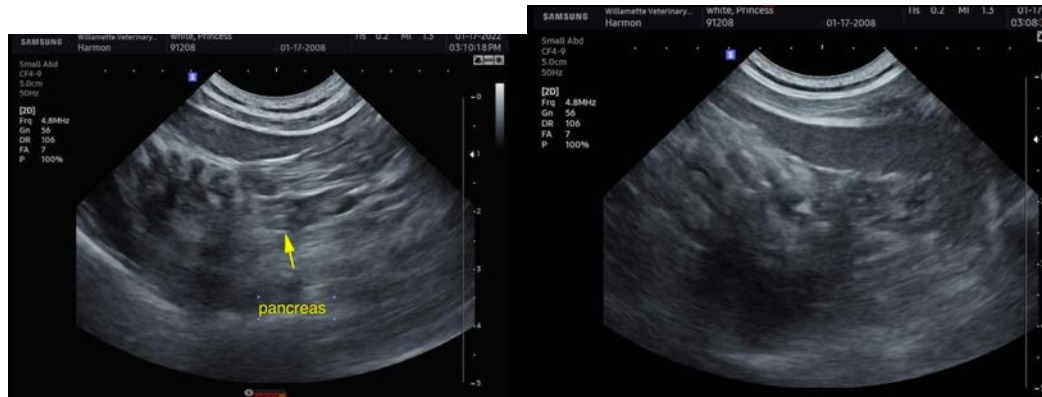
Dr. Harmon

INVOICE

34223

DATE

1/17/22



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.

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