



PATIENT

PRESENTING CLINICAL SIGNS

Opie Naidoff

Chronic vomiting, history of pancreatitis.
Abnormal PE/Chem/CBC/UA Results: Fasting FPLI 22 (N: 0-3.5). (Note: Vit. B/Folate normal).

SPECIES

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline

Urinary System

BREED

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.

Domestic Shorthair

SEX

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Cortical infarcts and mineralization were noted. Cortical parenchymal striations were noted in both kidneys with patchy, hyperechoic, cortical infarcts. The right kidney measured 3.93 cm. The left kidney measured 3.45 cm. Blood flow to the kidneys was significantly subnormal on Power Doppler assessment. This is indicative of chronic disease.

Neutered male

AGE

12 years

WEIGHT

14 lbs

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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. The left adrenal gland measured 0.49 cm. The right adrenal gland measured 0.49 cm.

IMAGING PERFORMED BY

Kelly Vazquez, CVT

Spleen

HOSPITAL NAME

Legacy AH

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.

REFERRING VET

Dr. Potenzzone

Liver

INVOICE

95528

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.

DATE

1/25/22



PATIENT

Gastrointestinal

Opie Naidoff

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. Mesenteric cysts were noted in the mid caudal abdomen and measured 3.25 x 2.11 cm. This is subjectively benign. The mesenteric cysts are likely residual lymph nodes that have necrosed and remained with a lymph filled cyst. This is not pathological. However, this could be drained with ultrasound guidance.

SPECIES

Feline

BREED

Domestic Shorthair

Pancreas

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

Neutered male

AGE

12 years

ULTRASONOGRAPHIC FINDINGS

Moderate interstitial nephrosis with cortical infarcts and mineralization. Subnormal blood flow.

WEIGHT

14 lbs

Benign mesenteric cysts.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I am most concerned about long term renal function in this patient. Renal values and urinalysis should be monitored carefully long term as well as blood pressure measurements.

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

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REFERRING VET

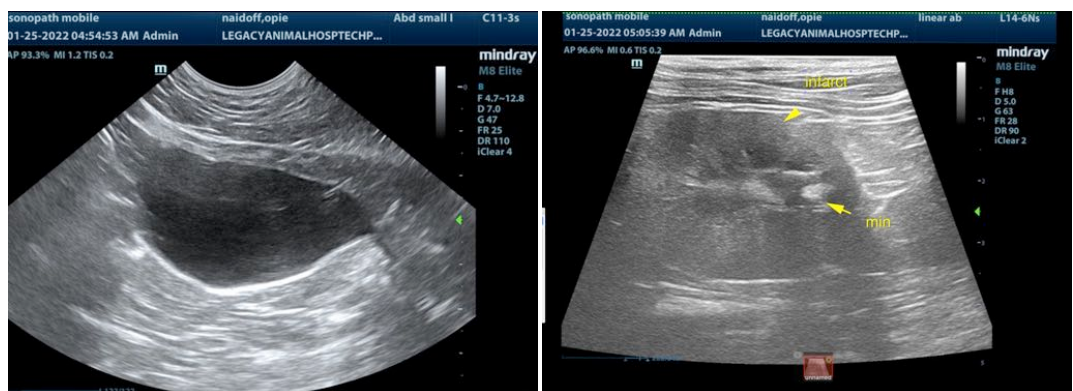
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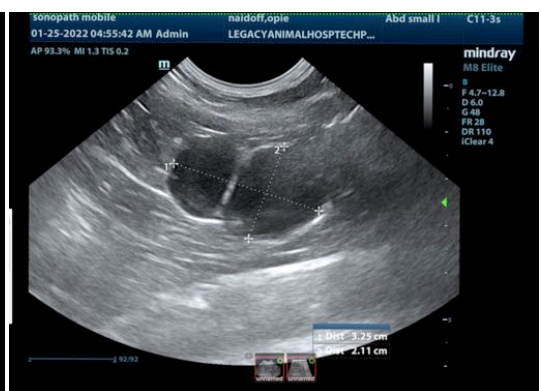
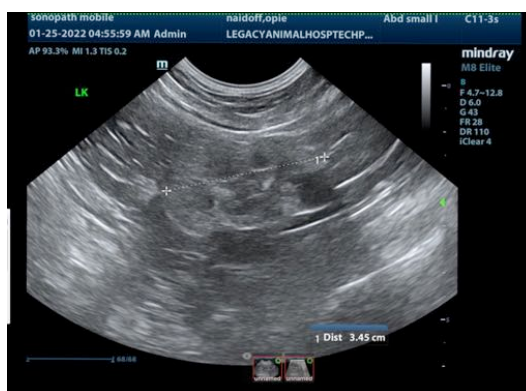
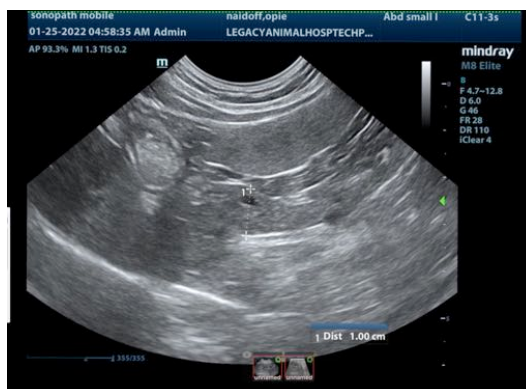
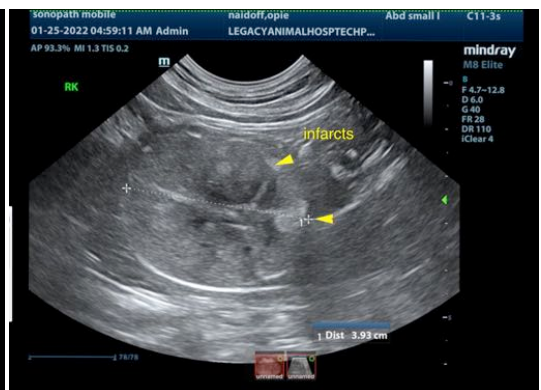
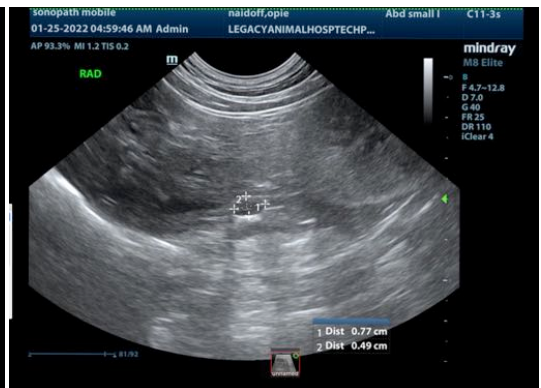
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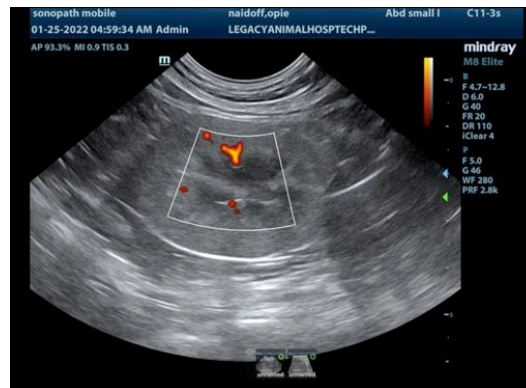
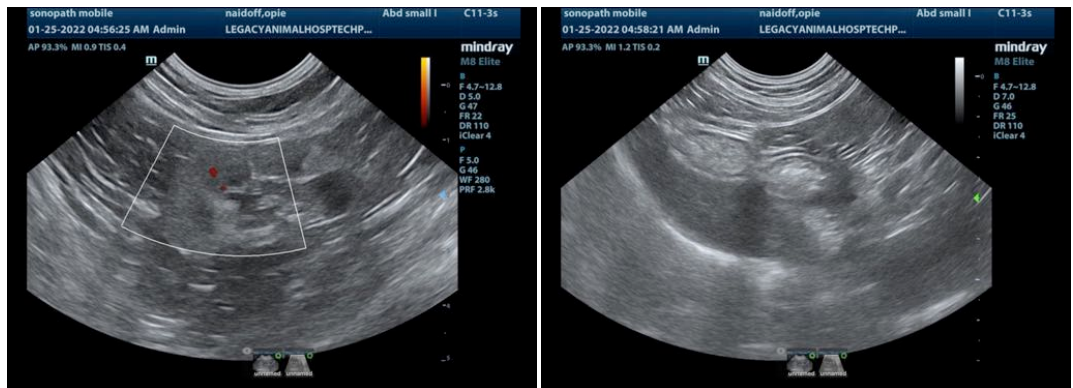
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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