



PATIENT	PRESENTING CLINICAL SIGNS
Marty Werstler	Marty is a ten year old, MN, DSH cat with a history of hyperthyroidism, treated I-131 in Nov 9th 2021. Had been doing well, presented 1/24 for coughing up hairballs/vomiting daily for 2 days duration, a clump of hair with liquid usually. At that time he was eating ok, but diarrhea was reported the next day.
SPECIES	On exam he had a new Grade II/VI systolic murmur and some evidence of overgrooming his abdomen, and moderate dental disease/neck lesions. UA WNL, highly concentrated. Bloodwork revealed mild pancreatitis (spec fPL 6.3), SDMA 16 with normal Creat/BUN, leukocytosis with mild eosinophilia which improved at his recheck 1/28, normal proBNP, T4 2.0. 1/28 he was reportedly not eating much at all since 1/26 and vomited once despite cerenia. Mirataz ointment, SQ fluids, cerenia, panacur for 3 days prescribed 1/28. He has been on Royal Canin SO diet for past crystalluria but was instructed to feed what Marty will eat for now. Positive murphy sign at position 13.
Feline	
BREED	
Domestic Shorthair	
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Neutered male	Urinary System
AGE	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.
10 years	
WEIGHT	
12.1 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 4.47 cm. The left kidney measured 4.73 cm.
INTERPRETED BY	
Eric Lindquist, DMV DABVP, Cert. IVUSS	
IMAGING PERFORMED BY	Adrenal Glands
Dr. Todd	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 0.3 cm. The right adrenal gland measured 0.4 cm.
HOSPITAL NAME	
Lambs Gap AH	
REFERRING VET	Spleen
Dr. Knouse	The spleen was mildly enlarged and was hypoechoic to the surrounding fat. The spleen measured 1.2 cm in width. Subtle micronodular changes were noted in the spleen as well.
INVOICE	Liver
95644	The liver was slightly enlarged with minor coarse architecture and slightly increased portal markings. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.
DATE	
1/31/22	



PATIENT

Gastrointestinal

Marty Werstler

The **stomach** was empty with no evidence of mural changes. Areas of small intestine revealed thickening with some loss of mural detail. Areas of muscularis hypertrophy was noted throughout the intestinal tract. Reactive mesentery was noted around the intestine. The mesenteric lymph nodes were mildly enlarged, hypochoic with enhanced surrounding fat. Epigastric lymph nodes were slightly enlarged as well.

SPECIES

Feline

BREED

Pancreas

Domestic Shorthair

The **pancreas** was hypochoic and heterogenous as well. Some level of inflammation is likely.

SEX

Neutered male

Free Abdomen

Trace amounts of free fluid were noted. This is likely owing to lymphatic congestion.

AGE

10 years

ULTRASONOGRAPHIC FINDINGS

Variable intestinal thickening with lymphadenopathy and reactive mesentery associated with the intestine, lymph nodes and pancreas.

WEIGHT

12.1 lbs

Acute on chronic triad disease/inflammatory bowel and lymphadenitis versus emerging lymphoma.

Splenic nodular changes and hepatic enlargement.

INTERPRETED BY

Free fluid.

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

I recommend FNA of the spleen, liver and accessible lymph nodes to assess for round cell neoplasia/lymphoma or mast cell disease. Pain management, broad spectrum antibiotics and IV fluid support is all indicated. The kidneys are largely unremarkable and stable. The SDMA may be a paraneoplastic manifestation if round cell neoplasia is confirmed.

Dr. Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

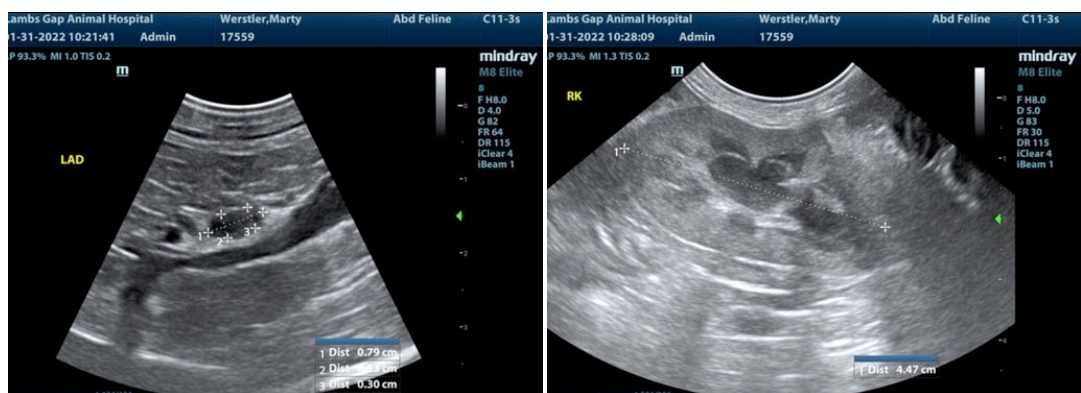
Dr. Knouse

INVOICE

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DATE

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PATIENT

Marty Werstler

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

10 years

WEIGHT

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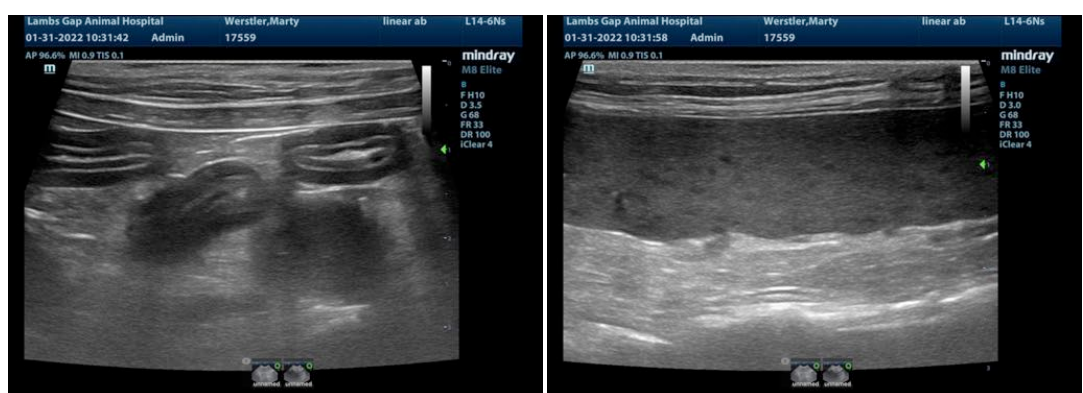
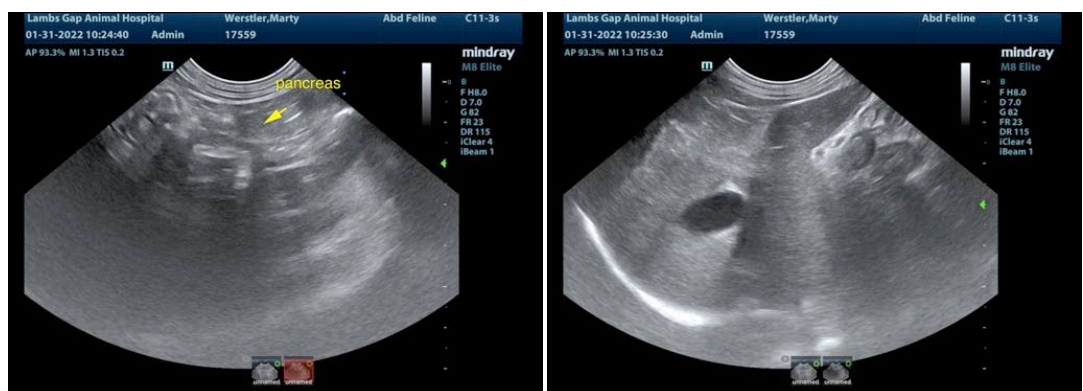
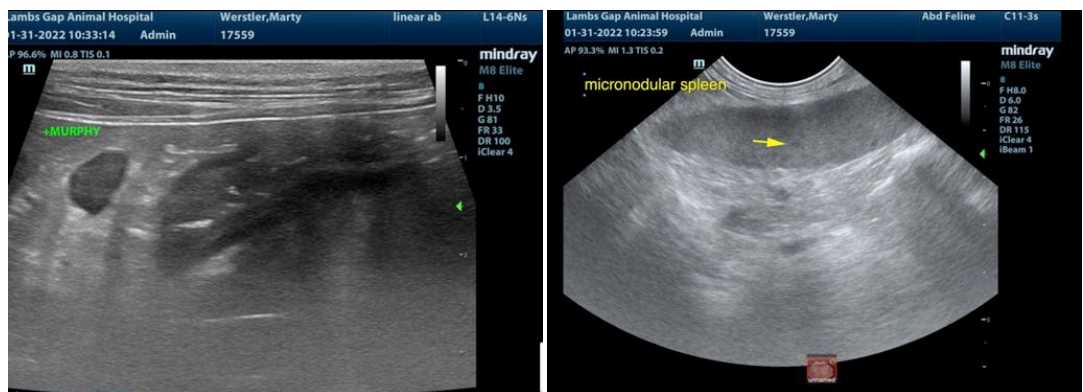
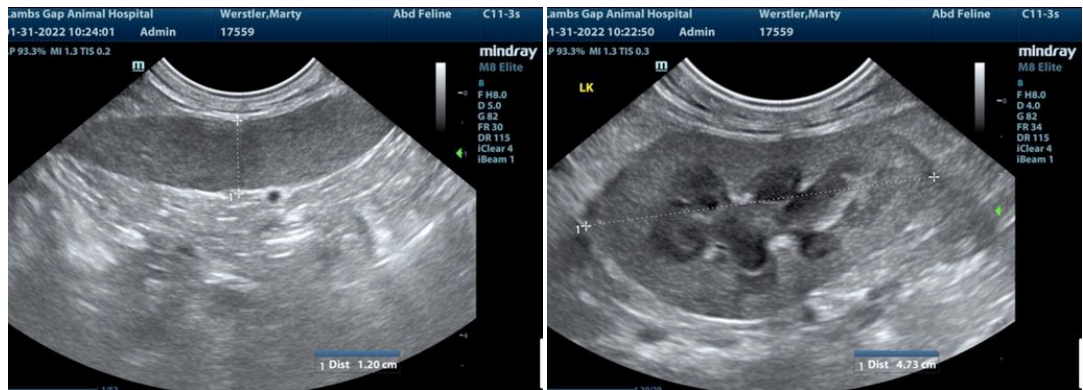
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Marty Werstler

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BREED

Domestic Shorthair

SEX

Neutered male

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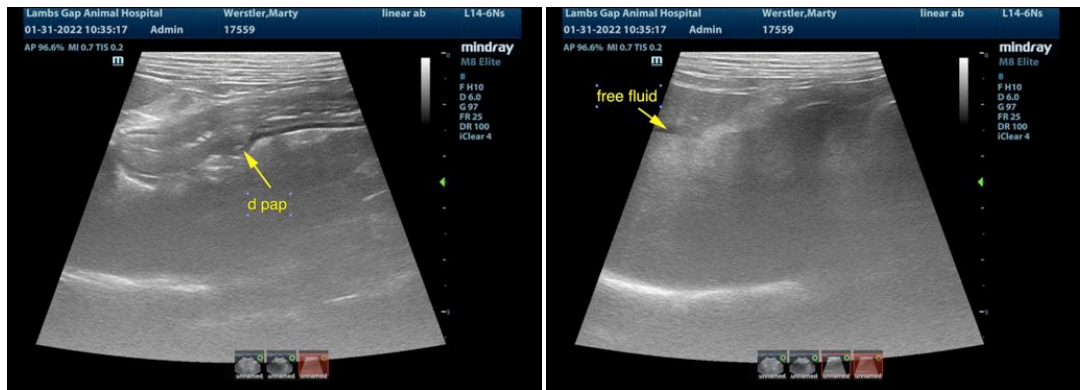
Dr. Knouse

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DATE

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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.

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