

**DATE PRESENTING CLINICAL SIGNS**

1/7/22

History: Presenting Complaint: Lethargic. Date: 01-06-2022 Notes: a couple of days ago- not really wanting to eat- seemed to be picky- but then did start to eat yesterday-did eat breakfast- but did not continue to eat last night- became very lethargic, crying, not wanting to move vomited once two days ago. Indoor only- FeLV/FIV status- negative not aware of getting into anything -adopted in August 2021 from rescue.

PATIENT

Apple Byrd

Assessment: painful abdomen, hypothermia, low heart rate- possible soft murmur noted. Plan: Fast scan- no free fluid in the abdomen; patient placed into the incubator-discussed the PE findings and the concern with low body temperature and low heart rate; discussed bad GI issues, pancreatitis, infection, other.

SPECIES

Feline

Current Medications: Unasyn, Lasix (50mg/mL – given 0.18 mL), Buprenex, Ondansetron, Pantoprazole. Lab Results: Attached separately.

BREED

DSH

Radiographs: Xray Abdomen 2 View bronchi/interstitial lung pattern with concern for pleural effusion develop rounded heart material in the stomach stool in the colon.

SEX

Spayed Female

Date of Previous IntraPet Ultrasound: No previous IntraPet scans. Sedation: Not required to complete full diagnostic ultrasound. Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**AGE**

4/22/21

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.

WEIGHT

9.8 Pounds

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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.83 cm. The right kidney measured 3.88 cm.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Rachel Brilhart RDMS

Adrenal Glands

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 adrenal glands measured 0.4 cm each.

HOSPITAL NAMEAnimal Emergency
Hospital**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.

REFERRING VET

Dr. Willer

INVOICE

34100

Liver

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.

Pleural effusion and lung consolidation noted through the diaphragm. Thoracic radiographs and echocardiogram recommended.

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.

Pancreas

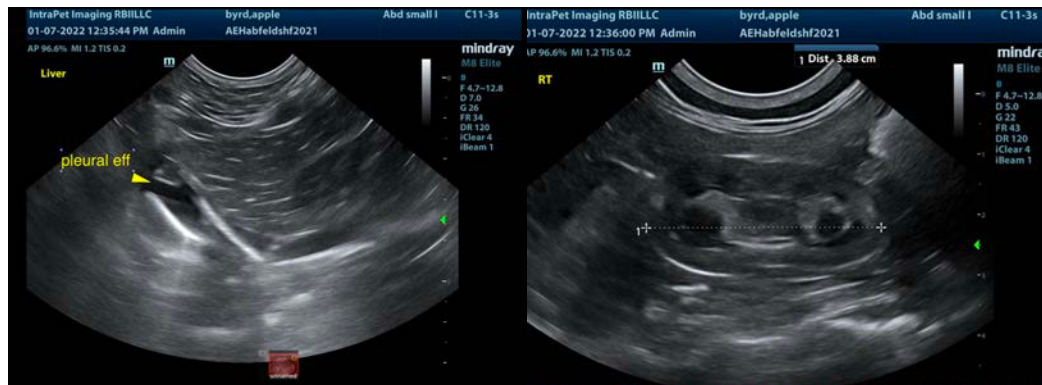
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

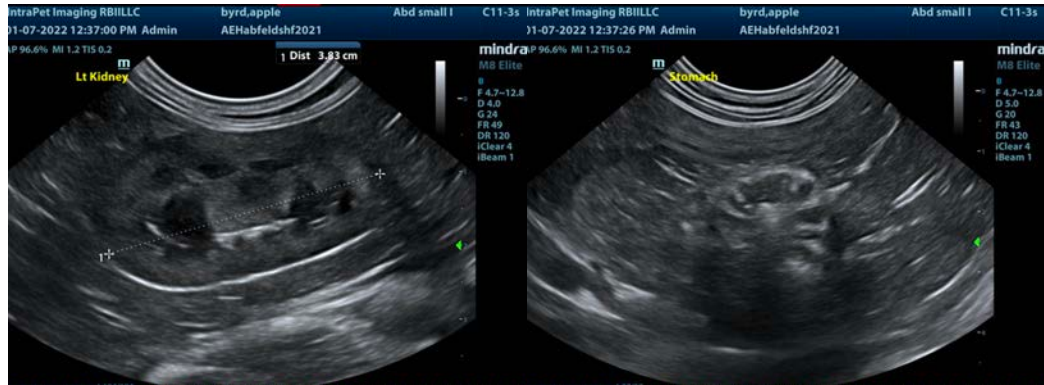
ULTRASONOGRAPHIC FINDINGS

- Normal abdomen
- Pleural effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pleural effusion should be investigated. Possibilities of FIP or cardiac failure or other causes of thoracic disease as cause of the clinical signs.





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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