



**DATE PRESENTING CLINICAL SIGNS**

01/09/2026

Patient History: Dandelion Lillie presents for persistent vomiting, anorexia, diarrhea, lethargy, post-chemotherapy. Patient History: - Vomiting: onset Sunday night/Monday morning; 3 episodes (initially food, then yellow liquid); overnight Monday-Tuesday (yellow liquid); once Tuesday (small, liquid, no food); Wednesday morning (progressively pink-tinged, 3 episodes: 4:20 AM, 5:30 AM, ~7:30 AM) - Vomited after oral maropitant (foaming, hypersalivation) - Diarrhea: onset today; yellow, soft to liquid with chunks; no hematochezia; some fecal soiling - Anorexia: minimal food intake since Monday; no interest in treats/dry food; persistent nausea (tongue licking, drooling) - Defecation: once between Monday-Wednesday (hard, small); diarrhea today - Urination: at least once, possibly twice in last 24 hours - Lethargy: tail and ears down; decreased interaction; not presenting abdomen for petting (normally does) - Recent stress: housemate cat euthanized Monday (renal disease) - Previous diagnostics: radiographs (intestinal inflammation); bloodwork (liver and kidney values WNL) - Subcutaneous fluids administered at home post-visit; temporary improvement in demeanor - No known dietary indiscretion; indoor only; no known toxin exposure - No recent interest in food after noon today.

**PATIENT**

Dandelion Lillie

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

01/07/2022

Current Medications: Buprenorphine, Ondansetron.  
Labwork Results: Labwork attached.  
Date of Previous IntraPet Ultrasound: No previous.  
Sedation: Not required to complete full diagnostic ultrasound.  
Stat Report: Not requested.  
Imaging Performed by: Rachel Brillhart, RDMS.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**WEIGHT**

17.6 pounds

**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.

**INTERPRETED BY**

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IVUSS

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. Slight mineralizations were noted. The left kidney measured 5.5 cm in length. The right kidney measured 4.38 cm in length.

**HOSPITAL NAME**

Animal Emergency  
Hospital

**Adrenal Glands**

The **adrenal glands** were uniform, yet bilaterally swollen and hypoechoic. This is most consistent with stress-induced hyperplasia. The left adrenal gland measured 0.64 cm width. The right adrenal gland measured 0.78 cm width.

**REFERRING VET**

Dr. Ruby

**Spleen**

**INVOICE**

13065

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 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.

### ***Gastrointestinal***

The **stomach** revealed stasis and dependent suspended chyme. The small intestine revealed a fluid filled lumen without obstructive patterns. The colon revealed soft stool. Some dependent chyme was noted in the pylorus with progressively shadowing hairball type density.

### ***Pancreas***

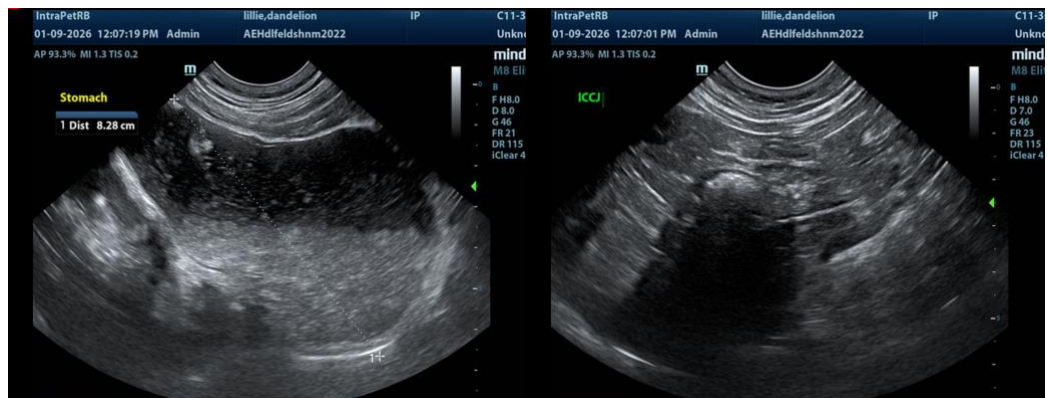
The **pancreas** presented with a dilated pancreatic duct with a distinctly hypoechoic parenchyma measuring 0.85 cm in width which is within the upper limits of normal. The duct dilation measured 0.26 cm. The left and right limb were hypoechoic and irregular.

### **ULTRASONOGRAPHIC FINDINGS**

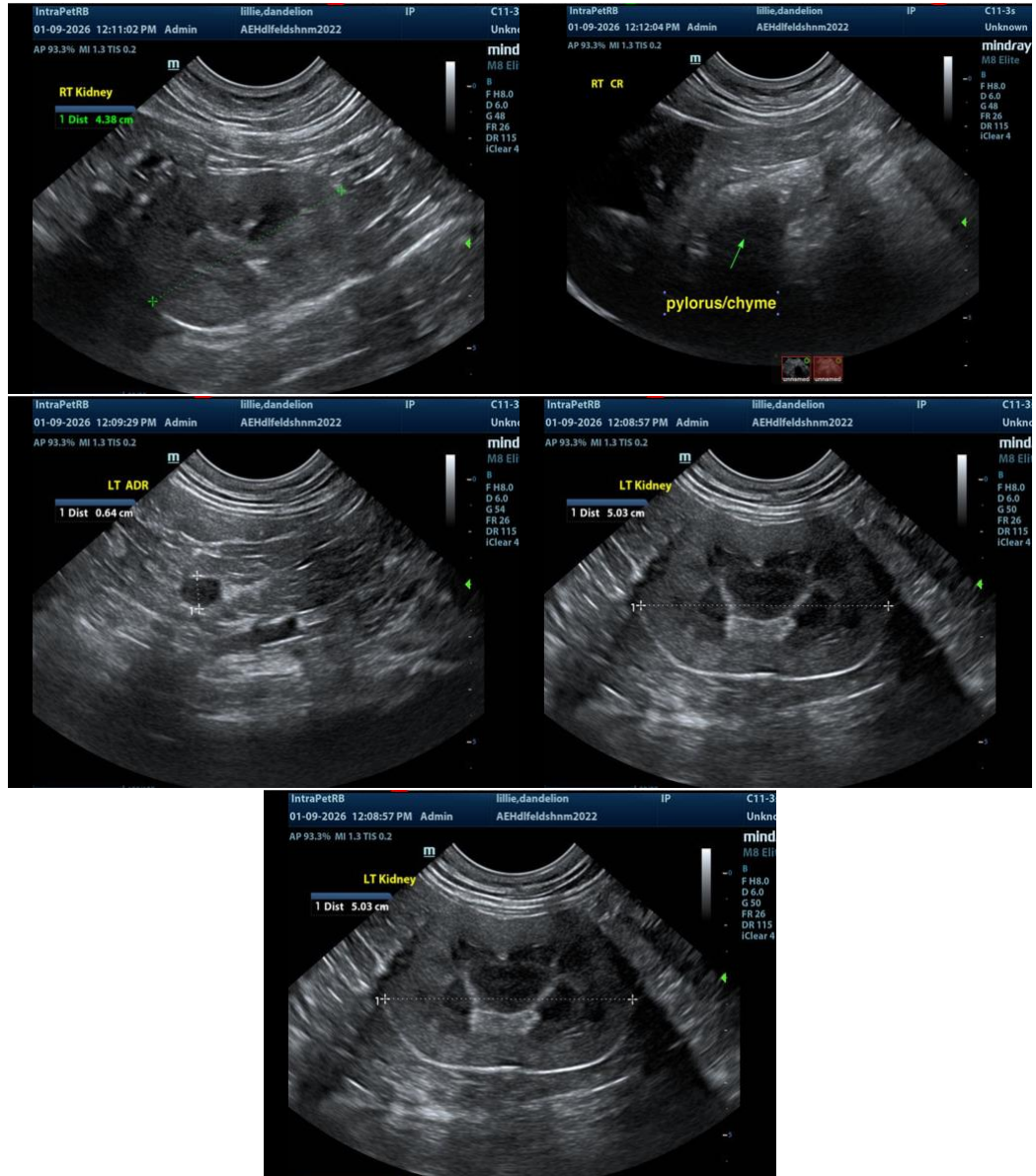
- Gastroenteritis without overt obstruction.
- Hairball type density in the stomach.
- Stress adrenal glands.
- Prominent pancreas- suspect pancreatitis.

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Medical management is indicated. IV fluid support, GI protectants, management for enterotoxins and parasite management are all indicated. Recheck sonogram in 36-48 hours if clinical signs are persisting.







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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