



PATIENT

Melvin Velthouse

SPECIES

Feline

BREED

DSH

SEX

Intact Male

AGE

9 years

WEIGHT

9.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sammy Burmeister and
Dr. Faith

HOSPITAL NAME

Faith AC

REFERRING VET

Dr. Faith

INVOICE

13993

DATE

10/22/21

PRESENTING CLINICAL SIGNS

History: anorexia, vomiting, jaundice had had prior episode General Appearance: quiet, rough hair coat, thin over back BCS: 4.5/9 MM: jaundiced, dry mucus membranes Eyes: Clear corneas, no conjunctivitis or discharge present Oral: No oral masses noted, dental grade: 1 Skin: No parasites noted, no lesions present, jaundiced, very reduced skin turgor Ears: No debris, odor, or swelling present AU Heart: Normal heart rate, no arrhythmia present, pulses are synchronized Respiratory: Lung fields sound clear, no nasal discharge present Abdominal Palpation: no pain palpated, no obvious masses present, thin Gastrointestinal: WNL Urogenital: No abnormalities noted Lymph nodes: No enlargement noted Musculoskeletal: No gait deficit or pain palpated during joint manipulation, no muscle atrophy present Neurological: Normal placement of all four feet, no weakness present blood glucose=206 lytes: NSF CBC: HcT=28.1 sl. increase in neuts, increased monos Chem: TBili=5.0, phos=3.0, Alk phos=367, BUN=15, chol=50 dehydrated, jaundiced serious condition elevated alk phos and bili sl. decrease in HCT

Abnormal PE/Chem/CBC/UA Results: Attached are the bloodwork results from 10/13 and 8/28

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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.0 cm. The left kidney measured 3.0 cm.

Adrenal Glands

The regions of the **adrenal glands** revealed no evident pathology.

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** was diffusely hyperechoic to falciform fat with generalized enlargement. Attenuated sound beam noted in the liver owing to infiltrative disease, likely lipidosis, possibility of underlying more significant disease. No evidence of posthepatic obstruction. Heterogeneous parenchymal changes were noted throughout the liver. The gallbladder was collapsed. Pleural effusion was noted through the diaphragm which is concerning for an underlying potential neoplastic process- echocardiogram



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warranted to assess for volume overload +/- Pleurocentesis and FNA of the liver to assess lipidosis versus underlying neoplasia.

Gastrointestinal

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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.

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Pancreas

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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

AGE

9 years

- Diffuse hepatic lipidosis pattern, possibility of underlying neoplasia- age-related changes elsewhere with pleural effusion to investigate. Strong potential for thoracic +/- hepatic neoplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

9.7 Pounds

Sampling is essential. Coagulation panel warranted give the degree of hyperechogenicity of the liver which suggests poor structural integrity. A 25-gauge FNA indicated as well as Pleurocentesis, cytospin and echocardiogram to assess if the pleural effusion is cardiogenic or non-cardiogenic.

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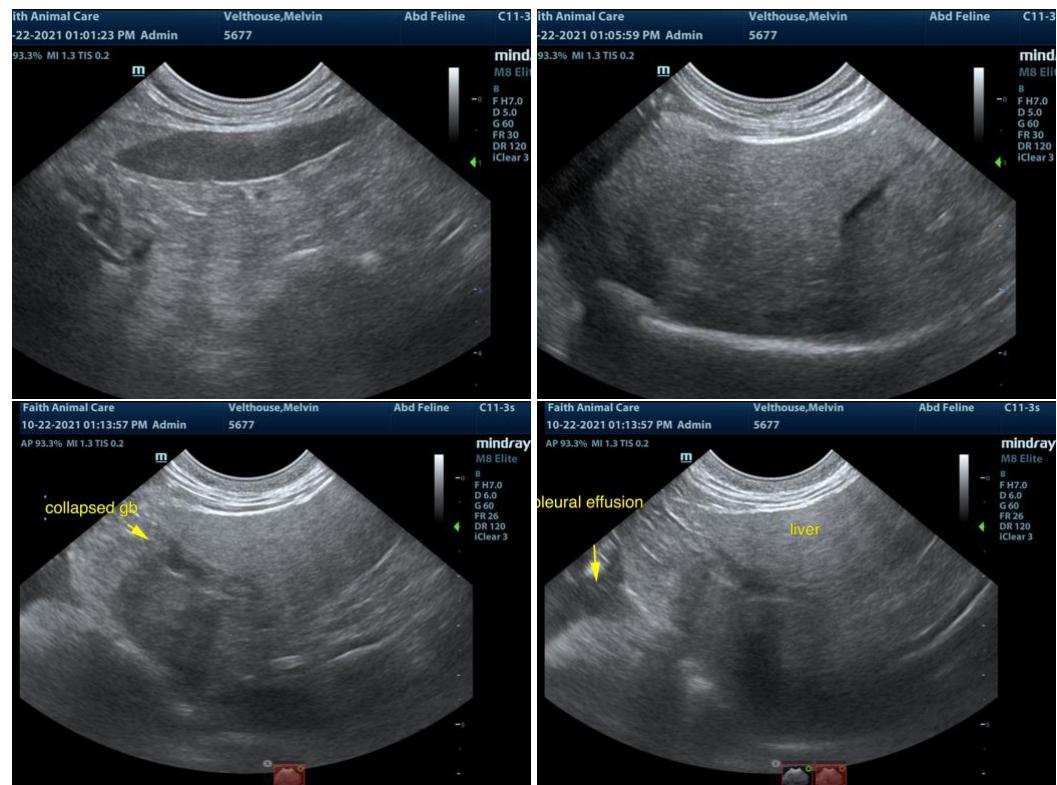
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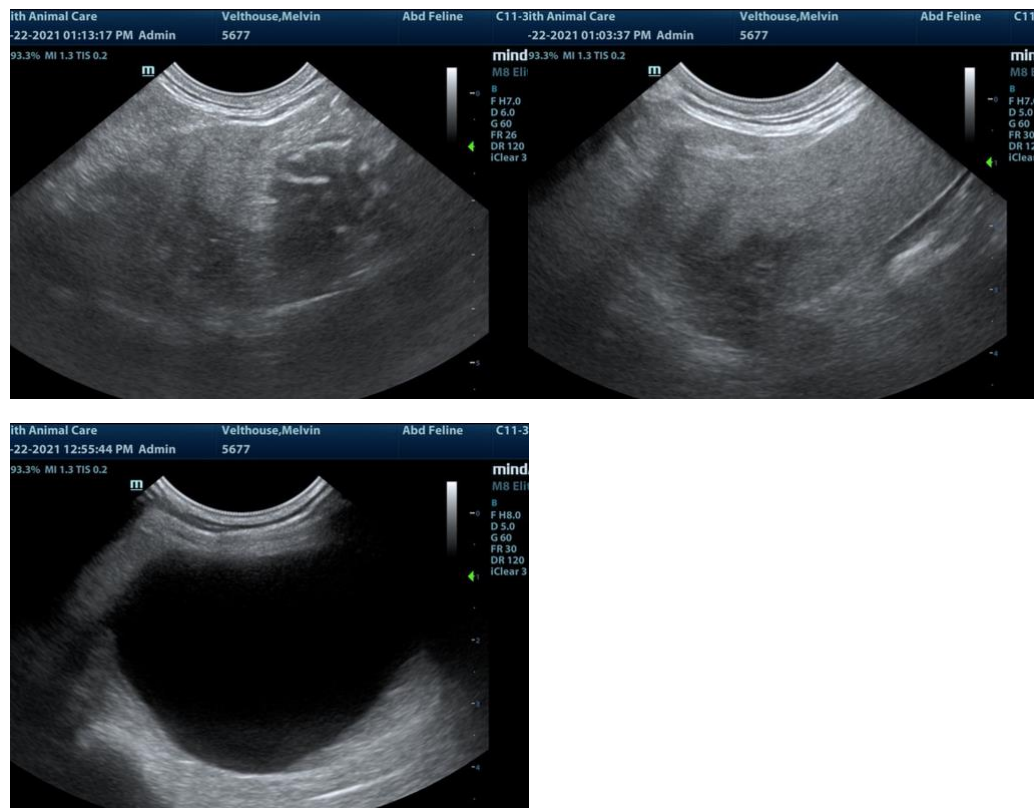
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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