



**PATIENT**

Sasha Petrica

**SPECIES**

Feline

**BREED**

DLH

**SEX**

Neutered Male

**AGE**

17 Years

**WEIGHT**

13.20

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Slaughter

**HOSPITAL NAME**

Camden-Inner Harbor  
VS

**REFERRING VET**

Slaughter

**INVOICE**

17971

**DATE**

10/29/22

**PRESENTING CLINICAL SIGNS**

History: Impacted/Constipated cat with a history of Respiratory and GI concerns

Abnormal PE/Chem/CBC/UA Results: July 2022: 2,968 Amylase (623-2,239 U/L), Lipase 52 (0-45 U/L)

**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 **left kidney** revealed a chronic interstitial nephrosis pattern with dystrophy and minor pyelectasia. Pinpoint mineralizations were noted in the left kidney. The left kidney measured 2.67 cm.

The **right kidney** measured 3.72 cm. Minor degenerative changes were noted. Minor mineralization was noted in the right kidney.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**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** 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**

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.



**PATIENT**

Sasha Petrica

**SPECIES**

Feline

**BREED**

DLH

**SEX**

Neutered Male

**AGE**

17 Years

**WEIGHT**

13.20

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Slaughter

**HOSPITAL NAME**

Camden-Inner Harbor  
VS

**REFERRING VET**

Slaughter

**INVOICE**

17971

**DATE**

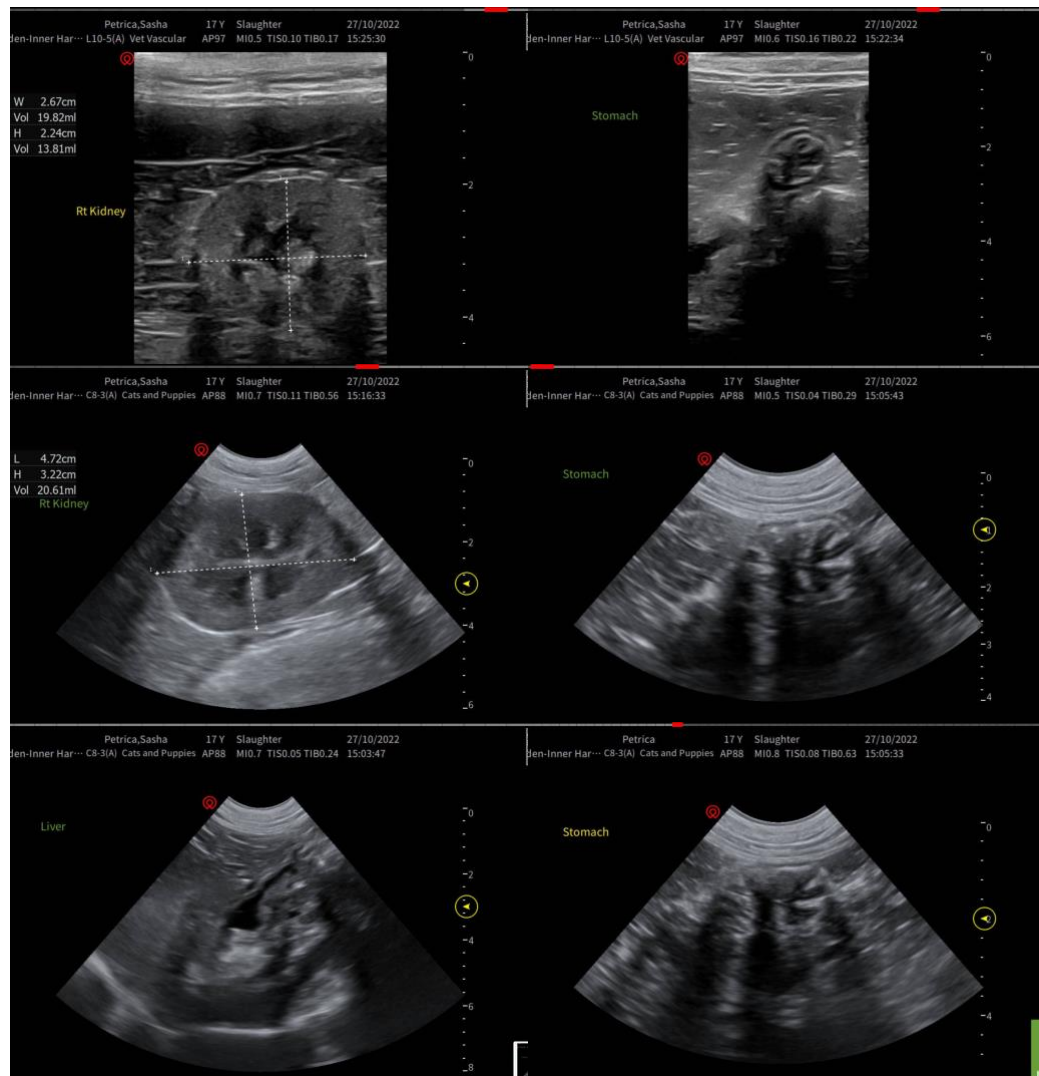
10/29/22

**ULTRASONOGRAPHIC FINDINGS**

- Dystrophic left kidney with mineralization/near end stage structural degenerative changes
- Minor degenerative right kidney changes with slight mineralization
- Unremarkable abdomen otherwise

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No obvious evidence of neoplasia. I cannot rule out underlying pancreatitis in this patient, but globally the pancreas was unremarkable. I'm most concerned about the degenerative changes in the left kidney, however, the right kidney is likely compensating, as only minimal degenerative changes appear to be present. The radiopaque ovoid structure in the mid ventral abdomen is likely a bates body and does not appear to be pathological, but not reproducible on the sonogram.





**PATIENT**

Sasha Petrica

**SPECIES**

Feline

**BREED**

DLH

**SEX**

Neutered Male

**AGE**

17 Years

**WEIGHT**

13.20

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Slaughter

**HOSPITAL NAME**

Camden-Inner Harbor  
VS

**REFERRING VET**

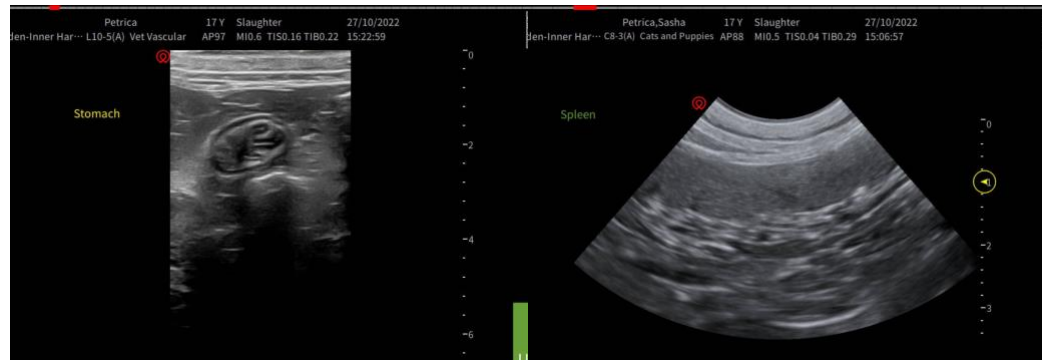
Slaughter

**INVOICE**

17971

**DATE**

10/29/22



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.

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