



PATIENT

Kitty Verdier

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed Female

AGE

13 years

WEIGHT

9.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Moon

HOSPITAL NAME

Shiloh VH

REFERRING VET

Dr. Moon

INVOICE

94503

DATE

12/11/21

PRESENTING CLINICAL SIGNS

History: Progressive weight loss over the last 4 months from 13.5lb to 9.5lb Presented mildly icteric, 9% dehydrated, not eating for >24h.

TBili 5.7 (0-0.9) ALT 139 (12-130) ALP 174 (14-111) creat 0.7 (0.8-2.4)

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 was noted. Ureteral papillae were normal.

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 right kidney measured 3.5 cm.

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.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

Liver

The **liver** was diffusely enlarged and macronodular. The liver is hyperechoic to the falciform fat. The gallbladder was unremarkable with a minor amount of debris. There was no evidence of post hepatic obstruction.

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.



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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. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

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Free Abdomen

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A moderate amount of free fluid was noted.

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ULTRASONOGRAPHIC FINDINGS

Diffuse hepatic disease with secondary free fluid.

AGE

13 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a strong concern for underlying hepatic lymphoma versus hepatic lipidosis. However, typically this does not create this amount of fluid. Coagulation panel and 25-gauge FNA of the liver is recommended. An abdominocentesis and cytospin is recommended. Lipidosis protocol is warranted in the meantime until cytology can be evaluated. The prognosis is very guarded.

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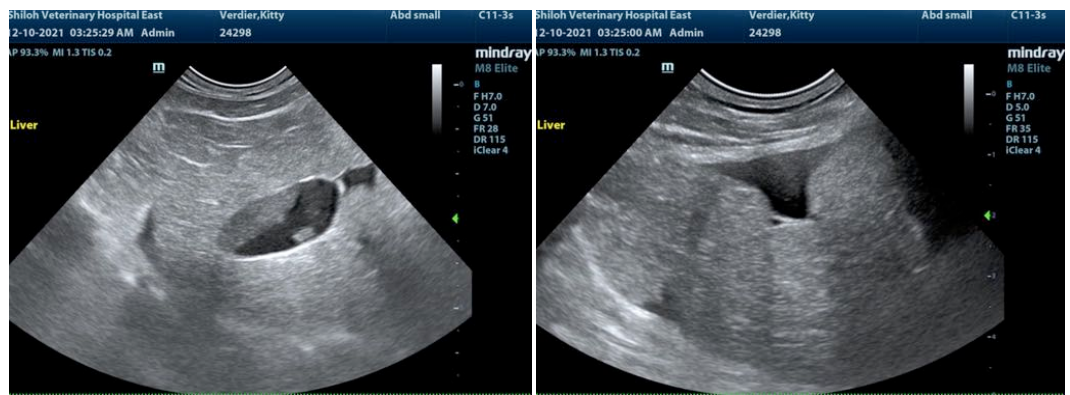
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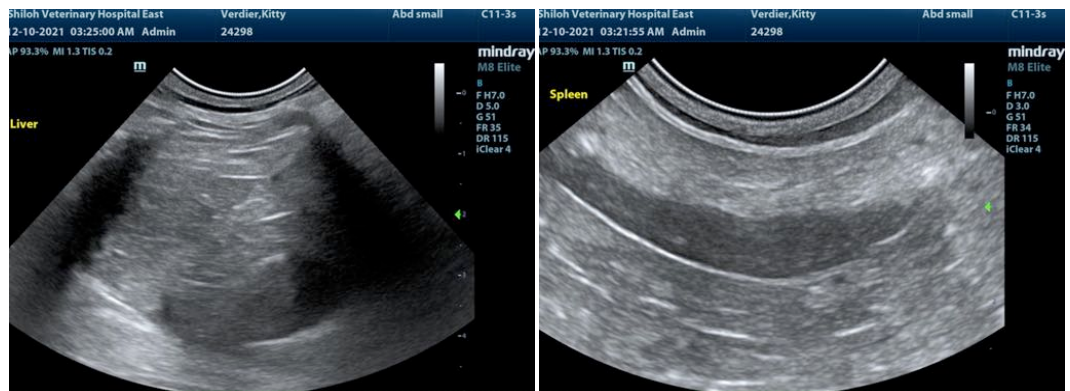
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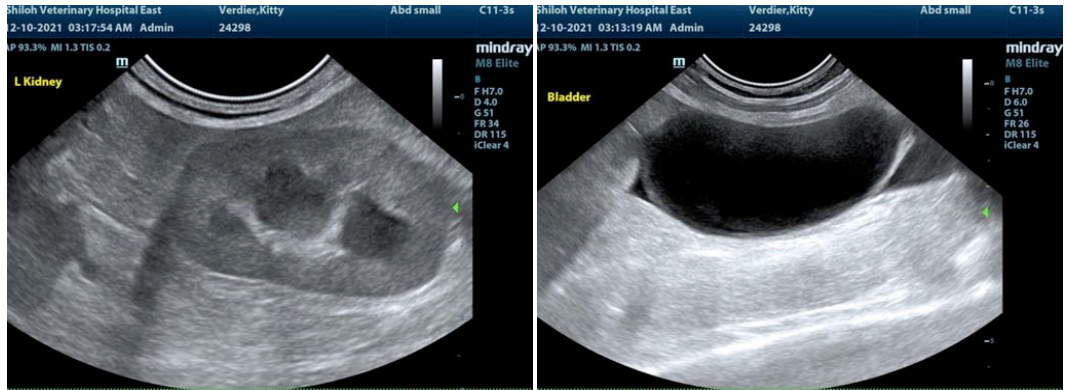
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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