



PATIENT PRESENTING CLINICAL SIGNS

Aiden Mussari

Has a history of decreased appetite, sudden weight loss of 1 and 1/2 pounds over the past 3 weeks. Owner feels appetite worsened since Friday. No vomiting seen. No previous medical problems
Abnormal PE/Chem/CBC/UA Results: Patient's sclera had tint of yellow, tacky mm, CRT=2secs, Patient has a Grade II/VI systolic heart murmur, mild tense on cranial abdominal palpation. GHP: Glu 233mg/dl, SDMA 19 ug/dl, GGT 6 u/L, TBIL 4.6mg/dl, all other values normal, T4 normal at 3.2ug/dl, CBC: RBC 8.5 m/ul (normal), HCT 46.4% normal, normal WBC, MCV mildly elevated 54.6fl, all other values normal Thoracic radiographs- normal

SPECIES

Feline

BREED

Domestic Shorthair

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Male

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.

AGE

12 years

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 4.0 cm. The right kidney measured 4.0 cm.

WEIGHT

14.88 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Dr. Jones

Spleen

HOSPITAL NAME

Schutzville AH

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 was noted. The spleen measured 1.0 cm.

REFERRING VET

Dr. Jones

INVOICE

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Liver

The **liver** was coarse in architecture with increased portal markings. The gallbladder was unremarkable with a minor amount of debris.

DATE

12/20/21

Gastrointestinal



PATIENT

Aiden Mussari

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.

SPECIES

Feline

Pancreas

BREED

Domestic Shorthair

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.

SEX

Male

ULTRASONOGRAPHIC FINDINGS

Non-specific, cholangiohepatitis liver presentation.

AGE

12 years

Otherwise, age related abdominal changes.

WEIGHT

14.88 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If the bilirubin is not artifactual on recheck sampling then FNA is indicated. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered. It is odd that the bilirubin elevation would be elevated by itself. If persistent and not artifactual then Salmonella infection should be considered as a potential that can cause bilirubin elevation on its own. There was no obvious evidence of neoplasia; however, emerging hepatic neoplasia cannot be ruled out.

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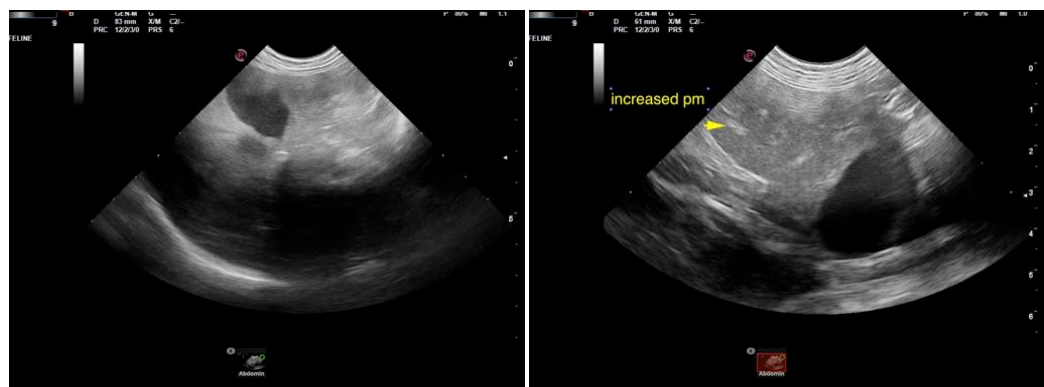
Dr. Jones

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DATE

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PATIENT

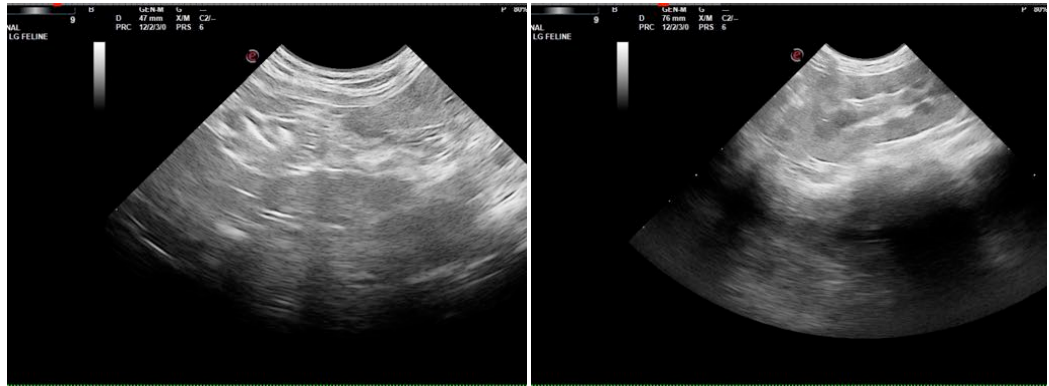
Aiden Mussari

SPECIES

Feline

BREED

Domestic Shorthair



SEX

Male

AGE

12 years

WEIGHT

14.88 lbs

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

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DABVP, Cert. IVUSS

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