



PATIENT	PRESENTING CLINICAL SIGNS
Zuchero Russino	History: lethargy/anorexia bw---hyperglycemia, azotemia, elevated alt ,cbc wnl,pli negative ,ua and t4 pending on iv fluids,insulin,supportive care
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	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.
DSH	
SEX	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 4.88 cm. The left kidney measured 4 cm.
Neutered Male	
AGE	
11 Years	
WEIGHT	The adrenal glands were not visualized.
12.30 Lbs.	Spleen
INTERPRETED BY	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.
Eric Lindquist, DMV DABVP, Cert. IVUSS	
IMAGING PERFORMED BY	Liver
Ohad Barnea	The liver revealed generalized enlargement and was diffusely hyperechoic to falciform fat. A minor amount of suspended debris was present in the gallbladder .
HOSPITAL NAME	Gastrointestinal
Tenafly VC	The stomach was overdistended with anechoic fluid. The small intestine and colon were unremarkable.
REFERRING VET	Pancreas
Ohad Barnea	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.
INVOICE	ULTRASONOGRAPHIC FINDINGS
13213	<ul style="list-style-type: none"> • Non-specific hepatic enlargement, possibly owing to diabetic state, emerging lipidosis, low grade inflammatory hepatopathy • Age-related renal changes • Stomach overdistended with anechoic fluid
DATE	
12/28/21	



PATIENT

- Unremarkable abdomen otherwise

Zuchero Russino

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Feline

Potential Causes of Diabetic Dysregulation

This is a suggestive checkoff list when faced with an unregulated diabetic patient:

BREED

UTI

Dietary indiscretion/intolerance

DSH

Pancreatitis

Hyperthyroidism/hypothyroidism

SEX

Exogenous steroids (including topical eye meds)

Neutered Male

Cushing's

Acromegaly

Owner compliance

AGE

Insulin quality issues

11 Years

Antibodies to insulin

Underlying Neoplasia

Diffuse liver disease

WEIGHT

12.30 Lbs.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Ohad Barnea

HOSPITAL NAME

Tenafly VC

REFERRING VET

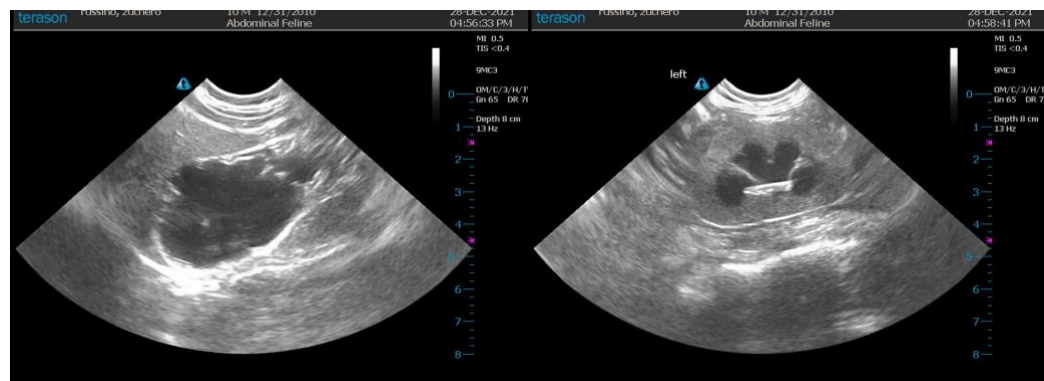
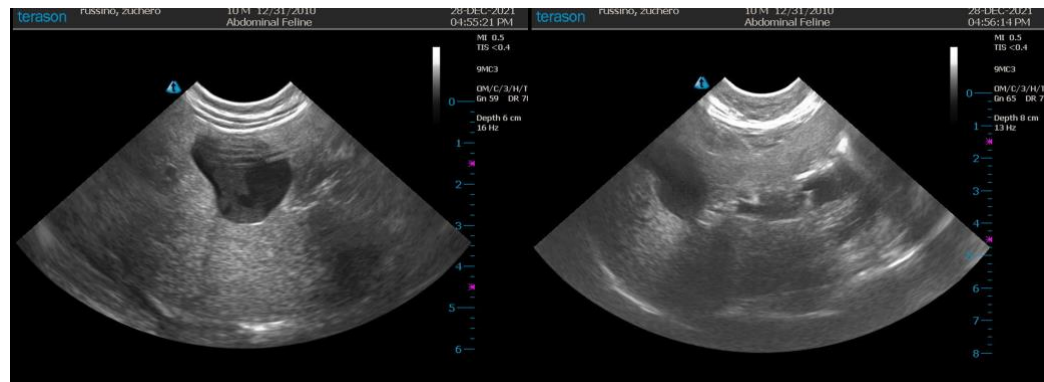
Ohad Barnea

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PATIENT

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SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years

WEIGHT

12.30 Lbs.

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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
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