



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Prudence Martocchia	History: Presented due to frequent vomiting and weight loss
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: Generalized muscle atrophy. No significant findings on CBC, chem, T4 performed elsewhere.
Feline	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>	<b>Urinary System</b>
DSH	The <b>urinary bladder</b> , 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.
<b>SEX</b>	
Spayed Female	The <b>kidneys</b> revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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.
<b>AGE</b>	
13 Years 1 Month	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
7.6 Pounds	The regions of the <b>adrenal glands</b> revealed no evident pathology.
	<b>Spleen</b>
<b>INTERPRETED BY</b>	The <b>spleen</b> in this patient was uniform, yet volume contracted. Hydration status should be assessed.
Eric Lindquist, DMV DABVP, Cert. IVUSS	<b>Liver</b>
<b>IMAGING PERFORMED BY</b>	The <b>liver</b> images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder was partially duplicated, not pathological. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.
Sarah Green	<b>Gastrointestinal</b>
<b>HOSPITAL NAME</b>	The <b>gastrointestinal tract</b> revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malassimilation of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content as unremarkable. This is a mild change.
Healing Spirit AW	<b>Pancreas</b>
<b>REFERRING VET</b>	The base and limbs of the <b>pancreas</b> 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
Sarah Green	
<b>INVOICE</b>	
18973	
<b>DATE</b>	
12/4/22	



**PATIENT**

Prudence Martocchia

changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

**SPECIES**

Feline

**Free Abdomen**

The mesenteric **lymph node** measured up to 1.0 cm.

**BREED**

DSH

**ULTRASONOGRAPHIC FINDINGS**

- Minor variable intestinal thickening
- Minor mesenteric lymphadenopathy
- Volume contracted spleen
- Geriatric abdomen otherwise

**SEX**

Spayed Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

13 Years 1 Month

No overt neoplastic criteria were present. This is likely chronic triad disease, however, cannot rule out an emerging round cell neoplasia in portions of the small intestine. Full thickness intestinal biopsies would be ideal. 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.

**WEIGHT**

7.6 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Sarah Green

**HOSPITAL NAME**

Healing Spirit AW

**REFERRING VET**

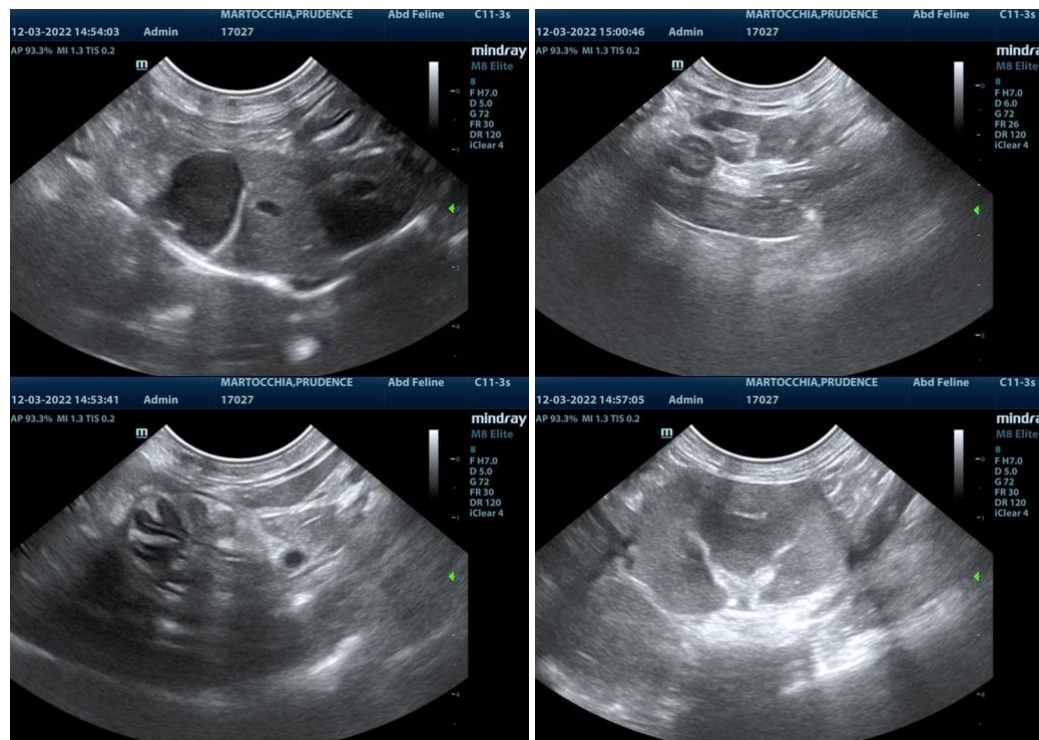
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**PATIENT**

Prudence Martocchia

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

13 Years 1 Month

**WEIGHT**

7.6 Pounds

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**IMAGING  
PERFORMED BY**

Sarah Green

**HOSPITAL NAME**

Healing Spirit AW

**REFERRING VET**

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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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