



DATE PRESENTING CLINICAL SIGNS

12/04/25

Patient History: Always has been a chronic vomiter - but more so recently. Would be once every month/every couple months. Last 2-3 weeks has been every other day. Mainly a liquid with a couple digested/semi-digested pieces of food. Has always had softer stool but last couple weeks has been diarrhea with increased frequency. No blood that they've seen. Appetite is ok, just seems to have gotten pickier. Drinking normal, urinating normal. No c/s. Activity is normal. Is on Fortiflora - has always been but doesn't seem to be helping right now. On exam has lost 3 lbs. Rest of exam unremarkable.

PATIENT

Saejima Winpiger

SPECIES

Feline

Current Medications: Panacur at 50mg/kg sid x 3 days started 12/2/25
Labwork Results: Labwork attached, reported as: Total Protein 10.0 (6.3 - 8.8 g/dL) prev 9.2, Globulin 7.3 (3.0 - 5.9 g/dL) prev 6.2, ALT 21 (27 - 158 U/L), Albumin 2.7 (2.6 - 3.9 g/dL). Fecal showed a free-living nematode (sample collected from litterbox)

BREED

DSH

Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

SEX

Neutered Male

Imaging Performed by: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

04/21/2014

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.

WEIGHT

10.3 pounds

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 4.57 cm in length. The right kidney measured 4.82 cm in length.

INTERPRETED BY

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Adrenal Glands

The **left adrenal gland** was 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. The left adrenal gland measured 0.48 cm width.

HOSPITAL NAME

Fullerton Animal
Hospital

The **right adrenal gland** was not visualized.

REFERRING VET

Dr. Unger

Spleen

The **spleen** presented slightly enlarged and folded upon itself. The spleen measured 1.25 cm in width.

INVOICE

12578

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

Mild excessive **GI** gas was noted. Slight colonic thickening was noted without loss of mural detail.

Pancreas

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.

Free Abdomen

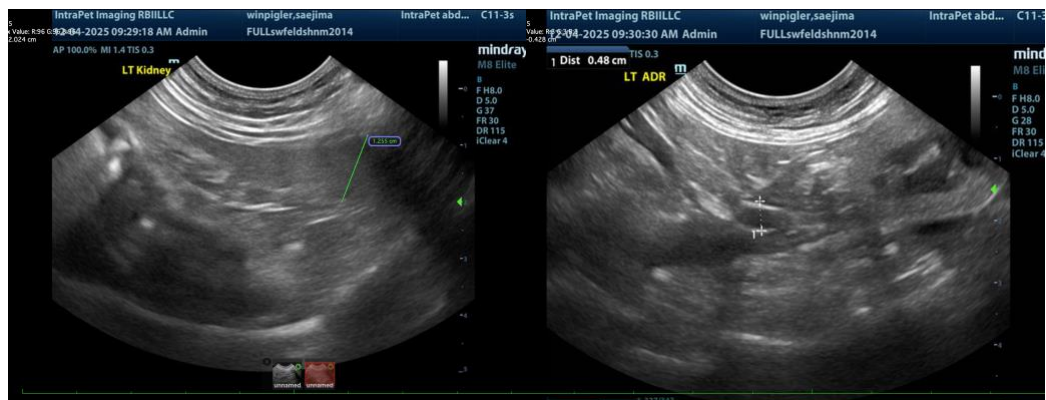
The mesenteric **lymph nodes** presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia. The lymph nodes measured up to 2.0 cm x 0.70 cm.

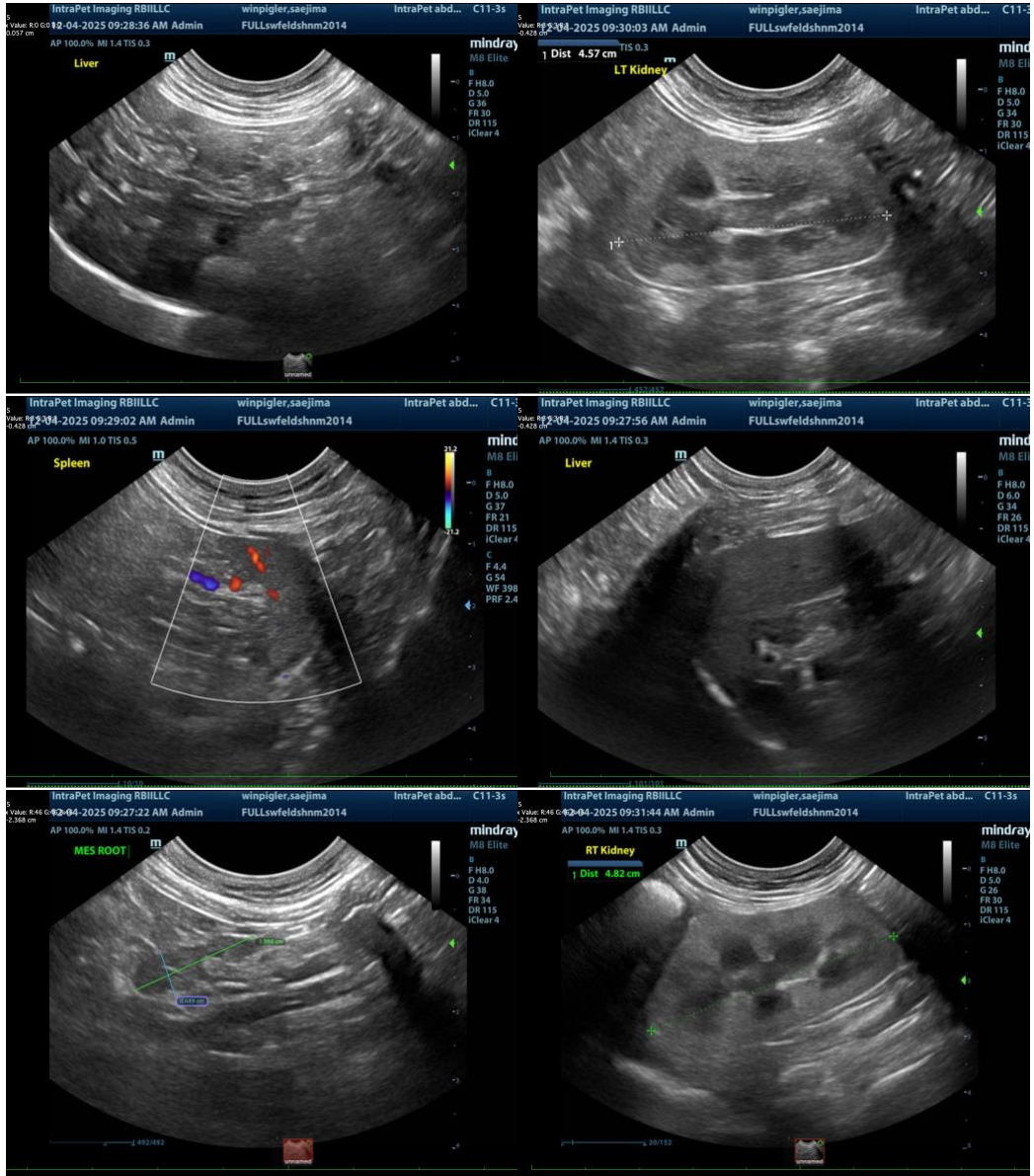
ULTRASONOGRAPHIC FINDINGS

- Slight mesenteric lymphadenopathy.
- Prominent spleen.
- Mild excessive GI gas.
- Age-related pancreatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the elevated globulins, ultrasound guided FNA of the spleen is indicated to assess for potential occult multiple myeloma. Structurally unremarkable abdomen otherwise. Food intolerance, occult parasitism, structurally insignificant inflammatory bowel are all possible causes of the vomiting. Infectious disease assessment such as Bartonella and toxoplasmosis would be indicated as well.







The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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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