



PATIENT

Chive Wilkinson

SPECIES

Feline

BREED

Domestic Shorthair

PRESENTING CLINICAL SIGNS

History: Presented at our hospital for not eating or drinking and vomiting. Patient has not been eating or drinking since around Saturday night. Patient did vomit food Friday but since then has just been vomiting bile. Patient has been sneezing on and off and last night had a clear discharge from the nose. Owner said today the 3rd eye lid was showing. Previous Health Concerns: UTI; arthritis; liver disease event 3 years ago(values returned to normal) ; abscess foot 1 month ago Current Medications: prednisolone (1/2) 5 mg EOD; has not had since Friday(pulls hair out occasionally); pain meds (arthritis) Abnormal PE/Chem/CBC/UA Results: Rad- mild hepatomegaly; no obvious fb/ gas obstructive pattern, etc. BW- CBC- WBC 25.56(H) Neurt23.45(H) lymphopenia(3.6%) EPOC- K+ 3.2(L) glucose 207(H) Chem- Cr (0.70) (L) TP 8.4(H) Glob 5.2(H) (albumin/globulin (0.60)) glucose 229(H) ALT >1000(H) Bili 1.9(H) ALT dilution : 882

SEX

Neutered male

AGE

11 years

WEIGHT

5.7 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Lupole

INVOICE

94348

DATE

12/7/21

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** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Mild, non-obstructive pinpoint mineralization was noted. Slight pyelectasia was noted in the left kidney. The left kidney measured 4.87 cm and the right kidney measured 4.38 cm. Blood flow was mildly subnormal on color flow assessment of the kidneys. A cortical infarct was noted in the caudal pole of the right kidney.

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. The right adrenal gland measured 0.4 cm.

Spleen

The **spleen** revealed multi-focal, hyperechoic lipogranulomatous type nodules. These were not overtly pathological.



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Liver

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The **liver** revealed coarse architecture with increased portal markings. The gallbladder in this patient was double layered and echogenic. The cystic duct was tortuous. The common bile duct was mildly thickened, yet normal in width measuring 0.3 cm. Mucous debris was noted.

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Gastrointestinal

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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.

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Neutered male

Pancreas

AGE

11 years

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.

WEIGHT

5.7 kg

ULTRASONOGRAPHIC FINDINGS

Cholangiohepatitis liver presentation with chronic interstitial nephrosis.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

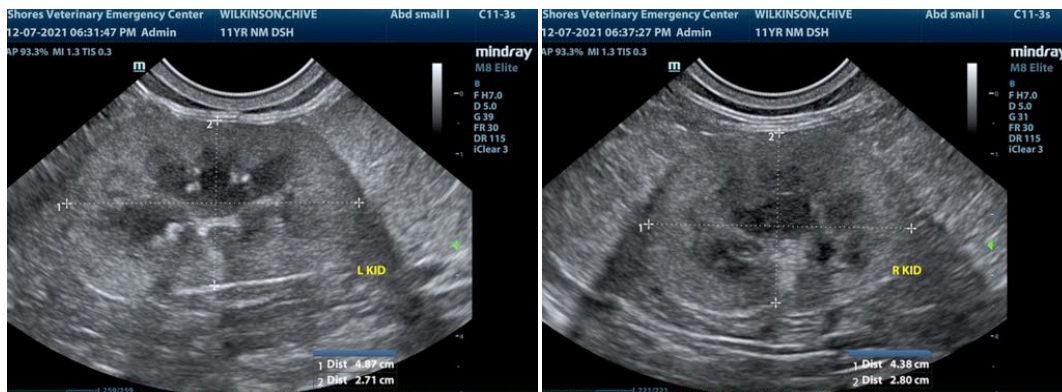
Ultrasound-guided FNA, cytology and culture is indicated. Toxoplasmosis titers and Bartonella titers are indicated. The Prednisolone may be suppressing a more significant presentation. Underlying lymphoma cannot be completely ruled out. Liver FNA and/or biopsy would be indicated.

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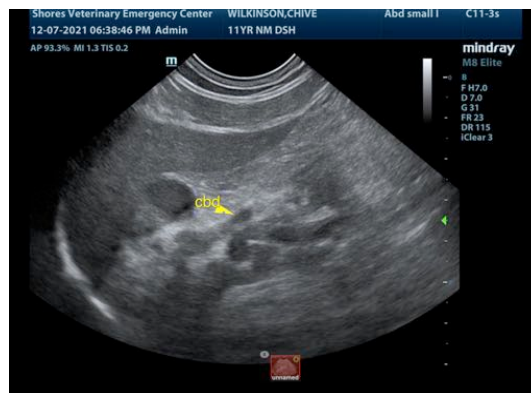
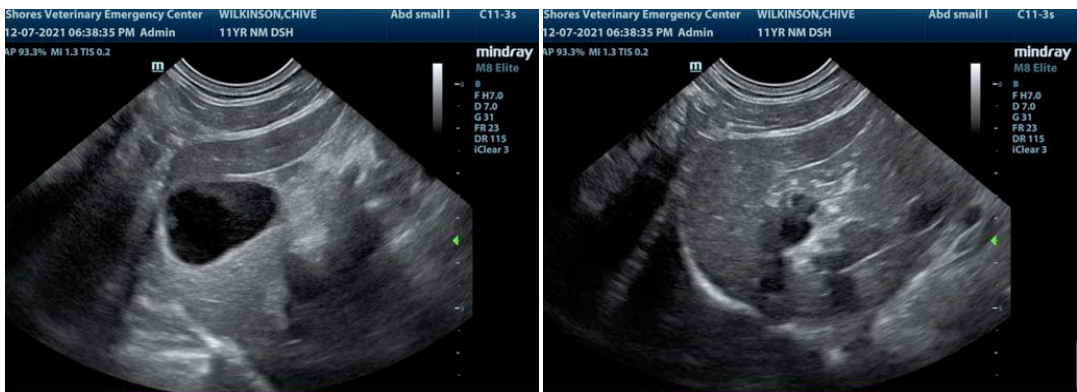
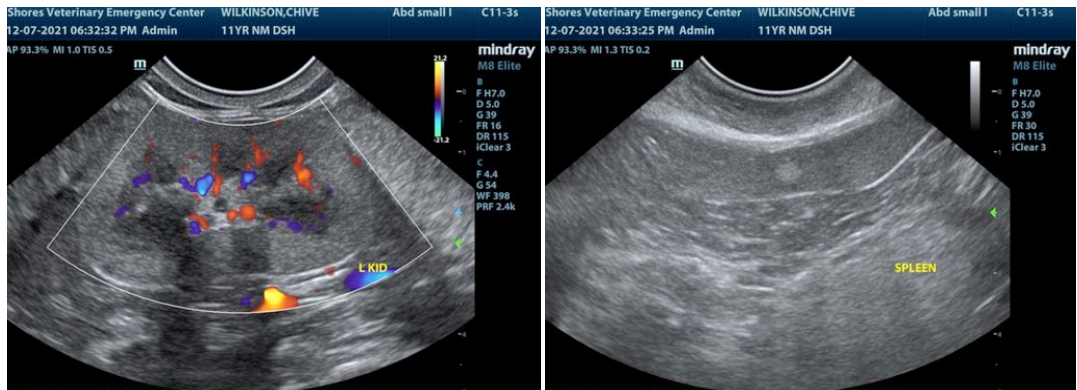
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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