



PATIENT

Sammy Dickson

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

10 years

WEIGHT

10.4 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Bucha

HOSPITAL NAME

Harveys Lake VC

REFERRING VET

Dr. Bucha

INVOICE

95751

DATE

2/1/22

PRESENTING CLINICAL SIGNS

Patient weighed: 11 lbs 6.5 oz -- 5/13/21. Weight today (2/1/22): 10 lbs 7 oz T: 101.0 P: 140 R: 40 - Slightly dehydrated upon exam -Moderate periodontal disease -Patient presented today for vomiting. Owner stated patient started vomiting yesterday morning (hairball first, then foamy water, then dry heaving). Owner also noted that when he was in the litter box trying to have a bowel movement he couldn't pass the stool that had started coming out - owner had to help and then he finished his bowel movement. Owner stated that he is eating some food but only if the owner coaxes him. **Patient was given Gabapentin 50mg tablets - 2 orally in-clinic at 10:49am - patient is very difficult. Torbugesic 0.1cc IM was given (11:55am) then lab work and imaging were performed. ** Treatment at this time: SQ Fluids (LRS 190cc) Cerenia inj 0.5cc SQ (5.0mg) Cerenia 60mg tablets (1/4 SID)
Abnormal PE/Chem/CBC/UA Results: -Diagnostics Performed: Chem Panel, CBC, FpL Snap, T4, SDMA Urinalysis collected via Cysto w/ bacteria confirmation All this lab work is attached to case to view -Imaging Performed: Abdominal Ultrasound and radiographs All attached to case

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 iliac trifurcation was unremarkable.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.5 cm. The right kidney measured 3.0 cm.

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 0.38 cm. The left adrenal gland measured 0.22 cm.

Spleen

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.



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Liver

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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.

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Gastrointestinal

Retention of ingesta or possible hairball accumulation was noted in the **stomach**. Minor shadowing material was noted in the pyloric outflow. A 1.0 cm hypoechoic region was noted in the stomach in the pyloric outflow. This is likely retention of ingesta; however, more significant lesion cannot be completely ruled out. 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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Pancreas

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The **pancreas** revealed mild, heterogenous parenchymal changes. There was no evidence of significant pathology. Curvilinear patterns are respected.

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ULTRASONOGRAPHIC FINDINGS

Age related abdominal changes.

IMAGING PERFORMED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of significant disease. Some retention of ingesta was noted in the stomach. If the patient was not n.p.o. then repeat of SDEP 13 approach at full n.p.o. status is warranted to assess the material in the stomach as to persistence or resolution. Some soft hair may be presenting in this fashion. Hairball therapy is warranted. 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.

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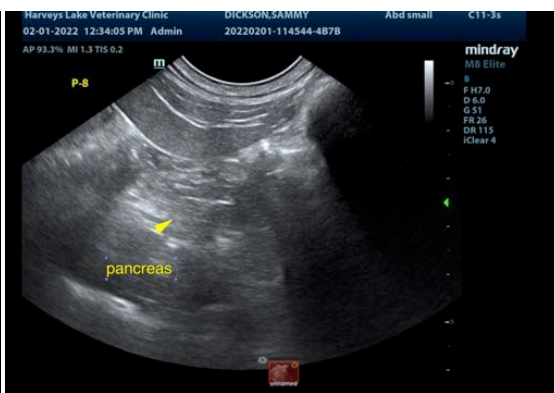
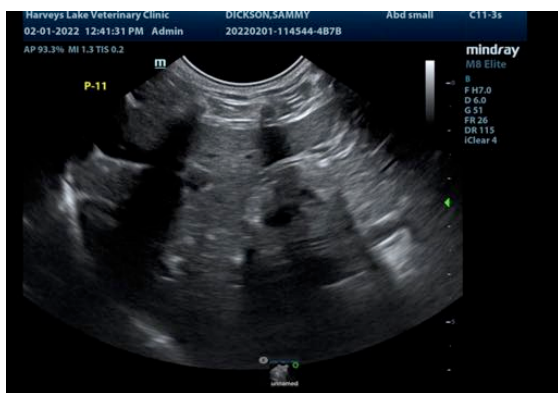
Dr. Bucha

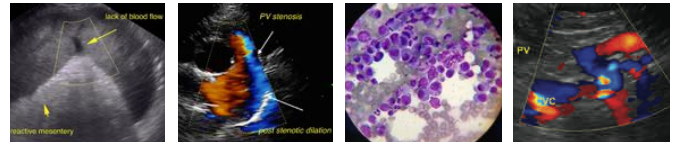
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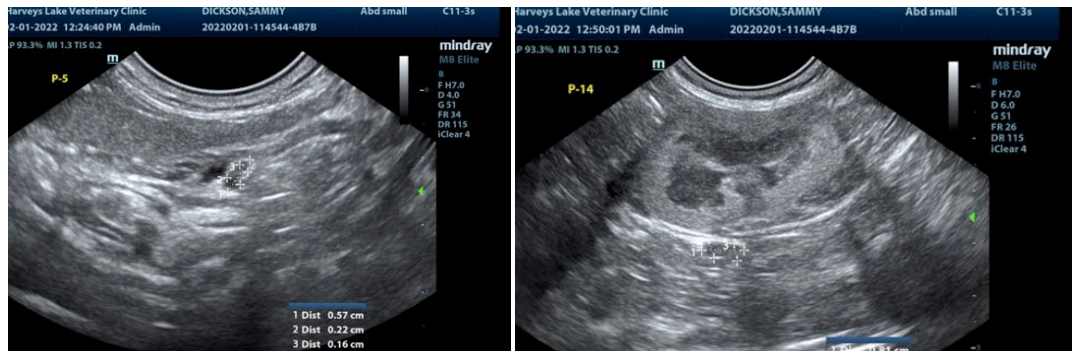
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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