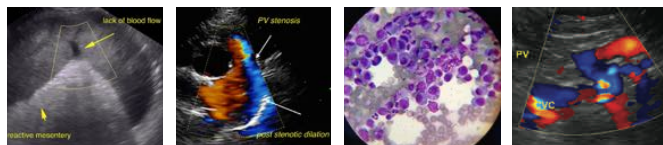




<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Otis Bergeron	Weight loss, mild renal disease.
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Feline	<b>Urinary System</b>
<b>BREED</b>	The <b>urinary bladder</b> , trigone, and pelvic urethra presented normal thicknesses and normal tone. 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 was noted. Ureteral papillae were normal.
Siamese	
<b>SEX</b>	
Neutered male	The right kidney measured 3.4 cm with an isoechoic 1.3 cm nodule that was deriving from the caudal pole. Multi-focal, corticomedullary and pelvic calculi were noted with chronic interstitial nephrosis pattern. The left kidney revealed similar changes and measured 3.64 cm with trace pyelectasia.
<b>AGE</b>	
16 years	<b>Adrenal Glands</b>
<b>WEIGHT</b>	Both <b>adrenal glands</b> 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.
7.4 lbs	
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>spleen</b> 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. The spleen measured 0.79 cm.
<b>IMAGING PERFORMED BY</b>	
Shari Reffi, CVT	
<b>HOSPITAL NAME</b>	<b>Liver</b>
Rockaway AH	The <b>liver</b> images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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 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.
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	<b>Gastrointestinal</b>
96008	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
<b>DATE</b>	
2/11/22	



**PATIENT** malassimilation of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content as unremarkable.

Otis Bergeron

**Pancreas**

**SPECIES** 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. 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.

Feline

**BREED**

Siamese

**ULTRASONOGRAPHIC FINDINGS**

**SEX** Chronic degenerative renal disease with interstitial nephrosis pattern. Regenerative nodules secondary to infarcts. There is a minimal potential for renal neoplasia. Subjectively the kidneys appear near end stage.

Neutered male

Mild GI thickening.

**AGE**

16 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT** FNA of the right renal nodule could be considered to ensure that this is not a neoplastic event; however, this is likely secondary to regional infarcts.

7.4 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

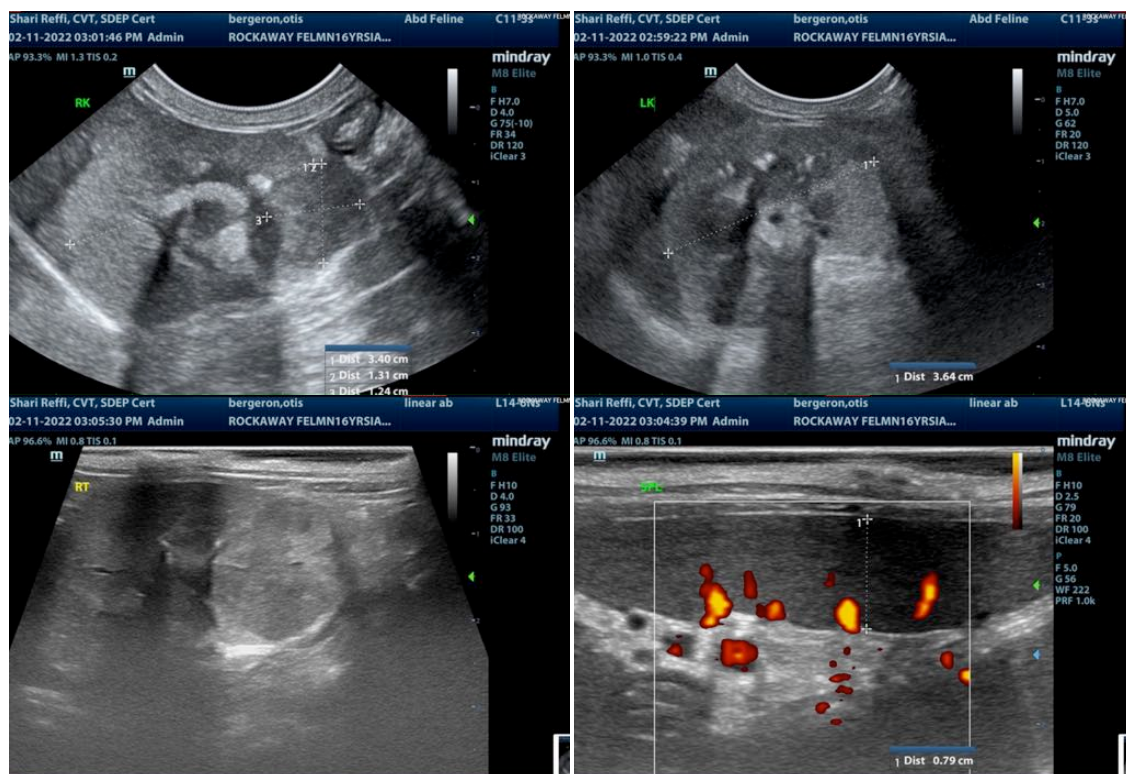
Dr. Maniar

**INVOICE**

96008

**DATE**

2/11/22





**PATIENT**

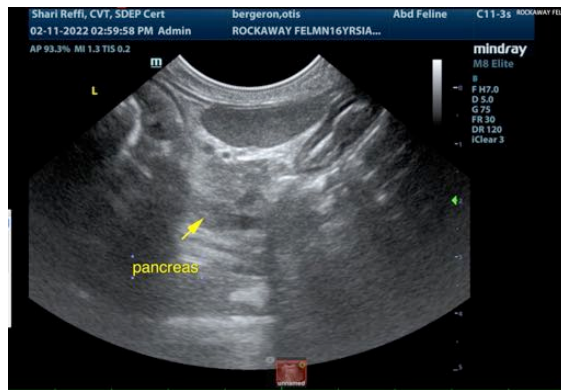
Otis Bergeron

**SPECIES**

Feline

**BREED**

Siamese



**SEX**

Neutered male

**AGE**

16 years

**WEIGHT**

7.4 lbs



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

96008

**DATE**

2/11/22

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