



PATIENT

Splinter Soda

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

10 years

WEIGHT

13 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Salas

HOSPITAL NAME

Tenafly VC

REFERRING VET

Dr. Salas

INVOICE

42856

DATE

2/16/23

PRESENTING CLINICAL SIGNS

History: labs taken on 1/11/2023 perfectly normal. has a history of 2 discrete soft tissue pulmonary nodules that we have been monitoring x 6 months. Pet received Depomedrol on 1/14 for possible asthma episode (has had previous similar treatments). Presented with acute vomiting, inappetence, painful and labs showed hemoconcentration, normal wbc ct, elev ALT 508, AST 289, ALP 134, total bili 1.6 (unconjugated 0.3, conjugated 1.3)- normal t4 and normal UA, Pli normal at 1.6. Received supportive care and has done very well since- no further pain, no vomiting, normal bm, acting normally, etc....Here today for an abdominal ultrasound and repeat labs were done. Does not have a history of vomiting, weight loss, nor diarrhea- occasional mucosy/hematochezia with hair in the feces reported. on purina OM diet and fortiflora at this time.

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** 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.93 cm. The left kidney measured 3.45 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.

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. the spleen measured 0.76 cm.

Liver

The **liver** was structurally unremarkable. The hepatic parenchyma was uniform and isoechoic to the falciform fat. There was no evidence of pathology. The gallbladder presented acceptably thin walls with primarily anechoic content. The common bile duct measured 0.1 cm with no evidence of post hepatic obstruction.



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Gastrointestinal

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.

Pancreas

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.

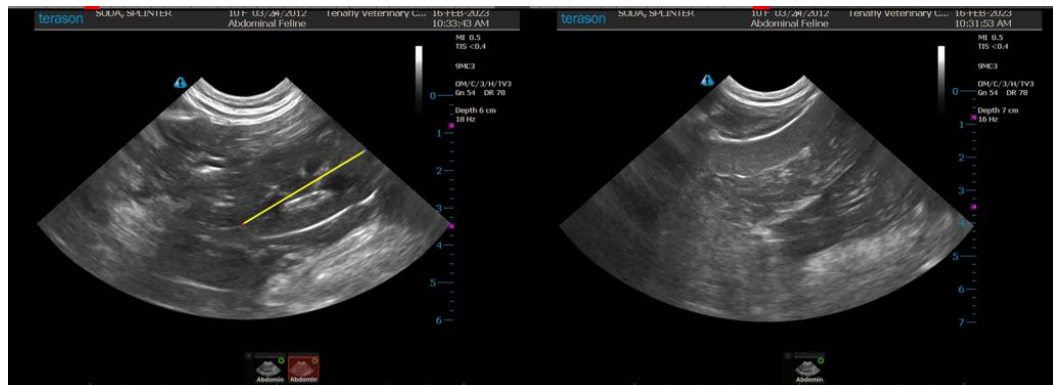
ULTRASONOGRAPHIC FINDINGS

Structurally unremarkable liver and abdomen.

Acute inflammatory hepatopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Toxin or infectious exposure is suspected. There is a minor potential for underlying neoplasia without structural changes. FNA Of the liver is indicated. Screening and coverage for infectious agents is indicated.





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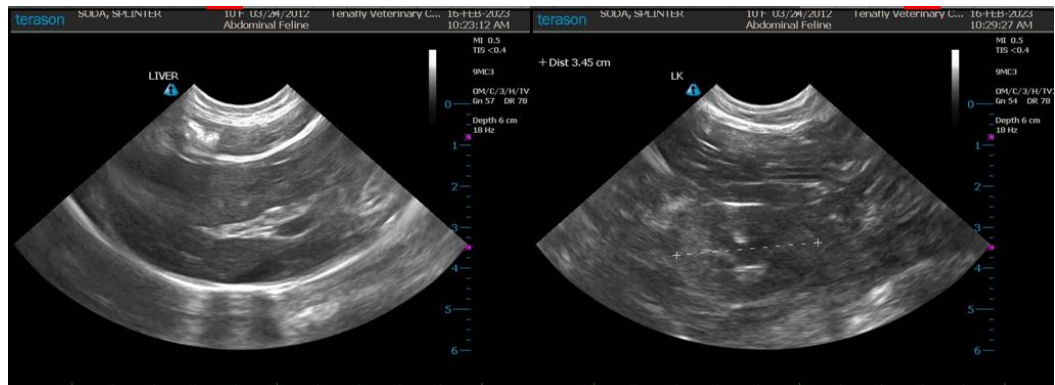
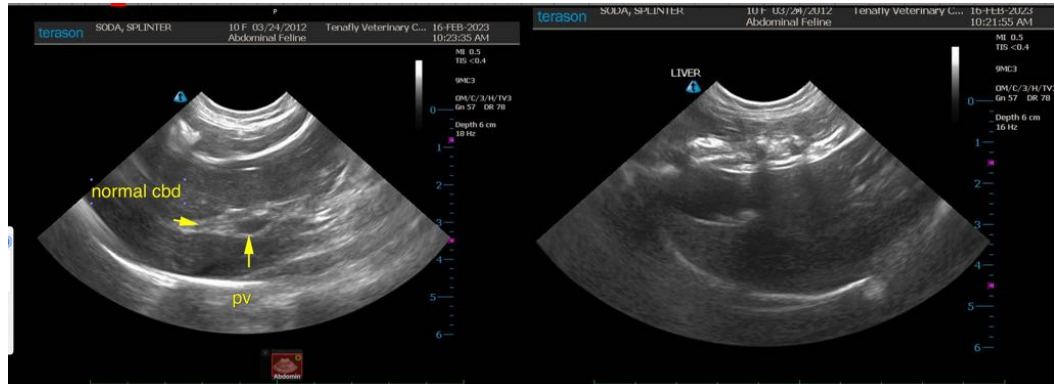
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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