



PATIENT

Fuji Park
Dr. Pet

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

11.1 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Englewood Cliffs VH

REFERRING VET

Dr. Rachel Park

INVOICE

35767

DATE

2/18/22

PRESENTING CLINICAL SIGNS

Weight loss, periuria. Tried Prozac for periuria - caused lethargy, decreased appetite; stopped prozac - continues to lose weight. Non-competitive eating environment. Current meds: methimazole transdermal 2.5mgs BID - controlled.

Abnormal PE/Chem/CBC/UA Results: USG: 1.025.

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 were noted. Ureteral papillae were normal.

The **kidneys** presented moderate degenerative changes similar to prior sonogram. Increased cortical echogenicity noted. The right kidney measured 3.3 cm. The left kidney measured 3.13 cm. Blood flow to the kidneys appeared to be subnormal on power doppler assessment. The renal presentation is most consistent with interstitial nephrosis.

Adrenal Glands

The **right adrenal gland** presented age related changes with slight mineralization, similar to prior sonogram, measuring 0.44 cm. The **left adrenal gland** was similar to the prior sonogram, measuring 0.24 cm.

Spleen

The **spleen** was mildly enlarged (0.92 cm) with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner.

Liver

The **liver** was slightly enlarged, uniform, no evident pathology. Duplicated gallbladder noted, similar to the prior sonogram.

Gastrointestinal

Variable **gastrointestinal** thickening noted with slight areas of muscularis hypertrophy. Mesenteric lymph nodes were mildly enlarged, similar to prior sonogram, measuring up to 6.0 mm.

Pancreas

The **pancreas** presented coarse architecture, slight duct dilation, and mild irregular contour, measuring 0.66 cm on the left.

ULTRASONOGRAPHIC FINDINGS

- Geriatric abdomen with minor intestinal thickening and prominent pancreas - Suspect inflammatory bowel, possible low-grade pancreatitis/lymphadenitis.



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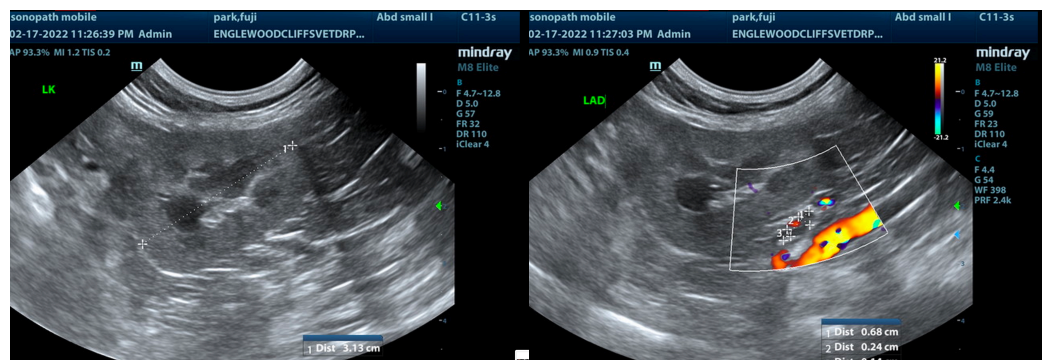
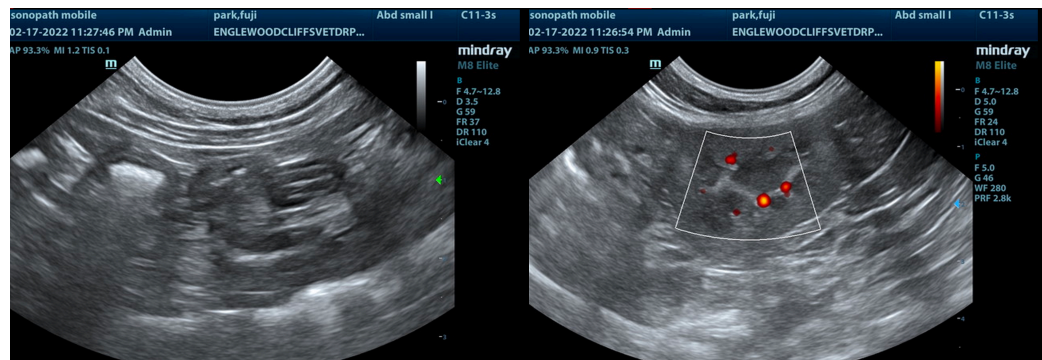
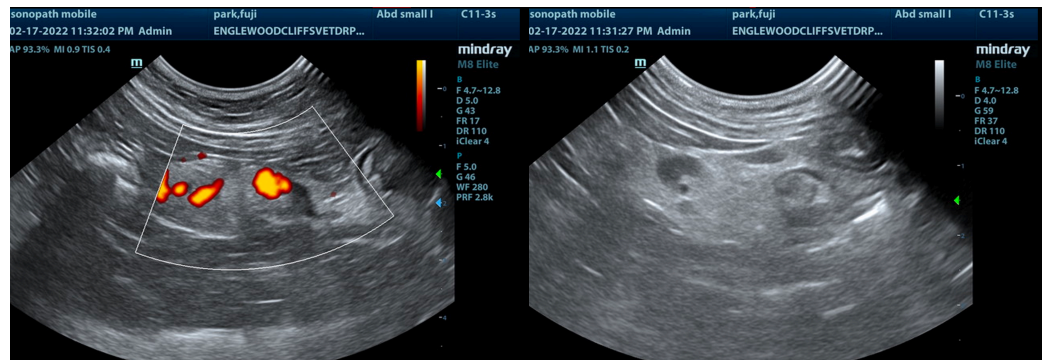
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence of neoplasia noted. Mid abdominal palpation recommended to assess for discomfort in the area of the mesenteric root. Broad-spectrum antibiotics, IV fluid support and assessment for chronic infectious disease should be considered, given the patient's history, such as bartonella and toxoplasmosis to assess if any potential role is being played by underlying chronic infectious agents.



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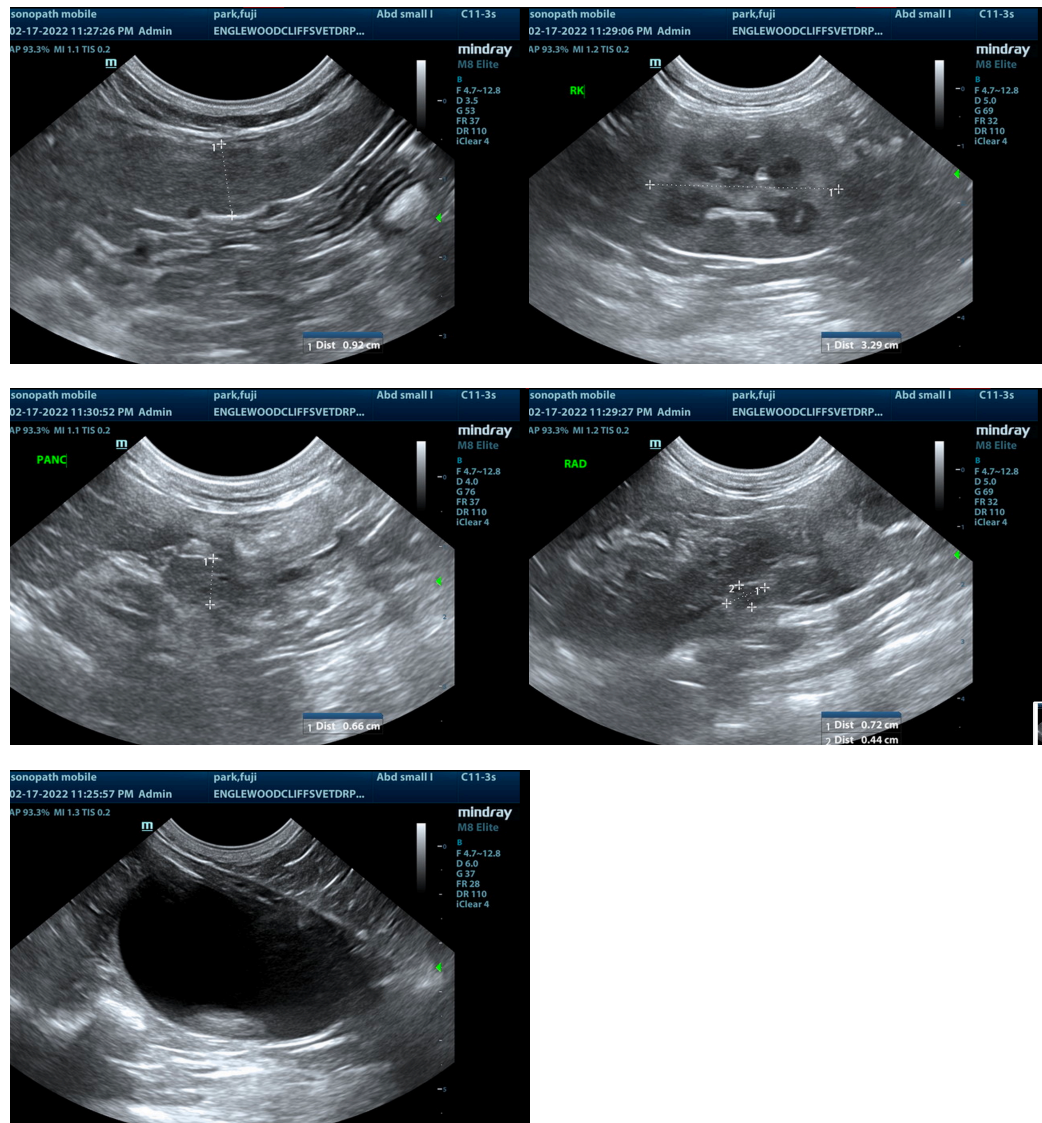
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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