



PATIENT

Amanda Brick City

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

6

WEIGHT

10

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

INVOICE

44712

DATE

2/2/23

PRESENTING CLINICAL SIGNS

V/D since spay on 1/14 (spay was a spay abort)

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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

The **kidneys** were mildly enlarged with minor cortical thickening, likely a normal variant. No evidence of significant structural disease. The right kidney measured 5.26 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

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 were noted.

Liver

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.

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 **pancreas** presented undulating contour and hypoechoic parenchyma with dilated duct.

Other

An undifferentiated uterine base mass was noted in this patient measuring approximately 2.0 cm x 3.0 cm with localized free fluid and residual left uterine horn. Right horn also appeared to be present. Reactive mesentery noted.

ULTRASONOGRAPHIC FINDINGS

- Thickened, irregular residual uterus with regional inflammation – underlying stump pyometra possible.



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- Minor thickened renal pelvises
- Chronic pancreatic changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obvious ovarian remnants present yet could not be ruled out. Recommend exploratory ovariohysterectomy with inspection of the ovarian fossae. I cannot completely rule out small ovarian remnants, especially given the presumed uterine pathology. Prognosis is guarded depending upon histopathology of the residual uterus.

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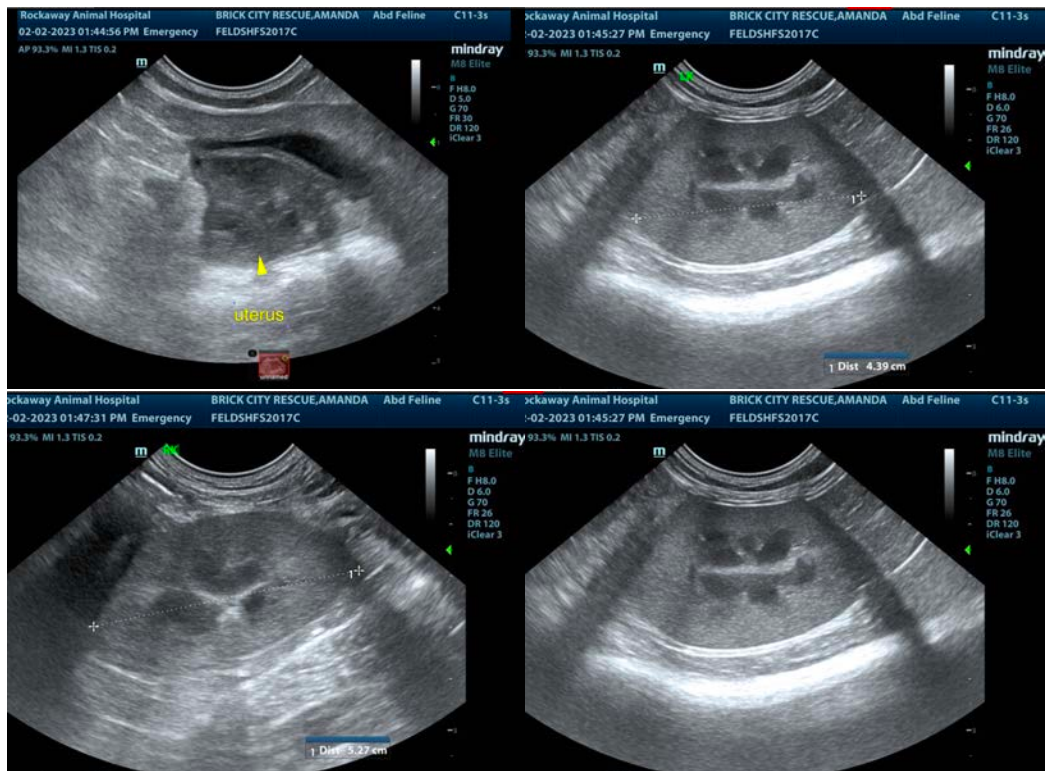
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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