



PATIENT

Percy Scheaffer

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

11 years

WEIGHT

4.7 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Hayley Flinchbaugh,
CVT

HOSPITAL NAME

Mason Dixon Animal
Emergency Hospital

REFERRING VET

Dr. Cordon

INVOICE

95783

DATE

2/2/22

PRESENTING CLINICAL SIGNS

Lethargy and anorexia, muscle wasting, O noticed pale MM, jaundice noted
Abnormal PE/Chem/CBC/UA Results: Urinalysis: protein +100, Leukocytes +500 CBC: WBC 5.03, Lymph 0.39, Mono 0.01, HB 7.6, MCV 36.9, MPV 4.9 Chem: TP 5.8, ALP 616, T4 WNL

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 normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.4 cm with slight pelvic mineralization measuring 0.2 cm. The right kidney measured 3.7 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 0.4 cm.

Spleen

The **spleen** appeared to be volume contracted, yet blended in with surrounding tissue.

Liver

The **liver** is mildly hyperechoic with heterogenous parenchymal changes. The gallbladder was unremarkable with no evidence of post hepatic obstruction. Possible lipidosis versus underlying neoplasia.

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. Minor intestinal thickening was noted without loss of mural detail. The lumen was empty.



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Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

BREED

Pelvic renal calculus.

Domestic Shorthair

Variable intestinal thickening.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Neutered male

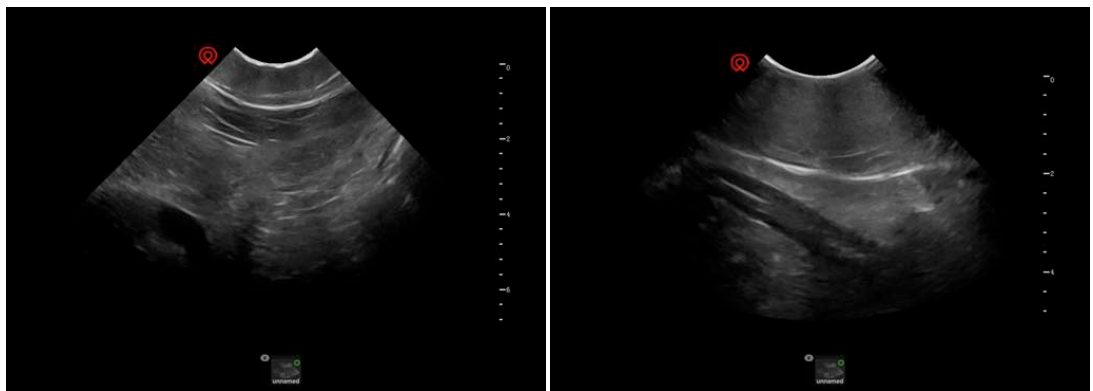
The images were excessively dark with poor contrast. Subtle changes are not able to be evaluated. Coagulation panel and FNA of the liver is warranted given the patient's history. Inflammatory bowel, cholangiohepatitis versus emerging round cell neoplasia. I recommend liver sampling given the patient's history.

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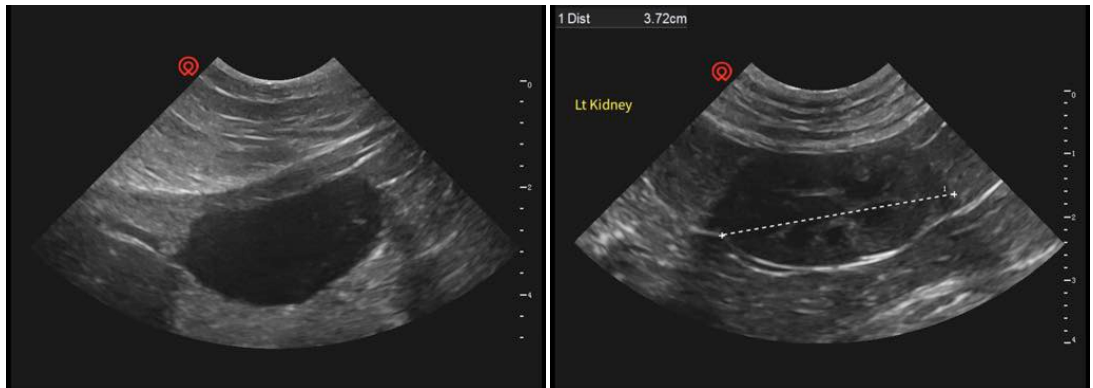
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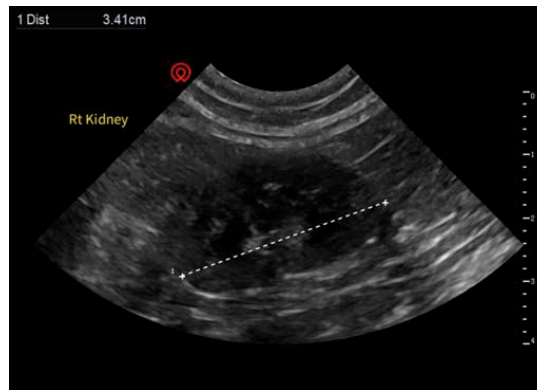
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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