



PATIENT	PRESENTING CLINICAL SIGNS
General Meow Baker	vomiting up hard kibble. weight loss. normal activity level and appetite. may have coincided with stress-owner has been hospitalized r/o hyperT, renal, DM, IBD, lymphoma, other.
SPECIES	Abnormal PE/Chem/CBC/UA Results: BW and radiographs WNL
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	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.
SEX	
Spayed Female	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. Slight mineralization noted. The left kidney measured 3.4 cm. The right kidney measured 3.4 cm. Slight pericapsular inflammatory pattern noted around the right kidney. Slight pyelectasia noted.
AGE	
9 Years	
WEIGHT	
9 Pounds	Adrenal Glands
INTERPRETED BY	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 left adrenal gland measured 0.34 cm.
Eric Lindquist, DMV DABVP, Cert. IVUSS	Spleen
IMAGING PERFORMED BY	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.
Sara Hansen	
HOSPITAL NAME	Liver
The Ark Vet Clinic	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.
REFERRING VET	
Dr. Mercer	
INVOICE	Gastrointestinal
35481	The gastrointestinal presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropey" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. Some retention of ingesta or hair accumulation noted in the stomach, likely medically manageable. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic
DATE	
2/4/22	



PATIENT

General Meow Baker

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9 Years

WEIGHT

9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

The Ark Vet Clinic

REFERRING VET

Dr. Mercer

INVOICE

35481

DATE

2/4/22

disease. Intestinal wall thickness measured up to 0.22 cm. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility. Reactive mesentery noted associated with the small intestine, suggestive for inflammation.

Pancreas

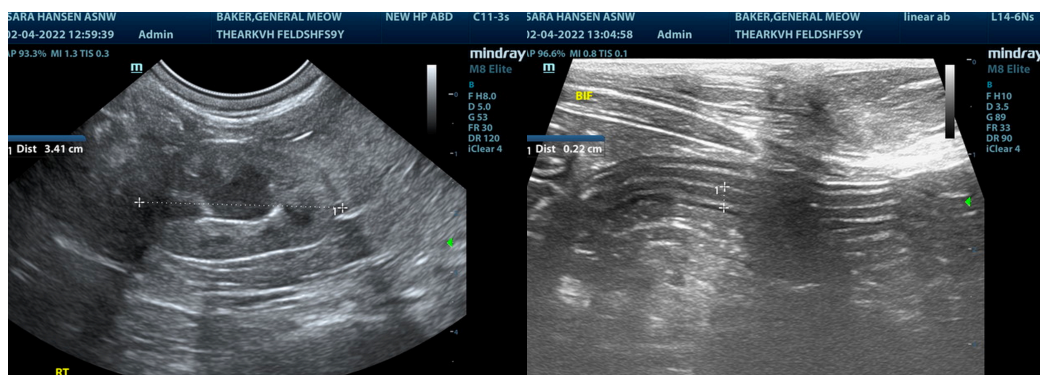
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

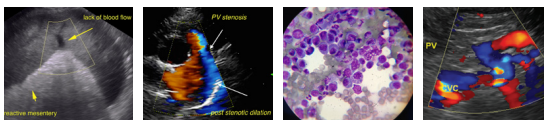
ULTRASONOGRAPHIC FINDINGS

- Hairball density in the stomach and variable intestinal thickening
- Possible low-grade nephritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinary workup warranted. Hairball therapy warranted and supportive care. No overt evidence of lymphoma. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.





PATIENT

General Meow Baker

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9 Years

WEIGHT

9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

The Ark Vet Clinic

REFERRING VET

Dr. Mercer

INVOICE

35481

DATE

2/4/22



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