



PATIENT

Bergitt Graham

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

PRESENTING CLINICAL SIGNS

History: The night o woke up to cat screaming and vomiting violently (was in bedroom with owner). No obvious cause. Vomited very badly all night about 20 times. Has hx of vomiting 2 mos ago as well which resolved with supportive care (cerenia). bloodwork normal- this time also normal besides mild elevation in alt. Initial x-rays reviewed by radiologist showed constipation (resolved with enema- sm amt frank blood on stool- iatrogenic?), aerophagia, pneumomediastinum and sq emphysema. No known hx of trauma- but other cat is mean to him. Goes outside only very briefly and only to toilet, doesn't linger outside. Pretty lazy cat besides, no hx of playing w foreign objects/toys. Repeat x-rays showed resolution of pneumomediastinum and improved sq emphysema, no abnormality of cervical structures noted. SI distended with gas. Cat seems to have significant difficulty swallowing, painful, gagging. Could not give sulcrate orally. Is on Cerenia (no more vomiting, but gagging persisting), buprenorphine, famotidine, gabapentin, IV fluids. Has mild persistent nasal discharge from left nostril (noted last time).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

9

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 1.0 cm beyond the cystourethral junction.

WEIGHT

5

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 3.5 cm. The right kidney measured 3.6 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

The regions of the adrenal glands were imaged and revealed no evident pathology.

IMAGING PERFORMED BY

Dr. Laura Field

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is a minor change, 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. The spleen measured 1.1 cm.

HOSPITAL NAME

Westview VH

REFERRING VET

Dr. Laura Field

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.

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Gastrointestinal



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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.

SPECIES

Feline

Pancreas

The **pancreas** was hypoechoic and mildly irregular in the left limb. The left limb was mildly enlarged, measuring up to 1.2 cm.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Slight heterogenous left pancreatic limb- Suspect pancreatitis
- Slight splenic enlargement
- Unremarkable abdomen otherwise

AGE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Left subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas. However, the changes in the pancreas were minor. If weight loss is an issue, splenic FNA is indicated. Structurally, the GI tract was unremarkable with no evidence of foreign bodies or neoplasia. Supportive care should prove effective.

WEIGHT

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IMAGING PERFORMED BY

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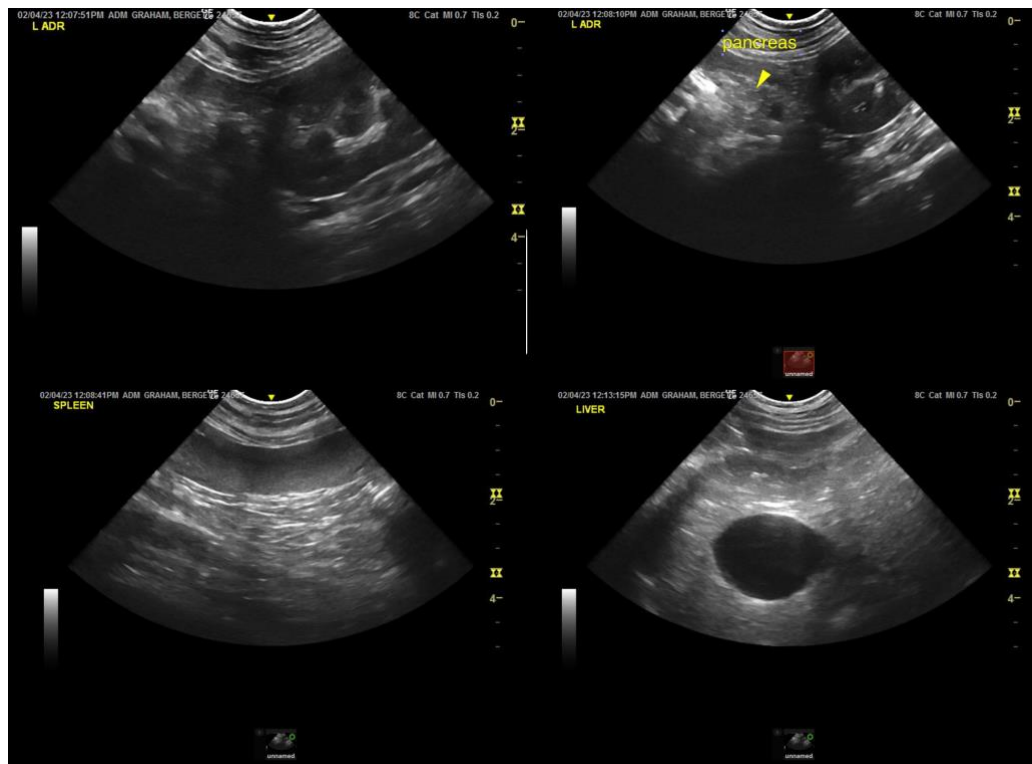
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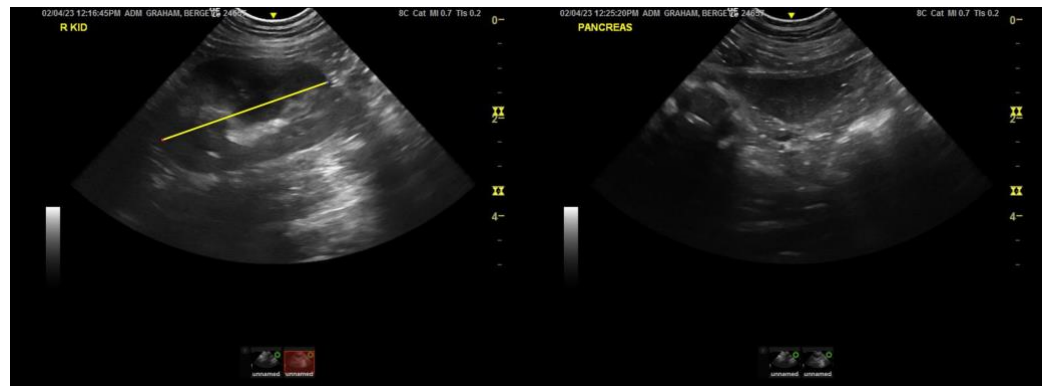
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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