



PATIENT PRESENTING CLINICAL SIGNS

Bella Reuter

P has history of vomiting (Sept 2020), chronic enteropathy, weight loss and vitamin D deficiency. Last ultrasound showed suspected pancreatitis with pancreatic nodules. P has been on chronic prednisolone and addition of Cerenia and Mirataz as needed for nausea and appetite stimulant. Within the last 2-3 weeks P has been projectile vomiting large amount of dark yellow liquid every 3 days- concern for changes in biliary/gall bladder health. After vomiting large amount of liquid P's appetite seems to improve for a couple days. Prednisolone doesn't seem to be helping P's appetite/weight gain/vomiting any more, discontinued Prednisolone and switched to Depomedrol injection which she had previously done well with. Cerenia seemed to decrease vomiting, but then also decrease appetite, so this has been discontinued for now. Elura was not consistently beneficial for P's appetite. P is intolerant of Probiotics (provable), P is eating some RC Recovery and Pure Vida wet food- historically picky eater. Change in vomiting characteristic and frequency: R/O gall bladder stone, pancreatitis flare, IBD flare, other neoplasia

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

Abnormal PE/Chem/CBC/UA Results: Sept 2021 labwork showed CBC - Wnl except thrombocytopenia however estimate adequate and platelet clumps present on slide - consistent with artifact from sample collection - MLA neutrophilia 9246 (2500-8500) eosinophilia 1072 (0-1000)- not clinically significant; Chemistry profile - Adult chemistry: wnl; Heartworm test - HW antibody: pending; Urinalysis - USG: 1.042 pH 6.5 urine chems: trace pro urine sedi: nsf MA:0.1 Renal Tech = inconclusive

AGE

14 years

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

WEIGHT

6.09 lbs

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.7 cm. The left kidney measured 3.41 cm.

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

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.

REFERRING VET

Dr. Arpaia

INVOICE

95851

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 was noted. The spleen measured 0.63 cm in width.

DATE

2/7/22



PATIENT

Bella Reuter

Liver

SPECIES

Feline

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 wall is slightly thickened and non-obstructed.

BREED

Domestic Shorthair

Gastrointestinal

The **stomach** was filled with hairball type density or post prandial presentation. The pylorus was patent. The intestines and colon were unremarkable.

SEX

Spayed Female

Pancreas

AGE

14 years

The **pancreas** was hypoechoic and mildly irregular. There was no evidence of significantly active inflammation.

WEIGHT

6.09 lbs

ULTRASONOGRAPHIC FINDINGS

Hairball density in the stomach.

Prominent, pancreas, yet no evidence of active inflammation.

Otherwise, geriatric abdomen.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of nodular changes noted on the prior sonogram and were likely hyperplastic nodules at that time. The abdomen appears stable other than the probable hairball accumulation. The prednisolone may be suppressing a more significant presentation sonographically. 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.

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

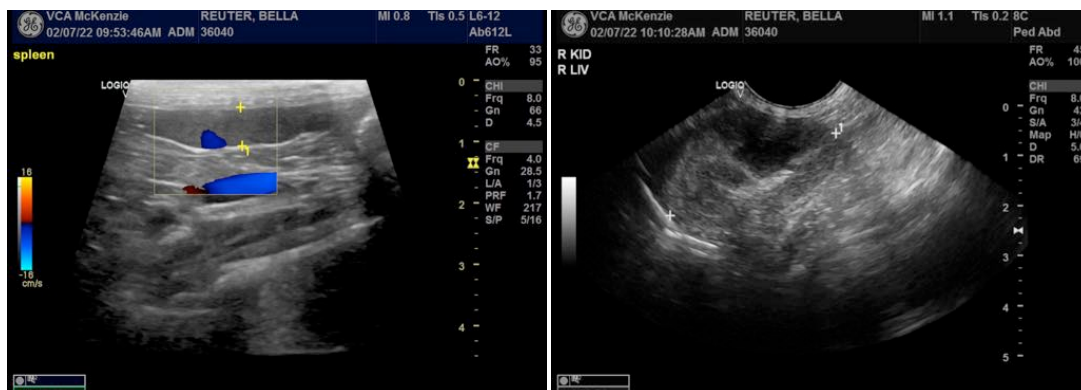
Dr. Arpaia

INVOICE

95851

DATE

2/7/22





PATIENT

Bella Reuter

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

14 years

WEIGHT

6.09 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

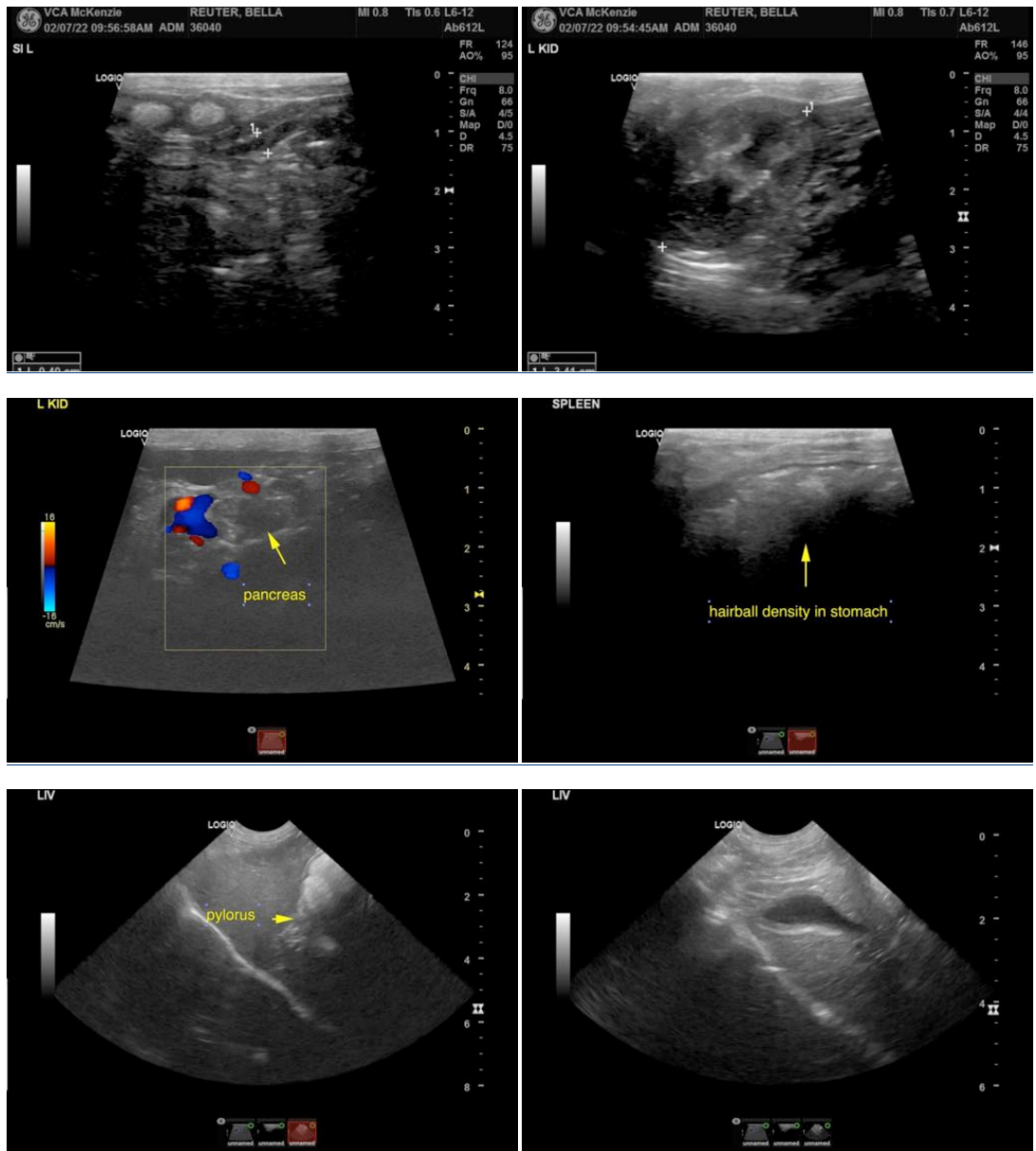
Dr. Arpaia

INVOICE

95851

DATE

2/7/22



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