



**PATIENT**

Blue Allison

**PRESENTING CLINICAL SIGNS**

History: anorexia 5 days duration

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: CBC, chemistry, T4, fPL - BUN=41 (16-37) mg/dL, Cr=1.8 (0.9-2.3) mg/dL, SDMA=15 (0-14) ug/dL, otherwise WNL

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

DSH

**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 2.0 cm beyond the cystourethral junction.

**SEX**

Neutered Male

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. This is a moderate change. The left kidney measured 4.1 cm. The right kidney measured 3.61 cm. Corticomedullary mineralization was noted in both kidneys.

**AGE**

19 Years 2 Months

**WEIGHT**

9.3 Pounds

**Adrenal Glands**

The **left adrenal gland** was swollen and hypoechoic. This is most consistent with stress-induced hyperplasia. The left adrenal gland was mildly enlarged, measuring 0.77 cm.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The region of the **right adrenal gland** was imaged and revealed no evident pathology.

**IMAGING PERFORMED BY**

Sarah Green

**Spleen**

The **spleen** revealed heterogenous mixed hyperechoic nodular changes and minor irregular contour. The spleen measured 9.0 mm in width.

**HOSPITAL NAME**

Healing Spirit Animal  
Wellness

**Liver**

A moderate amount of **hepatic** remodeling was noted. The gallbladder revealed polyps, dilation and thickened wall with pericapsular inflammation. Common duct calculi were noted. Common bile duct walls were thickened.

**REFERRING VET**

Sarah Green

**Gastrointestinal**

The **gastrointestinal tract** revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malassimilation of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content as unremarkable.

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**Pancreas**

**DATE**

3/17/23

The **pancreas** revealed heterogenous mixed hypoechoic parenchymal changes with enhanced mesentery, consistent with chronic active pancreatitis. Coarse architecture was noted in the pancreas.



**PATIENT**

The pancreas measured 1.5 cm. Pancreatic duct mineralization was noted. Thickened pancreatic walls were noted.

Blue Allison

**ULTRASONOGRAPHIC FINDINGS**

**SPECIES**

- Chronic active pancreatitis
- Moderate degenerative non-end-stage renal disease
- Chronic cholangitis with biliary and pancreatic duct calculi
- Moderate hepatic remodeling
- Heterogenous mixed hypoechoic parenchymal changes in the pancreas
- Splenic remodeling, minor potential for neoplasia
- Left adrenal gland enlargement/stress
- Age-related GI changes

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

19 Years 2 Months

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is likely both a prerenal and renal effect in this patient. Cannot rule out a biliary carcinoma in this patient. FNA of the general liver and pancreas is indicated. 72-hour IV fluid protocol, correcting the azotemia, coverage for biliary and pancreatic infectious agents and full urinary work up are warranted. If sodium to potassium ratios are erroneous, then aldosterone levels are indicated to assess for potential left adrenal based conns syndrome. There are multiple issues in this patient. Blood pressure measurements are indicated. Treatment for infection and pain management is indicated. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.

**WEIGHT**

9.3 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Sarah Green

**HOSPITAL NAME**

Healing Spirit Animal  
Wellness

**REFERRING VET**

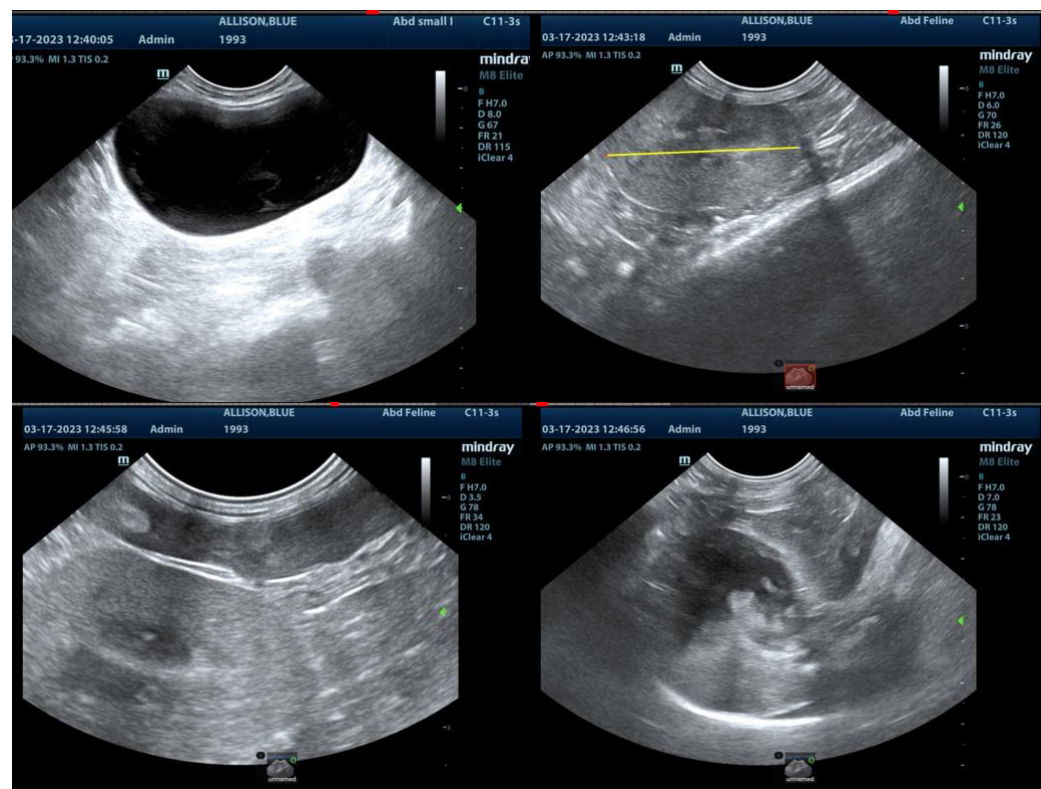
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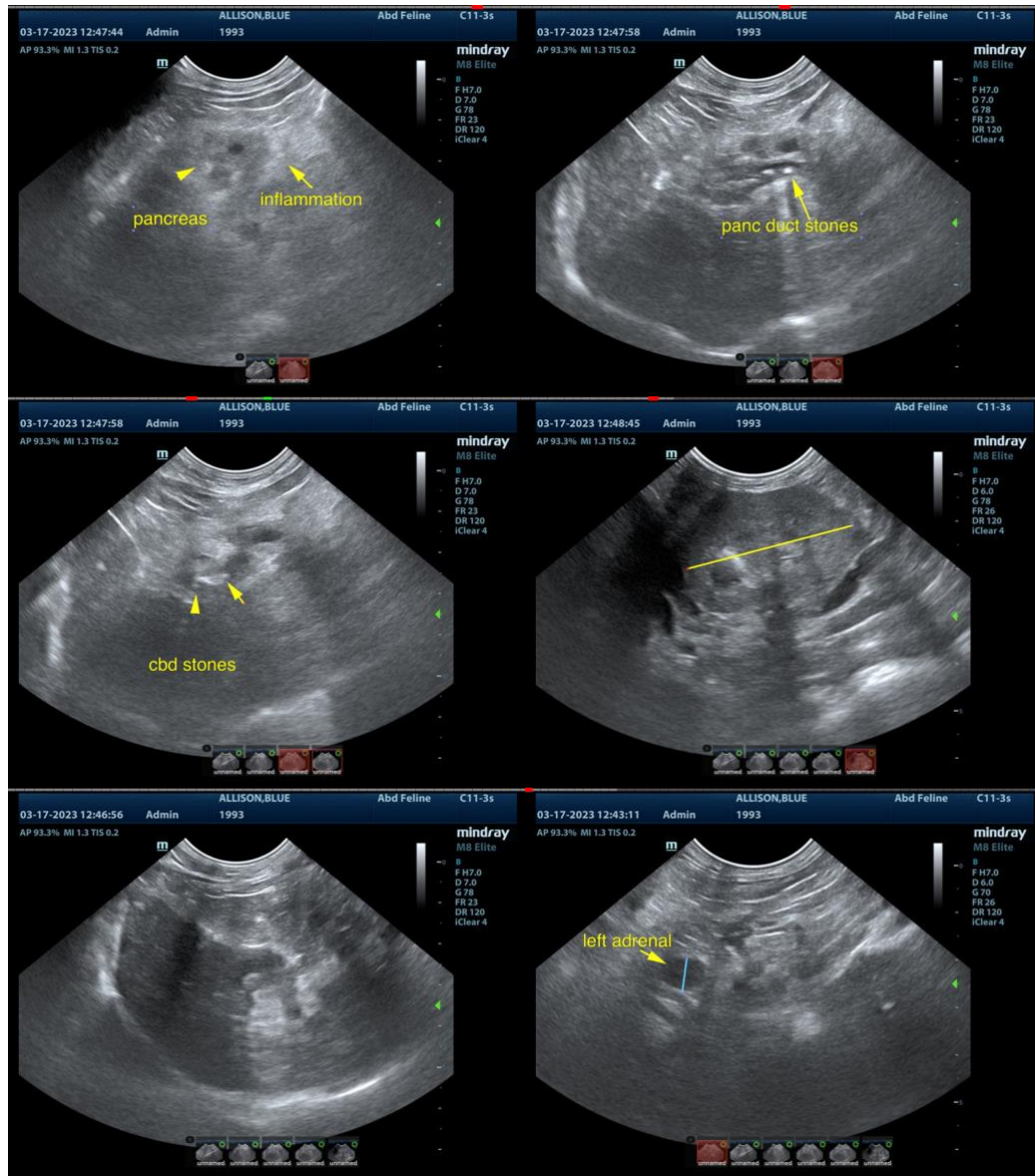
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com