



PATIENT

Leeroy Yeary

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years 5 Months

WEIGHT

12 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Katie Freson

HOSPITAL NAME

Kings VH

REFERRING VET

Dr. Katie Freson

INVOICE

21672

DATE

3/17/23

PRESENTING CLINICAL SIGNS

History: Employee pet. Weight loss. Uncontrolled hyperthyroidism. Severe heart disease. Concern for intestinal neoplasia. The initial "left kidney" that is labeled in the images is actually a tumor that got labeled incorrectly.

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 were noted. Ureteral papillae were normal.

The **left kidney** was significantly dystrophic with mineralization. The left kidney measured 2.4 cm. Thin cortices and loss of corticomedullary definition were noted.

The **right kidney** presented compensatory hypertrophy and generalized enlargement. The right kidney measured 4.9 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. The left adrenal gland measured 0.4 cm.

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 were noted.

Liver

The **liver** revealed increased portal markings. Biliary mineralization was noted. The gallbladder and common bile duct were unremarkable.

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. 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.

Pancreas

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.

ULTRASONOGRAPHIC FINDINGS



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- Dystrophic left kidney with mineralization and moderate to end stage degenerative changes
- Compensatory hypertrophy of the right kidney with thickened cortices and minor degenerative changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full urinary work up is warranted. No evidence of neoplasia, however, cannot rule out early neoplastic event in the liver. If liver enzyme elevations are present, then FNA is indicated. 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.

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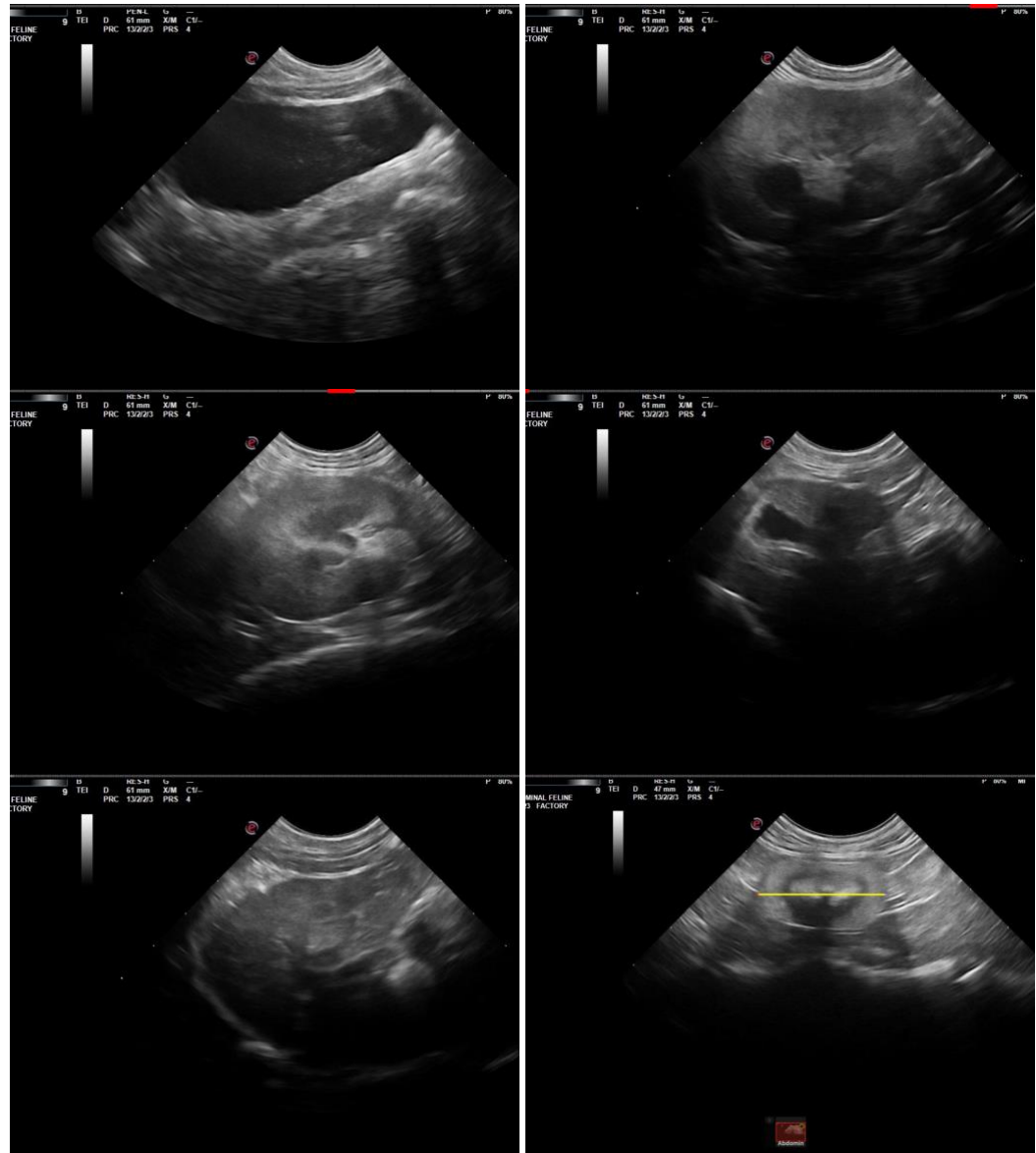
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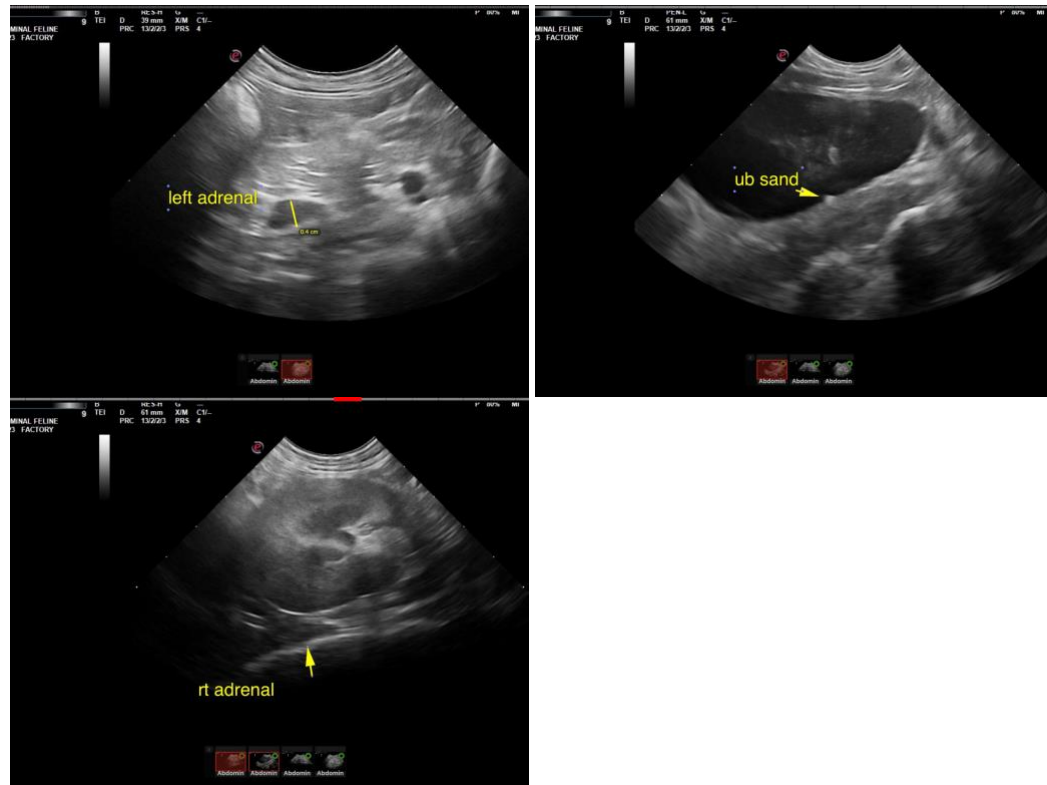
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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