



**PATIENT**

Lana CAHS

**SPECIES**

Feline

**BREED**

Domestic Longhair

**SEX**

Spayed Female

**AGE**

7 years

**WEIGHT**

3.7 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Biederbeck

**HOSPITAL NAME**

Lomsnes VH

**REFERRING VET**

Dr. Biederbeck

**INVOICE**

97781

**DATE**

3/24/22

**PRESENTING CLINICAL SIGNS**

History: Humane Society Cat Diabetic, uncontrolled on 3U glargine BID, BG curve shows BG >20 for most of the day  
Abnormal PE/Chem/CBC/UA Results: U/A-USG 1.050, no glucose, no UTI Grade 3 dental disease on exam

**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 was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomodullary 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 kidneys measured 3.5 cm each.

**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.

**Spleen**

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself. Subtle micronodular changes were noted. This is a positional variant and is not pathological. There was no evidence of significant disease.

**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.

**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



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demonstrated normal luminal chyme and stool consistency respectively. The mesenteric lymph nodes measured up to 0.5 cm and was uniform.

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**Pancreas**

The **pancreas** was prominent and irregular with a dilated duct.

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**ULTRASONOGRAPHIC FINDINGS**

Prominent pancreas.

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Subtle, micronodular splenic changes.

Otherwise, unremarkable abdomen.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Subxiphoid palpation is recommended to assess for pain-solicited response. If pain is noted low grade pancreatitis is suspected. If weight loss is an issue then FNA of the spleen is indicated. There was no other evidence of pathology.

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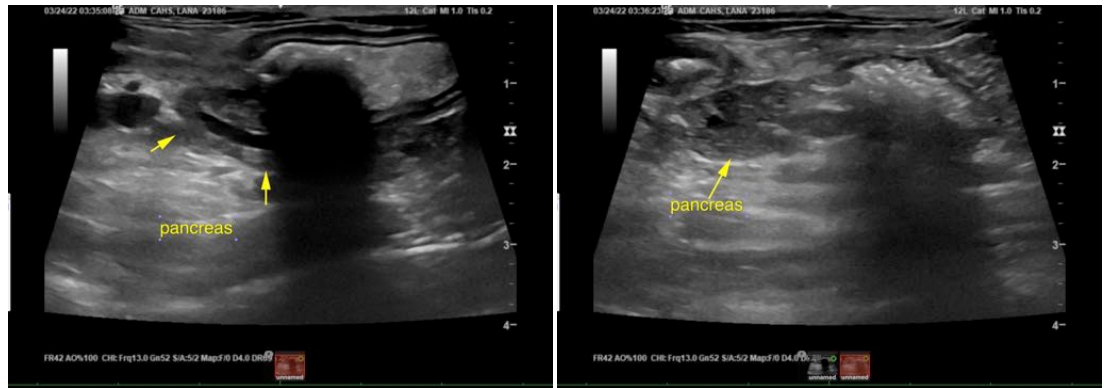
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**IMAGING PERFORMED BY**

Dr. Biederbeck

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

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