

**DATE**

3/27/23

PRESENTING CLINICAL SIGNS

Delayed gastric emptying with chronic intermittent regurgitation. Weight loss and inappetence.

Current Medications: Metoclopramide, Zofran, Mirtazipine

Lab Results: 12/2022 Barium series: Delayed gastric emptying, no filling defects noted. 12/2022 Blood work: minimal increase in globulins otherwise NSF

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brilhart, RDMS.

PATIENT

Sylvia WMAFO

SPECIES

Ferret

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.

BREED**SEX**

Spayed female

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 his age patient. Medullary structure differed distinctly from that of the cortex. The right kidney measured 2.77 cm. The left kidney measured 2.7 cm with slight pyelectasia.

AGE

6/30/18

WEIGHT

703 grams

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 0.29 cm. The right adrenal gland measured

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** was mildly enlarged, typical for the species. The spleen was folded upon itself caudally with localized free fluid adjacent to the fold. This is likely a normal variant.

HOSPITAL NAME

Warm and Fuzzy

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.

REFERRING VET

Dr. Urie

INVOICE

43520

Gastrointestinal

A minor amount of non-shadowing, non-obstructive, soft shadowing material in the stomach. This may be hairball accumulation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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

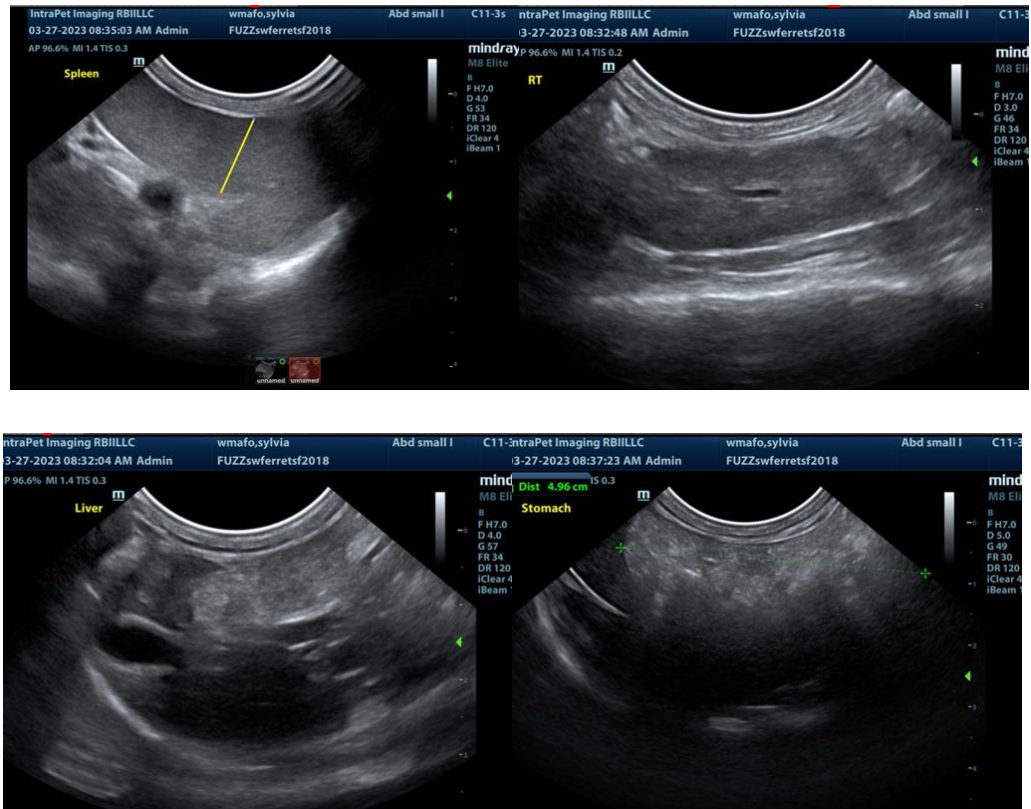
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Unremarkable abdomen with full stomach, potential hairball accumulation. Slight positional induced free fluid and folded spleen and hypersplenism.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of neoplasia. FNA of the liver and spleen can be considered. Empirical hairball therapy is warranted depending on when the patient ate prior to the sonogram. There was no overt peristalsis noted in the GI tract that would suggest that the material in the stomach is not ingesta. This is consistent with hairball accumulation. Assessment for alopecia and excessive grooming is warranted to support this.



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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