

**DATE PRESENTING CLINICAL SIGNS**

3/6/23

History: Inappetence, vomiting starting in early February. Eastern did exploratory surgery on 2/25/23, removed a large hairball and ingesta from stomach, no other significant findings, BX not done, no GI profile in history.

PATIENT

Rebel Sofinowski

Ongoing inappetence and lethargy post-surgery. Feeding tube placed and present. Heart murmur grade 2 noted today on exam, not previously. ProBNP previously normal.

SPECIES

Feline

Current Medications: Cerenia 1/4 tab SID, Reglan 1/4 tab BID, Augmentin 1.25mL BID, Provable probiotic SID

Date of Previous IntraPet Ultrasound: No previous.

BREED

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: STAT requested.

DSH

Imaging Performed By: Rachel Brillhart, RDMS.

SEX

Neutered Male

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.

AGE

3/3/18

WEIGHT

13.02 Pounds

The **kidneys** revealed normal size and structure, corticomedullary 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 right kidney measured 4.35 cm. The left kidney measured 4.51 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 0.53 cm. The left adrenal gland measured 0.49 cm.

HOSPITAL NAME

Cat Hospital at
Towson

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.

REFERRING VET

Dr. Brunt

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.

INVOICE

21455

Gastrointestinal

The **gastric** wall was mildly thickened with regional inflammation. The gastric lumen was empty. Some heterogenous mesentery was noted around the stomach, suggestive for steatitis. The small intestine and colon were unremarkable.

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.

Free Abdomen

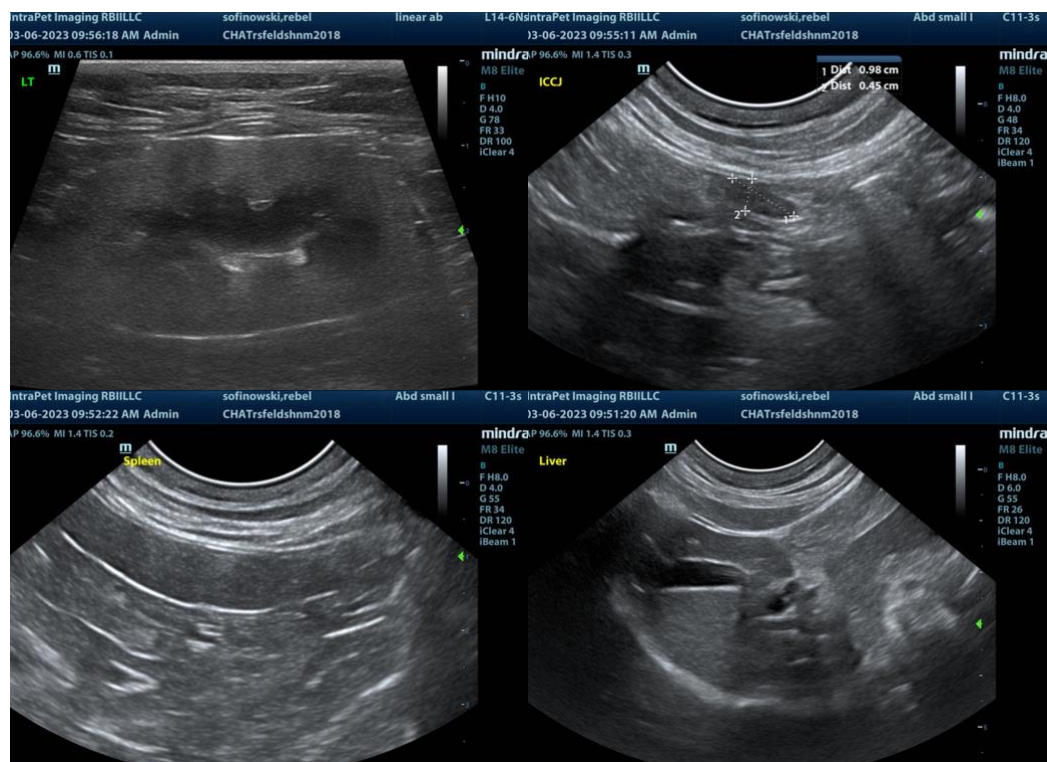
The ileocecal **lymph nodes** presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia. An example of lymph node size measured 0.98 cm x 0.45 cm.

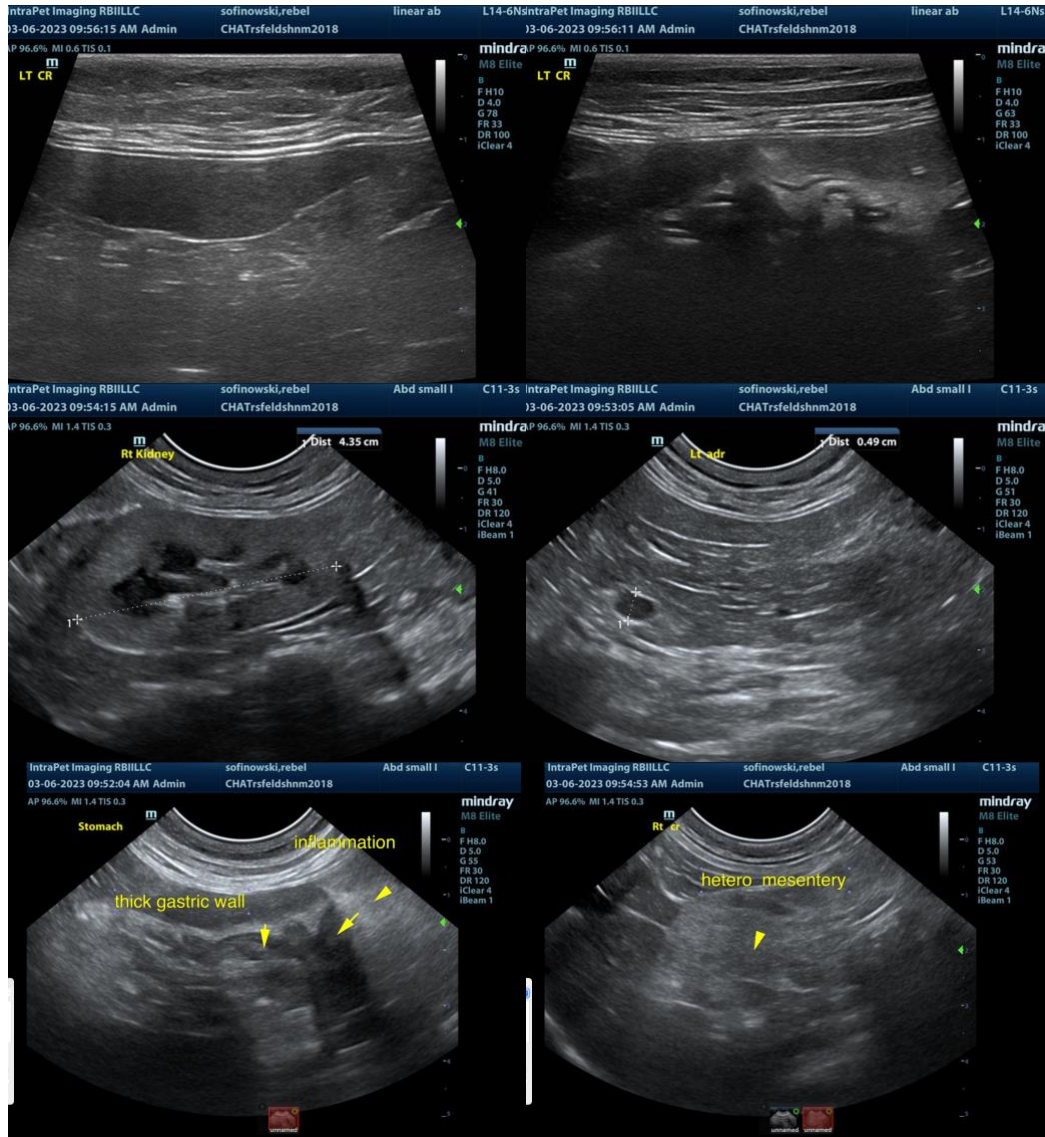
ULTRASONOGRAPHIC FINDINGS

- Nonspecific gastritis/steatitis pattern
- Reactive ileocecal lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of foreign bodies or neoplasia. Some portions of the pancreas may be involved. Supportive care should prove effective.





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