

**PATIENT PRESENTING CLINICAL SIGNS**

Remington Harvey grade 2/6 SHM on L side, Jan 2023, grade 3/6 SHM audible on both sides March 2023 has lost 1kg in weight

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: creat 577

**BREED**

DSH

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**SEX**

Neutered Male

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**

9 Years

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 and no evidence of pelvic dilation was present. The right kidney measured 4.15 cm. The left kidney measured 4.38 cm.

**WEIGHT**

8.2 kg

**Adrenal Glands**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUS

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 adrenal glands measured 0.30 cm each.

**IMAGING PERFORMED BY**

Kelly Reschny

**Spleen**

**HOSPITAL NAME**

BPH Burlington

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. Wittenrich

**Liver**

**INVOICE**

45833

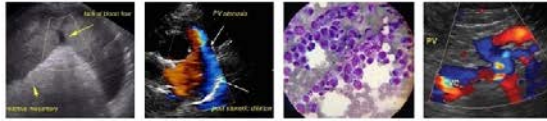
The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls 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.

**DATE**

3/6/23

**Gastrointestinal**

Minor shadowing material noted in the **stomach**, consistent with hairball accumulation. The small intestine and colon were unremarkable.



**PATIENT**

**Pancreas**

Remington Harvey

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.

**SPECIES**

Feline

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

- Normal abdomen with minor hairball density in the stomach
- Age related renal changes

DSH

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

No evidence of pathology.

Neutered Male

**AGE**

9 Years

**WEIGHT**

8.2 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUS

**IMAGING PERFORMED BY**

Kelly Reschny

**HOSPITAL NAME**

BPH Burlington

**REFERRING VET**

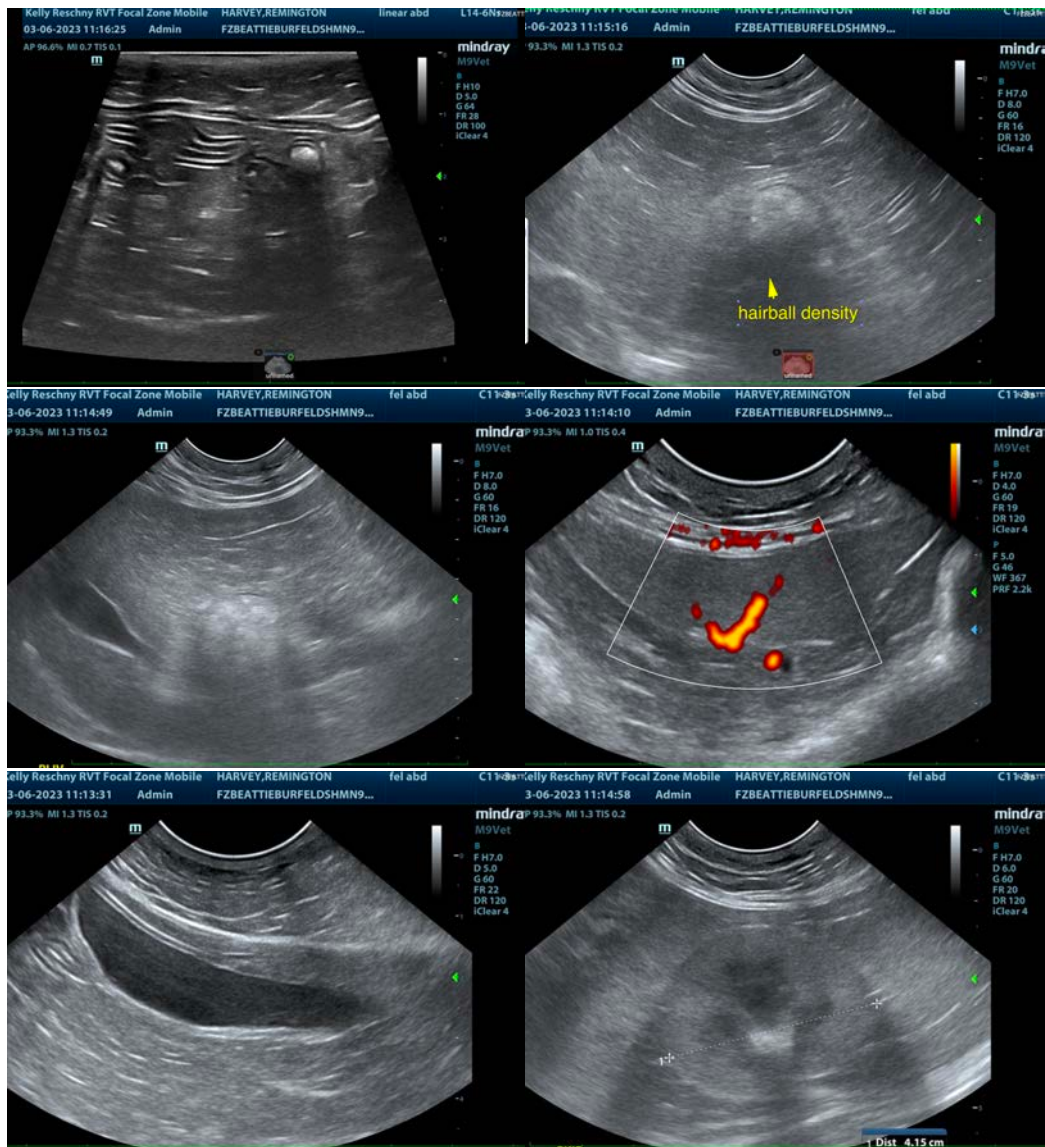
Dr. Wittenrich

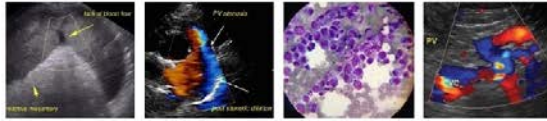
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**DATE**

3/6/23





**PATIENT**

Remington Harvey

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

9 Years

**WEIGHT**

8.2 kg

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Dr. Wittenrich

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45833

**DATE**

3/6/23



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.

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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