



PATIENT PRESENTING CLINICAL SIGNS

Lizzy Olds
P presented on 3/4/23 for lethargy, vomiting and inappetence. She has a history of inappropriate urination and is on Hill's c/d. On 3/4 she had a rectal temp of 104. Today (3/7) her temp is 103.8. Both times her abdomen was too painful to palpate deeply. Nothing caught under the tongue. She has been able to urinate at home. The owner is not aware of anything she could have eaten or gotten into. She does go outside frequently. On 3/4 she was given SQ fluids and a cerenia injection. She has not vomited since then but is not eating.

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

22mo

WEIGHT

9.92lb

Abnormal PE/Chem/CBC/UA Results: BUN (41); CRE (1.6); PHOS (3.1); GLU (171) CBC - mild mature neutrophilia, no bands seen Current Medications Fluoxetine: Give 2mg po sid for stress/anxiety. O has not been able to give the last 2 days because of illness. Radiographic Findings Taken 3/4/23 RESULTS: There is good serosal detail in the abdomen. The stomach is small and appears empty. The intestines appear normal with no pattern consistent with obstruction. There is formed stool in the colon. The kidneys, liver and spleen are normal in size and shape. There are several small uroliths visible in the urinary bladder. The urinary bladder is moderately full. There are no stones visible in the urethra.

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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. Right kidney pyelectasia was present with a pelvic calculus measuring 0.33 cm with pericapsular inflammation consistent with nephritis. The capsules were acceptably uniform without significant irregularities. The blood flow to the kidneys appeared to be adequate. The left kidney measured 4.33 cm in length.

IMAGING PERFORMED BY

Sara Hansen

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 left adrenal gland measured 0.43 cm. The right adrenal gland measured 0.55 cm.

HOSPITAL NAME

West Eugene AH

Spleen

The spleen presented mildly enlarged and uniform measuring 1.3 cm in width. The splenic enlargement is likely reactive given the patient's history or possible splenitis, round cell neoplasia is less likely.

REFERRING VET

Dr. Sundholm

INVOICE

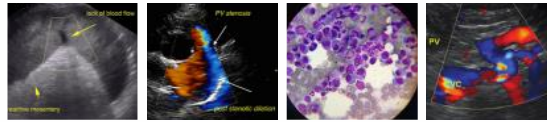
13144ag

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.

DATE

03/07/2023



PATIENT

Lizzy Olds

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

22mo

WEIGHT

9.92lb

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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

- Right kidney nephritis pattern with pelvic calculus-nonobstructive
- Splenomegaly-possible splenitis, round cells cell neoplasia or reactive spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A full urinary workup is warranted with C/S. Both infection and possible calculus movement may be playing a role in this patient. No overt obstruction noted at this time. An FNA and C/S of the right kidney could be considered for cytology and assessment for bacterial infection. FNA of the spleen would be appropriate to assess for splenitis. 24 hour IVF protocol, broad spectrum antibiotics and pain management are all indicated. A recheck sonogram is recommended in 72 hours.

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Eugene AH

REFERRING VET

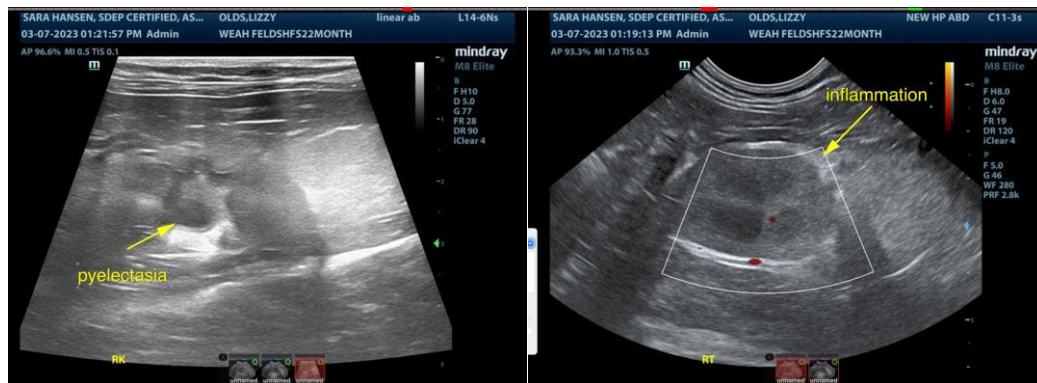
Dr. Sundholm

INVOICE

13144ag

DATE

03/07/2023





PATIENT

Lizzy Olds

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

22mo

WEIGHT

9.92lb

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Eugene AH

REFERRING VET

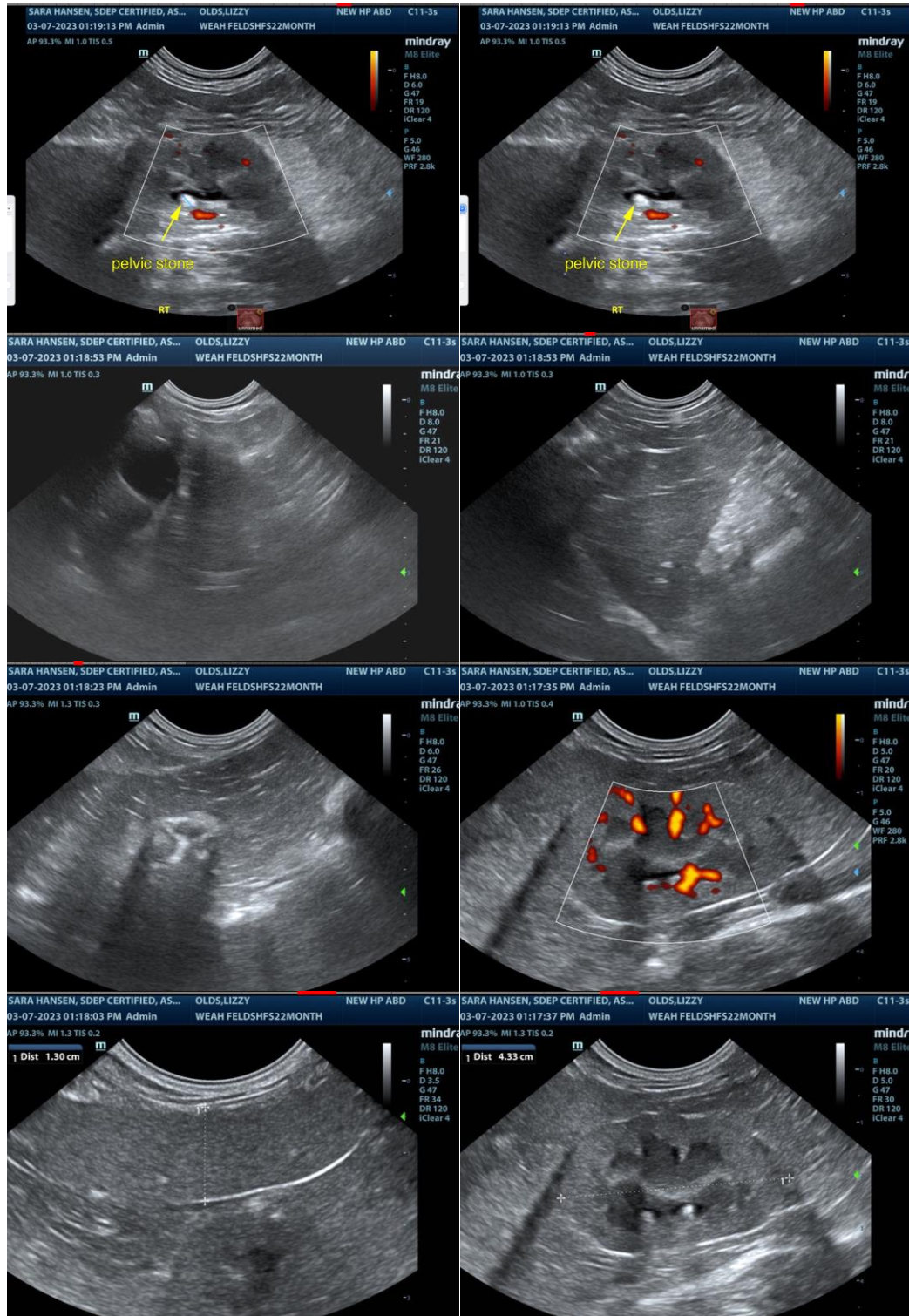
Dr. Sundholm

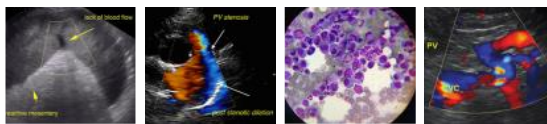
INVOICE

13144ag

DATE

03/07/2023





PATIENT

Lizzy Olds

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

22mo

WEIGHT

9.92lb

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Eugene AH

REFERRING VET

Dr. Sundholm

INVOICE

13144ag

DATE

03/07/2023



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
Eric.Lindquist@SonoPath.com