



PATIENT

Fionn Kaufman-Pace

SPECIES

Canine

BREED

DSH

SEX

Neutered Male

AGE

2

WEIGHT

4.9 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amber Goldman, RVT

HOSPITAL NAME

Appalachian Vet
Ultrasound

REFERRING VET

Dr. Sparks

INVOICE

46687

DATE

4/14/23

PRESENTING CLINICAL SIGNS

utd on vax, no meds, not on prevention, indoor only O came home around 6:30pm today to about 5 piles of v+, was pink and frothy, some piles had red chunks, one pile was a hairball didn't see p v+ but based on behavior, o thinks it came from p rather than housemate p does not want to play, when o picked p up, he was more limp than normal did not e/d tonight, based on litter robot p hasn't been into box since this a.m., no accidents outside litterbox

Abnormal PE/Chem/CBC/UA Results: Feline felv/fiv NEGATIVE COMPLETE WITH LYTES RBC 13.02 M/ μ L 6.54 - 12.20 HIGH HCT 57.0 % 30.3 - 52.3 HIGH HGB 19.1 g/dL 9.8 - 16.2 HIGH RDW 29.9 % 15.0 - 27.0 HIGH WBC * 24.43 K/ μ L 2.87 - 17.02 HIGH NEU * 18.68 K/ μ L 2.30 - 10.29 HIGH BAND * Suspected BASO * 0.65 K/ μ L 0.01 - 0.26 HIGH nRBC * Suspected ALKP 12 U/L 14 - 111 LOW UA PRO 30 mg/dL BLD 50 Ery/ μ L RBC 17 /HPF

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.

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. Slight pinpoint mineralizations noted. The left kidney measured 4.2 cm. The right kidney measures 4.0 cm.

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 0.35 cm. The left adrenal gland measured 0.38 cm.

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.

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.



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Gastrointestinal

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropy" small intestinal wall with 1:1 muscularis/mucosal ratio. The stomach presented a slight amount of ingesta or possible hair accumulation in the pyloric outflow. The gastric wall was unremarkable and lumen was empty otherwise. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.

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

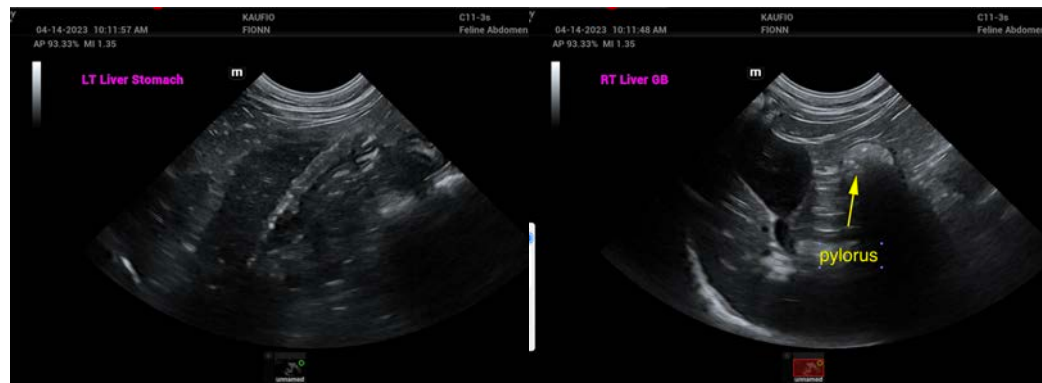
Reactive mesenteric lymph nodes noted up to 0.33 cm.

ULTRASONOGRAPHIC FINDINGS

- Diffuse intestinal thickening consistent with inflammatory bowel and minor hair type density in the stomach
- Reactive mesenteric lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of foreign body. No neoplastic criteria present. Hairball therapy warranted. IV fluid support and GI protectants should prove effective. I recommend a fresh fecal smear and fecal floatation analysis.





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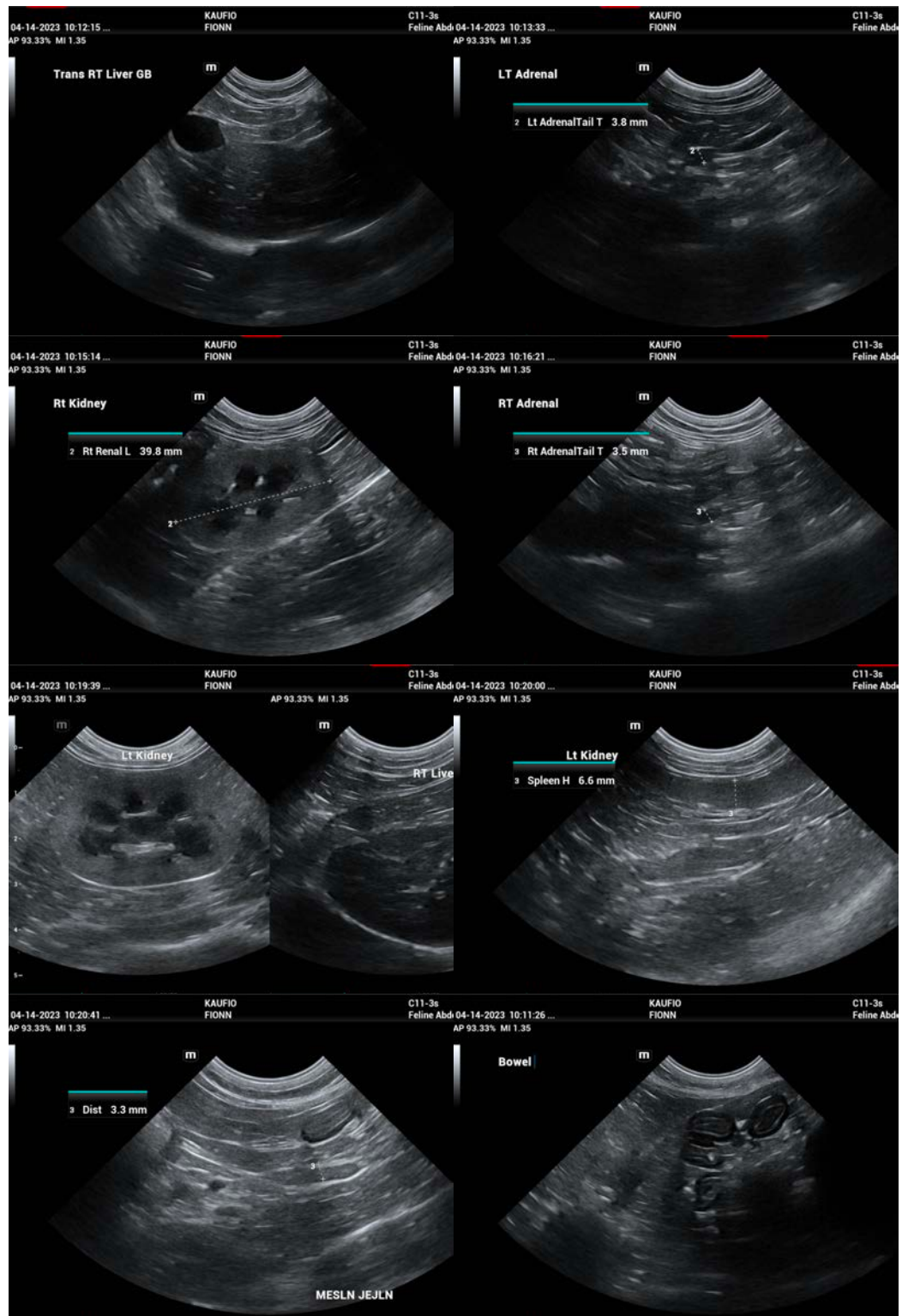
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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