



DATE PRESENTING CLINICAL SIGNS

04/21/26 Patient History: Vomiting more than usual today. Abdomen palpates distended with large stomach; no ff on pocus, stomach appears gas dilated with shadowing, right kidney pelvis subjectively dilated compared to left.

PATIENT

Roo Fleury Current Medications: Metoclopramide, Potassium Chloride, Buprenorphine, Gabapentin, Cerenia. Labwork Results: Labwork not submitted. Xray Abdomen 2 View- formed stool in colon, large stomach full of material, possibly food.

SPECIES

Feline

Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: STAT requested.
Imaging Performed by: Rachel Brillhart, RDMS.

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

Spayed female

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

04/12/25

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 left kidney measured 3.95 cm in length. The right kidney measured 4.11 cm in length.

WEIGHT

7.2 pounds

Adrenal Glands

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

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 0.44 cm width. The right adrenal gland measured 0.50 cm width.

HOSPITAL NAME

Animal Emergency
Hospital

Spleen

The **spleen** presented mildly enlarged and folded upon itself.

Liver

REFERRING VET

Dr. Reynolds

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

15290

Gastrointestinal

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas

of "ropey" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. 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. Small intestinal wall measured 0.32 cm wall width. Some ingesta was noted in the stomach, yet no overt obstruction. Gastric ileus is likely.

Pancreas

The **pancreas** presented mildly enlarged measuring 1.2 cm with a dilated duct measuring 0.17 cm. Enhanced mesentery was noted around the pancreas. No evidence of obstruction.

Free Abdomen

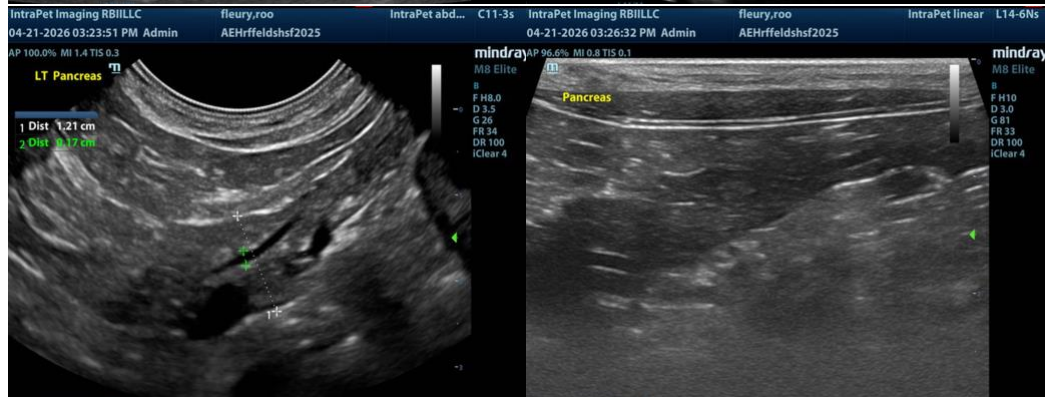
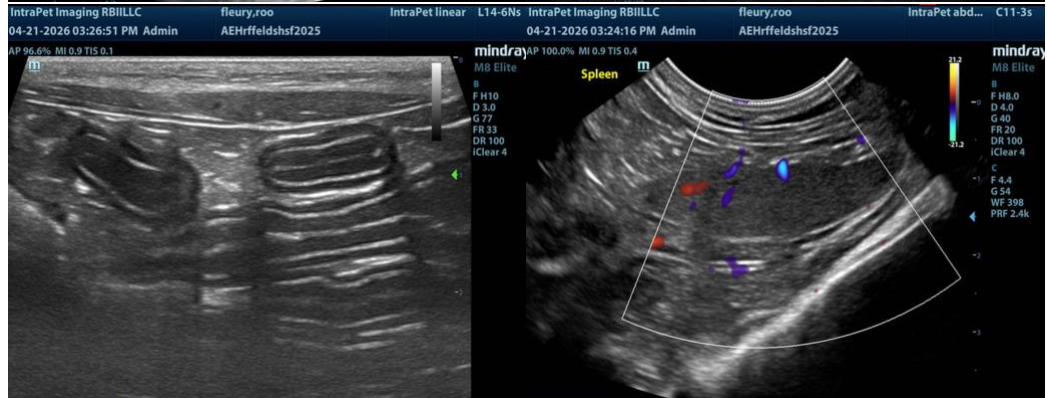
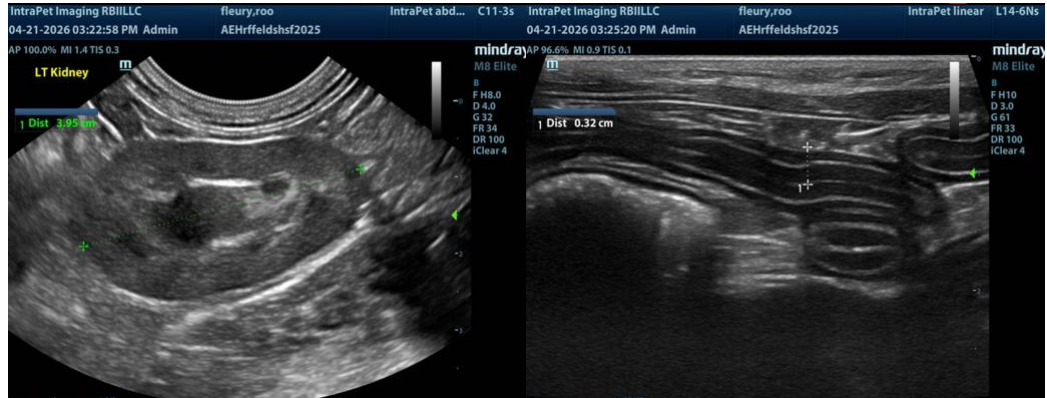
The mesenteric **lymph nodes** presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia. The lymph nodes measured 1.67 cm x 1.0 cm.

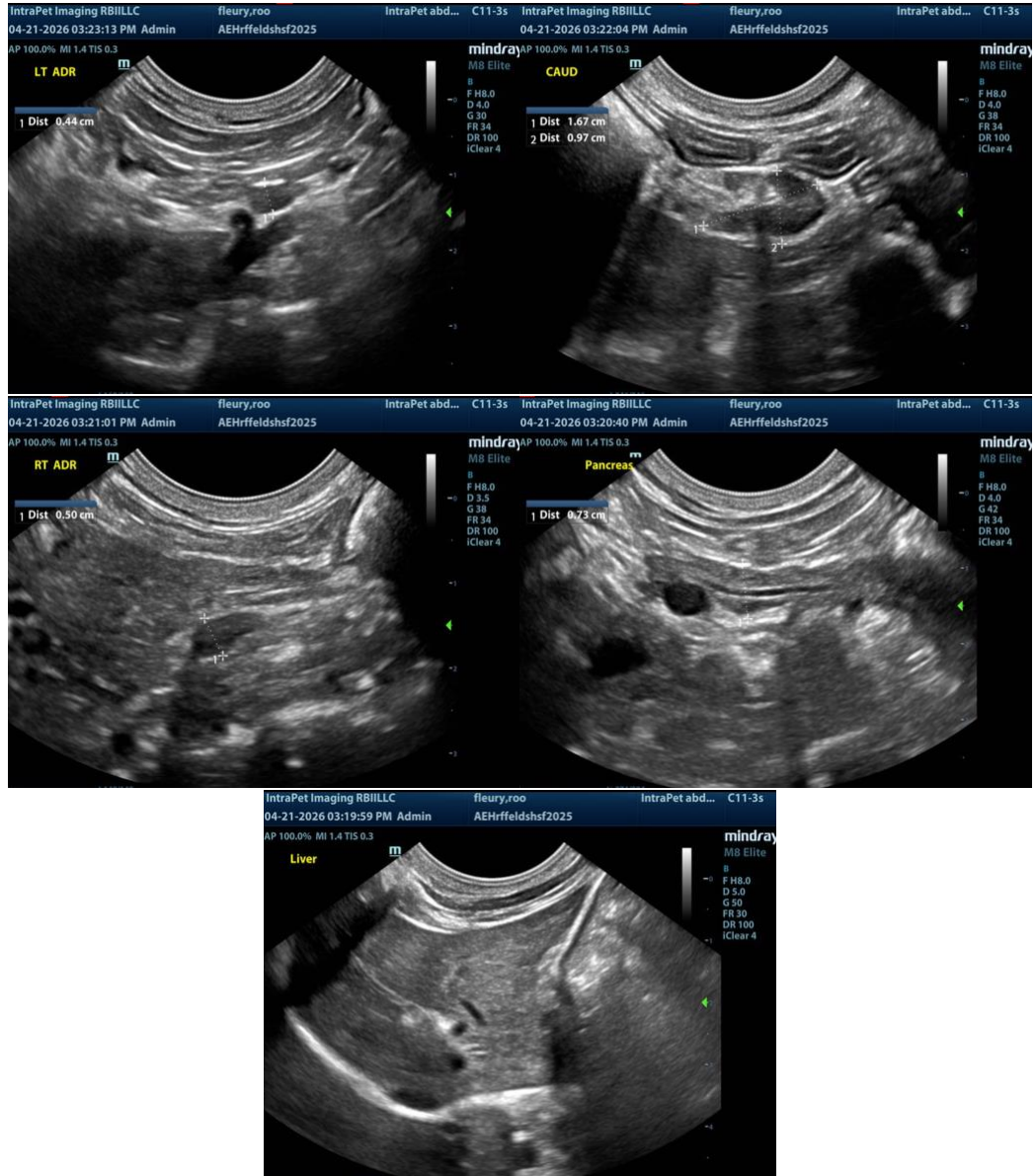
ULTRASONOGRAPHIC FINDINGS

- Minor intestinal thickening.
- Pancreatitis pattern- no evidence of obstruction.
- Reactive spleen.
- Mesenteric lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Medical management for acute on chronic inflammatory bowel and pancreatitis is warranted with fluid support, broad spectrum antibiotics and pain management. If exposure to toxoplasmosis, toxoplasmosis titers is indicated.





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(CFM), Cert. IVUSS,

CEO, Owner, Founder -- SonoPath.com

info@SonoPath.com