



**PATIENT PRESENTING CLINICAL SIGNS**

**Nala Levi** Admitted on April 24th for 1-day vomiting and anorexia. Normal diet is kibble, but indoor/outdoor and does hunt. On PE, she was painful in the cranial abdomen and mildly febrile (40.1 C). Nala was discharged after injections of convenia(8 mg/kg) and cerenia (1 mg/g) after sedated radiographs did not show evidence of obstruction. The owner stated that even with reversal drugs, Nala was very subdued and drooled at home. She was brought in again on April 25th and admitted. Her temperature had normalized to 39C, but she still had discomfort on palpation. IV fluids were started. Panprotazol (0.7 mg/kg q 12 hrs) and ampicillin (22 mg/kg q 8 hours) were started. This study was done with dexdomitor and buprenorphine sedation.

**Feline**

**BREED** Abnormal PE/Chem/CBC/UA Results: April 24: WBC=20.53 (2.87-17.02) Neutrophils=11.89 (2.3-10.29) BANDS suspected Lymphocytes=8.14 (0.92-6.88) Glucose=10.43 (4.11-8.84) GGT=7 (0-4)

Domestic Medium Hair

**SEX**

Spayed Female

**AGE**

16 months

**WEIGHT**

3.81 kg

**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 was 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. The left kidney measured 3.64 cm. The right kidney measured 3.9 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 left adrenal gland measured 0.45 cm.

**IMAGING PERFORMED BY**

Dr. Markland

**HOSPITAL NAME**

**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 was noted.

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**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

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4/26/22



**PATIENT** lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Nala Levi

**SPECIES** *Gastrointestinal*

Feline

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. Intestinal wall thickness measured up to 0.2 cm. The cecum was mildly thickened with no loss of mural detail. The mesenteric lymph node was enlarged, hypoechoic and partially rounded measuring up to 0.56 cm with pericapsular inflammatory pattern. Reactive mesentery was noted around the ileocecal junction associated with the thickened cecum and lymph nodes.

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*Pancreas*

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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.

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**ULTRASONOGRAPHIC FINDINGS**

Typhlitis/lymphadenitis.

Minor potential for emerging neoplasia. Minor potential for emerging FIP.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Ultrasound-guided FNA of the regional lymph nodes, cytology and culture would be indicated in this patient. Otherwise, empirical treatment for Typhlitis, lymphadenitis with Enrofloxacin and Metronidazole combination and supportive care is recommended.

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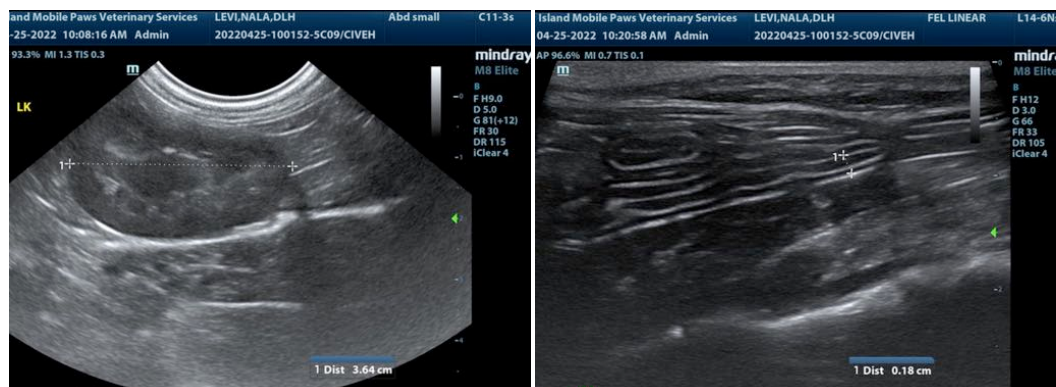
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**PATIENT**

Nala Levi

**SPECIES**

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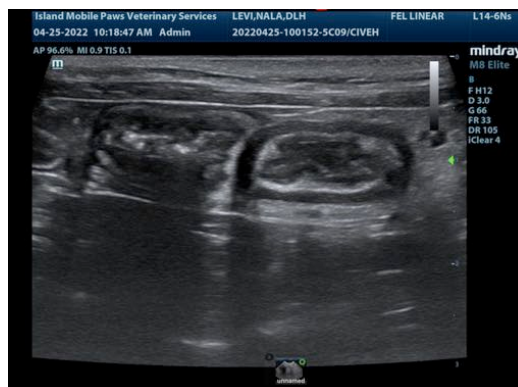
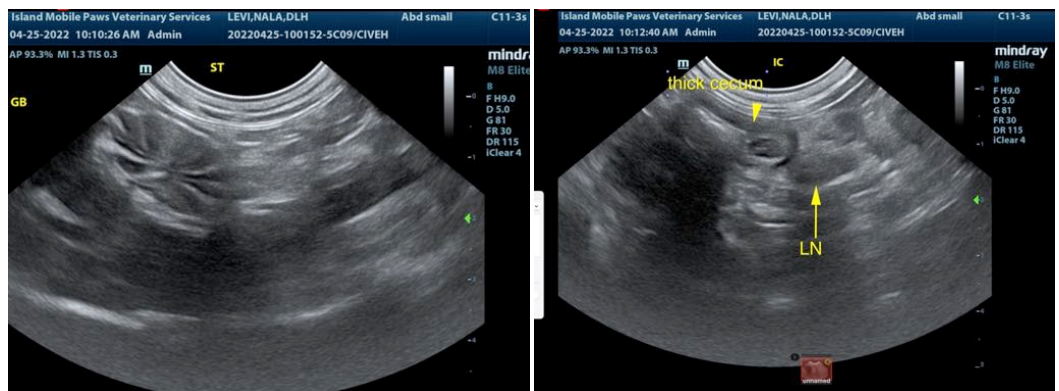
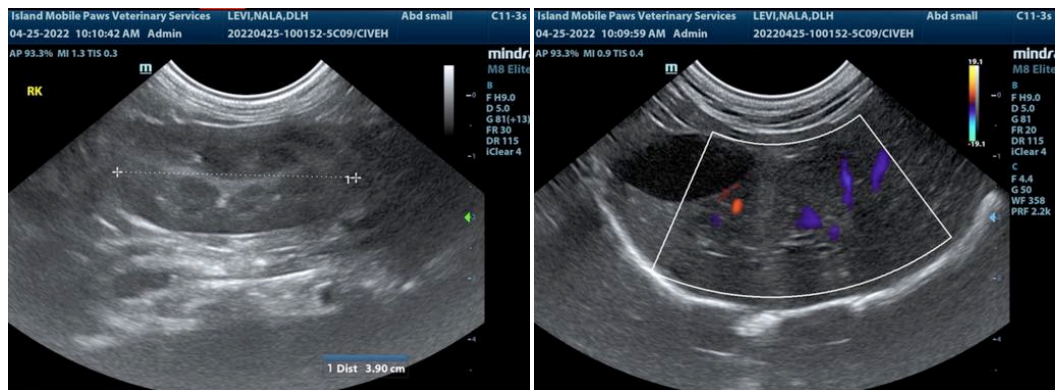
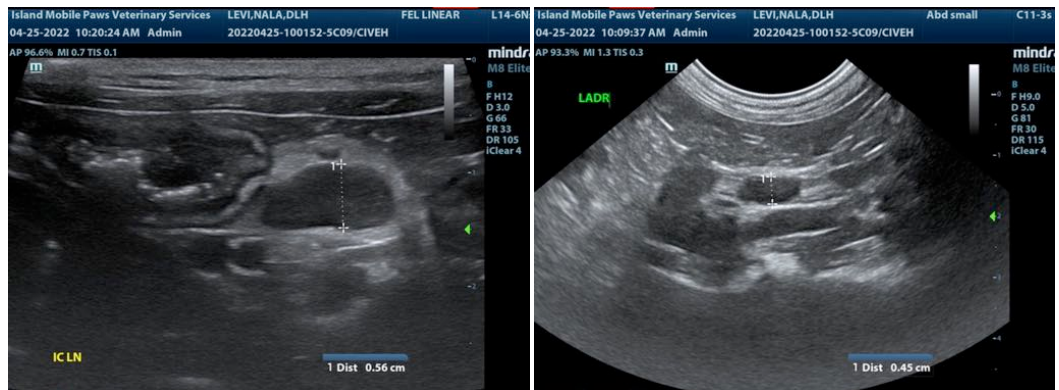
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**PATIENT**

Nala Levi

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.

**SPECIES**

Feline

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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Domestic Medium Hair

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

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