



PATIENT

Beans Cutaiar

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

10yr

WEIGHT

8kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr Lupole

INVOICE

13630ag

DATE

04/28/2023

PRESENTING CLINICAL SIGNS

Presented at our hospital for AUS. Started approx 1mo ago with vomiting with increasing frequency. Sometimes howls before vomiting like he is in pain. Sometimes undigested food, sometimes water, sometimes digested food. Took to rdvm, switched food to i/d and tried a round of Metronidazole. No change, added Cerenia, seemed to help for about a week and then started back up again. Took back to rdvm and did diagnostics, rec AUS. Also tried changing amount per feeding, no change. Otherwise he is acting normal. Previous Health Concerns: FIV, 3 teeth extracted 4-5mo ago. Current Medications: no

Abnormal PE/Chem/CBC/UA Results: Cardiovascular: Grade 3/6 localized sternal heart murmur
Abdominal: very reactive, painful abdominal palpation; large amount intra-abdominal fat, difficult to palpate fully Integument: adult fleas; flea dirt; alopecia along tail base and top line Rdx: t4/Free T4 normal; CREATINE KINASE 756; MCV 35; MCH 11.9; RETIC HGB 14.1 ; proBNP normal; FIV positive. Abdominal radiographs: mild hepatomegaly, fat ++, spleen is visible due to fat in abdomen, stomach empty, small intestines wnl, mod. feces in tranverse and descending colon with gas

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra presented normal thicknesses and normal tone to a depth of 2 cm. 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 presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous, and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with moderate chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. The left kidney measured 4.8 cm in length. The right kidney measured 4.8 cm in length.

Adrenal Glands

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

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. The spleen measured 0.9 cm in width at the level of the hilus.

Liver

The liver was diffusely hyperechoic to the falciform fat. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

Gastrointestinal



PATIENT

Beans Cutaiar

Examination of the gastrointestinal tract revealed a stomach with progressively shadowing material consistent with hairball density occupying the majority of the stomach. The intestine and colon appeared normal. Transitive chyme appeared to be occurring. No significant mural changes noted.

SPECIES

Feline

Pancreas

Minor reactive mesentery was noted in the region of the pancreas. Heterogenous pancreatic changes were present. Some level of pancreatitis likely.

BREED

DSH

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

MN

ULTRASONOGRAPHIC FINDINGS

- Hairball density in the stomach with likely concurrent low grade pancreatitis.
- Mild to moderate chronic interstitial nephrosis renal pattern.

AGE

10yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Gastrointestinal lubricants and IVF support recommended. Assessment for evidence of cranial abdominal/subxiphoid discomfort on palpation which may allude to chronic active pancreatitis is recommended. No evidence of intra-abdominal neoplasia.

WEIGHT

8kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Erin Wicks

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

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr Lupole

INVOICE

13630ag

DATE

04/28/2023