



PATIENT

PRESENTING CLINICAL SIGNS

Moby Cote

Finishing treatment for FIP with GF-421524 (in the last week). Severe stomatitis and isosthenuria noted. Sedated with Gabapentin and low dose Butorphanol/DexDom.

SPECIES

Abnormal PE/Chem/CBC/UA Results: PE: severe stomatitis, rest WNL. Isosthenuria, SDMA 16, Creat 2.0. Sample taken for urine C&S after US.

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

DSH

The urinary bladder, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal to a depth of 3 cm. No uroliths or sediment were visualized, and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

SEX

MN

AGE

1yr

The kidneys revealed normal size and irregular contour was noted with normal corticomedullary definition and ratio for this age. Increased cortical echogenicity was present. Bilateral pyelectasia and echogenic debris noted. The capsules were acceptably uniform without significant irregularities. Possible cranial pole right kidney infarct or dysplasia was present. The blood flow to the kidneys appeared to be subnormal on power Doppler assessment. The left kidney measured 2.71 cm in length. The right kidney measured 3.58 cm in length.

WEIGHT

Adrenal Glands

7lb

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 0.42 cm. No pathology in the area of the right adrenal gland.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Karen Ebersole, DVM,
DABVP

Liver

HOSPITAL NAME

Scanvet

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.

REFERRING VET

Dr. Cote

Gastrointestinal

INVOICE

13647ag

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.

DATE

04/28/2023

Pancreas



PATIENT

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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.

SPECIES

Feline

Free Abdomen

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

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

- Renal pyelectasia and degenerative changes with irregular contour and infarcts.

SEX

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

1yr

Primary renal dysplasia may be an issue vs secondary changes owing to chronic inflammation. A renal biopsy would be necessary for further definition. This is not the typical present for FIP however this cannot be ruled out. The remains of the abdomen was unremarkable. Prognosis is guarded long term regarding the renal structure. Monitoring of systemic BP, renal parameters and for evidence of UTI is recommended.

WEIGHT

7lb

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Karen Ebersole, DVM,
DABVP

HOSPITAL NAME

Scanvet

REFERRING VET

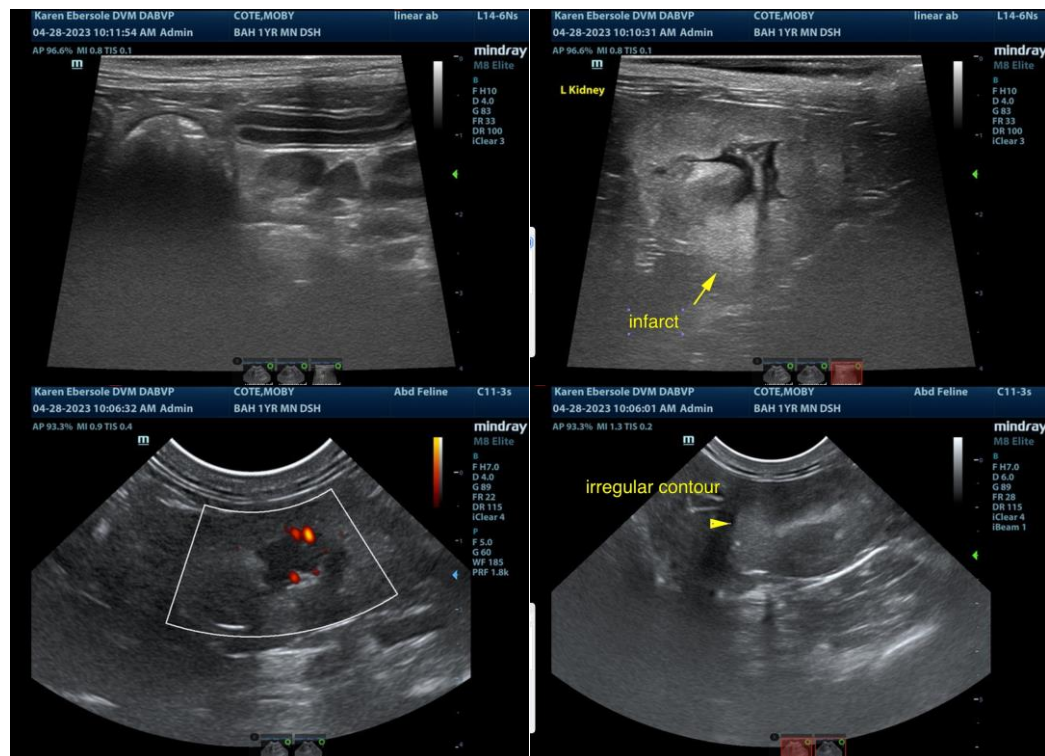
Dr. Cote

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SPECIES

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BREED

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AGE

1yr

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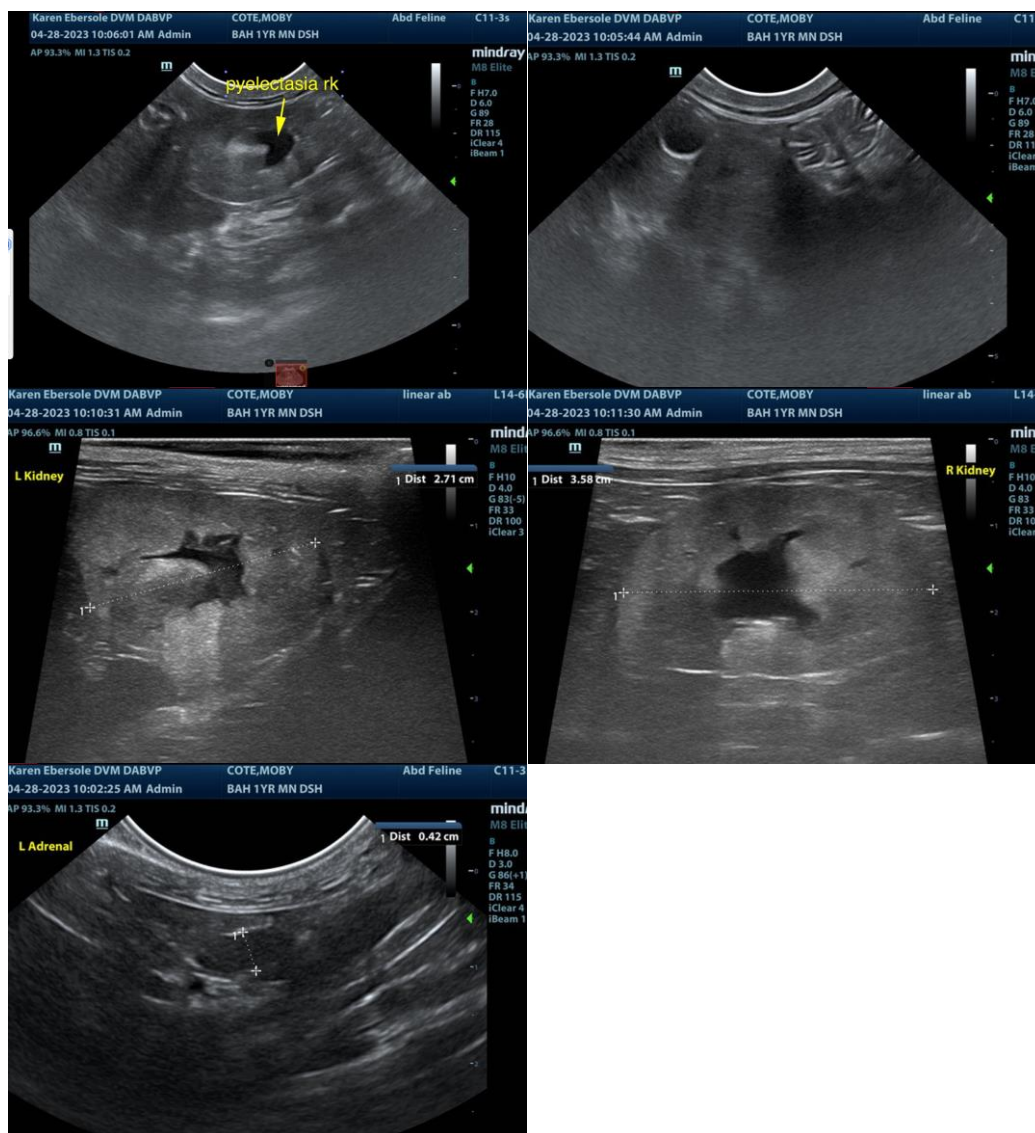
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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