

**PATIENT**

Hobo Blanchard

**PRESENTING CLINICAL SIGNS**

History: Mass on lumbar spine

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: Evidence of Chronic Renal disease and Liver disease with liver disease expected to be the cause of current illness. Current Medications Amoxi-Clav 125mg + Cerenia 16mg

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

DLH

**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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

**SEX**

Neutered Male

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. Irregular contour and microinfarcts were noted. 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 5.09 cm. The right kidney measured 5.09 cm.

**AGE**

11 Years

**WEIGHT**

18.28 Pounds

**Adrenal Glands**

The **adrenal glands** were uniform, yet bilaterally swollen and hypoechoic. This is most consistent with mild stress-induced hyperplasia. The right adrenal gland measured 0.51 cm. The left adrenal gland measured 0.69 cm.

**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.

**HOSPITAL NAME**

Santa Clara AH

**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.

**REFERRING VET**

Dr. Brasted-Maki

**INVOICE NUMBER**

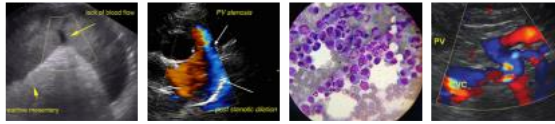
14687

**Gastrointestinal**

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

**DATE**

4/8/22



**PATIENT** obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Hobo Blanchard

**Pancreas**

**SPECIES**

Feline

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some mild parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

**BREED**

DLH

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

- Moderate chronic degenerative renal disease, nonspecific
- Adrenal gland stress
- Age-related abdominal changes otherwise

Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

No evidence of significant disease. Renal support protocol based on clinical history and any azotemia, inflammatory and so forth.

11 Years

**WEIGHT**

18.28 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV, DABVP, Cert. IVUSS

**HOSPITAL NAME**

Santa Clara AH

**REFERRING VET**

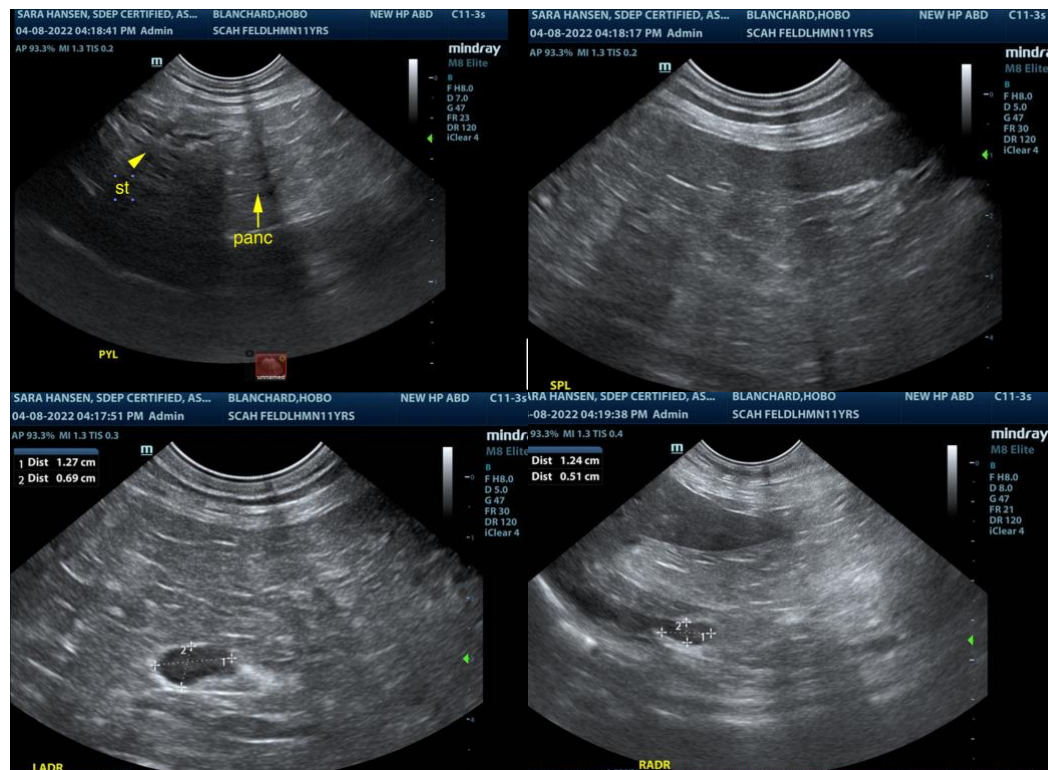
Dr. Brasted-Maki

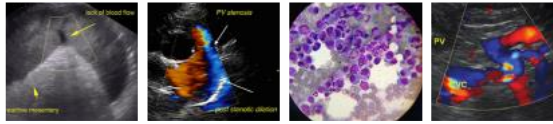
**INVOICE NUMBER**

14687

**DATE**

4/8/22





**PATIENT**

Hobo Blanchard

**SPECIES**

Feline

**BREED**

DLH

**SEX**

Neutered Male

**AGE**

11 Years

**WEIGHT**

18.28 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS

**HOSPITAL NAME**

Santa Clara AH

**REFERRING VET**

Dr. Brasted-Maki

**INVOICE NUMBER**

14687

**DATE**

4/8/22



The information and recommendations provided are based on the images presented by the referring veterinarian. 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, Cert. IVUSS, CEO of SonoPath.com  
Eric.Lindquist@SonoPath.com