



**DATE PRESENTING CLINICAL SIGNS**

05/16/26 Patient History: Acute vomiting and diarrhea with hematochezia  
Fever

**PATIENT** Elevated blood glucose  
Elevated NT-proBNP (historical finding)

Pumpkin Michael

**SPECIES** Current Medications: Maropitant Citrated, Ondansetron, Potassium Chloride, Butorphanol, Alfaxalone.  
Labwork Results: Labwork submitted and attached. Radiographs--Abdomen 2 View  
thickened intestinal wall, gas filled intestines and stomach, cannot rule out foreign material in stomach as well

Feline as intestine at the mid abdomen (better visualized on VD).

**BREED** Date of Previous IntraPet Ultrasound: No previous.  
Sedation: Not required to complete full diagnostic ultrasound.

DSH Stat Report: Requested.  
Imaging Performed by: Andi Parkinson, BS, RDMS.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Spayed Female

**Urinary System**

**AGE** 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.

05/15/18

**WEIGHT** The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.

9.02 lbs

**INTERPRETED BY**

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**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 width. The right adrenal gland measured 0.4 cm width.

**HOSPITAL NAME**

Animal Emergency  
Hospital

**Spleen**

**REFERRING VET**

Dr. Shannahan

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 1.03 cm width.

**INVOICE**

16294

**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.

### ***Gastrointestinal***

The **stomach** in this patient was largely empty other than the pyloric outflow that revealed minor self-shadowing luminal material that may represent hair accumulation. The small intestine and colon were unremarkable.

### ***Pancreas***

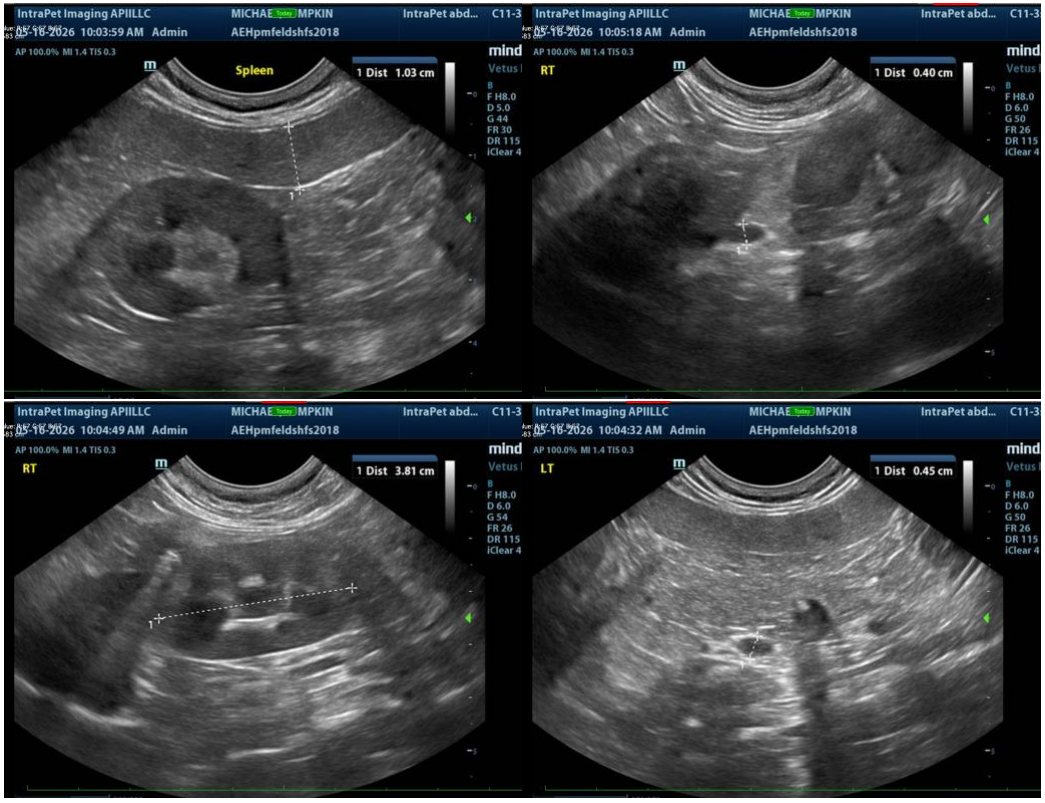
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

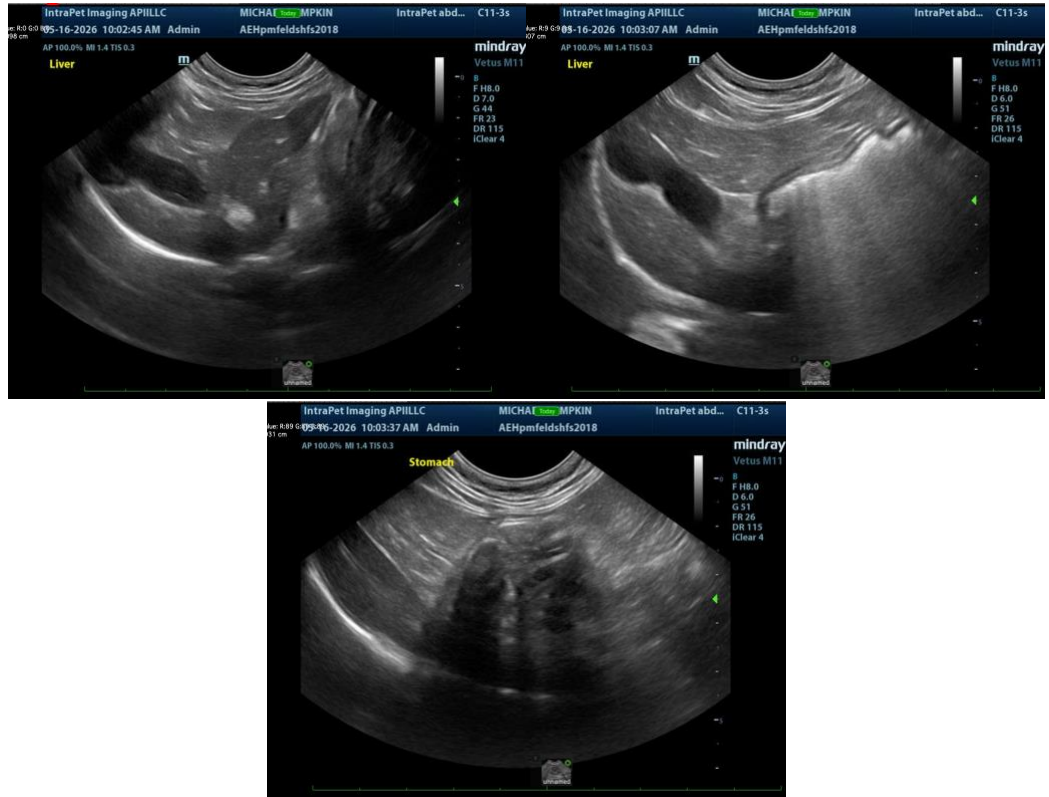
### **ULTRASONOGRAPHIC FINDINGS**

- Potential minor hair accumulation in the pyloric outflow.
- Unremarkable abdomen otherwise.

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Medical management for hairball, and potential dietary intolerance or indiscretion is indicated. No evidence of gross disease.





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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