



PATIENT

Lucy Bravo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

3 Years

WEIGHT

11.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert IVUSS

IMAGING PERFORMED BY

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Mobile Vet Unit

REFERRING VET

Dr. Cortes

INVOICE

37706

DATE

5/17/22

PRESENTING CLINICAL SIGNS

Cat is not eating. Hypokalemic. potential diabetic - Insulin not given today. Labs attached
Abnormal PE/Chem/CBC/UA Results: Urine test strips (litter pan sample) - Glu +1, Bili - Neg,
Ketone - Neg, Ascorbic acid 2+, Sp Gravity 1.020, Blood - Neg, Ph 6.5, Protein +1, Urobil Neg, Nitrates
- Neg, Leukocyte ++
AST 2070, ALT 1347, ALP 153, Bili 2.7, BUN 50, Glucose 239, WBC 24,000, Hct 20

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 were noted. Ureteral papillae were normal.

The **kidneys** were irregular in contour. The right kidney measured 4.73 cm. Slight pyelectasia and minor uniform swelling noted. The left kidney measured 4.62 cm. A hyperechoic nodule was noted in the cranial pole of the left kidney measuring 1.62 cm.

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 right adrenal gland measured 0.45 cm. The left adrenal gland measured 0.41 cm.

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.

Liver

The **liver** was diffusely hyperechoic to falciform fat. The gallbladder and common bile duct were unremarkable. No evidence of post-hepatic obstruction.

Gastrointestinal

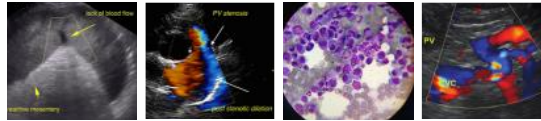
Some stasis noted in the **stomach**. The small intestine and colon were unremarkable.

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

- Diffuse hyperechoic liver – suspect lipidosis, potential underlying neoplasia and inflammatory hepatopathy.
- Slight swollen kidneys and left renal nodule



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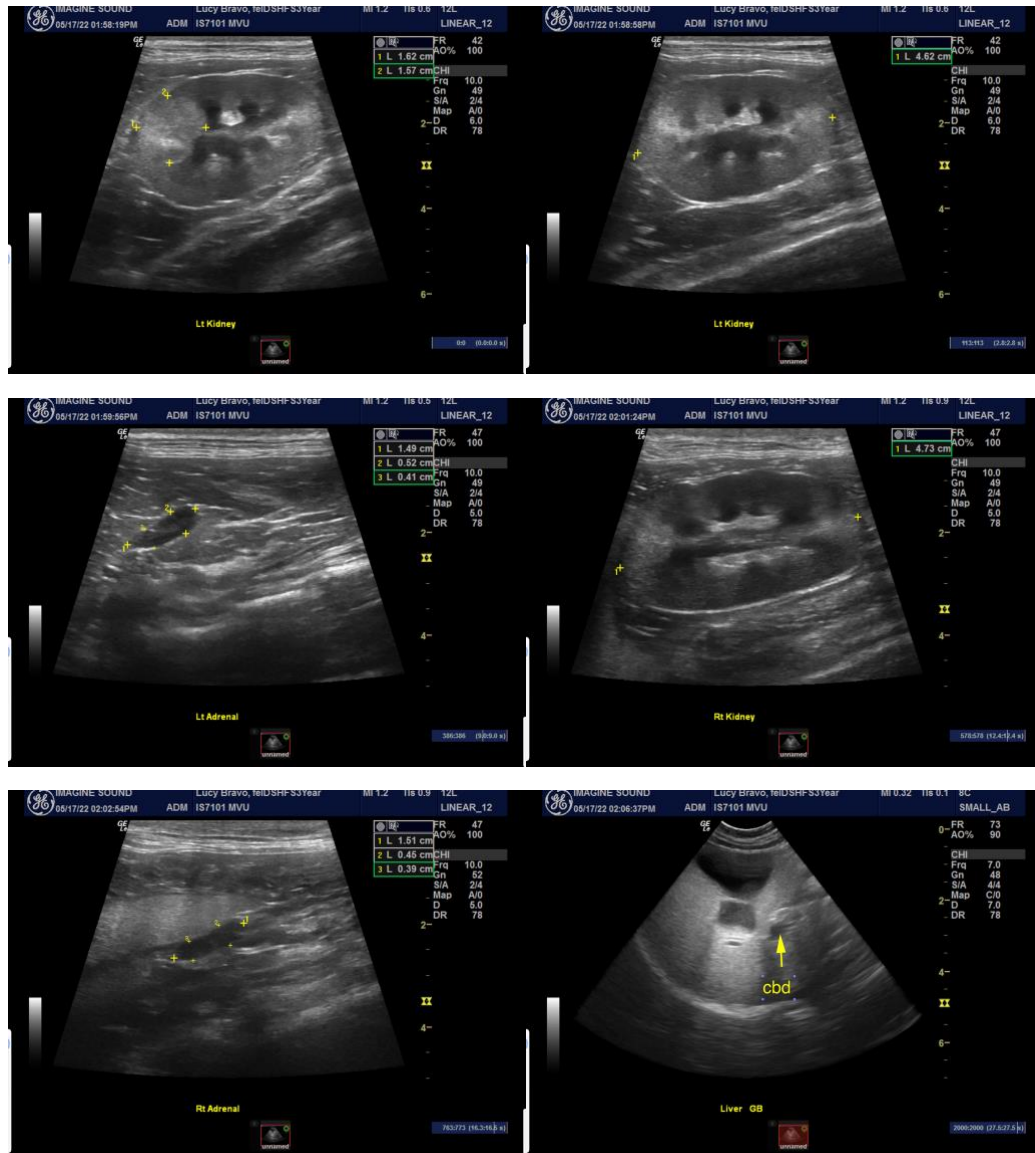
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Coagulation panel and FNA of the liver indicated. Renal FNA also indicated. CBC path review +/- bone marrow aspirate warranted. I'm concerned for underlying neoplasia in this patient. The hyperglycemia may be stress related. Sampling is essential.





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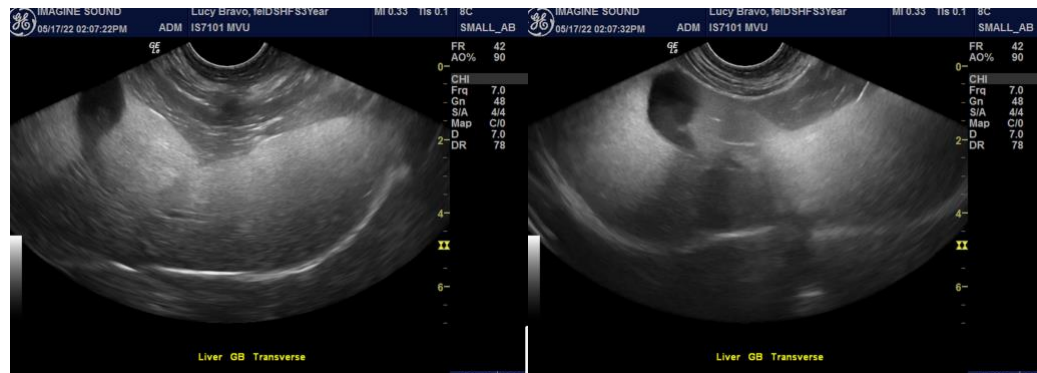
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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