



**PATIENT**

Lily McConnell

**PRESENTING CLINICAL SIGNS**

Vomiting emaciated lethargic anorexic. Suspect abdominal neoplasia  
Abnormal PE/Chem/CBC/UA Results: Stress leukogram and high Ca

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

DSH

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.

**SEX**

Spayed Female

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 3.64 cm. The left kidney measured 3.32 cm.

**AGE**

16 Years

**Adrenal Glands**

**WEIGHT**

4.31 kg

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 0.29 cm. The left adrenal gland measured 0.44 cm.

**Spleen**

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

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**

Dr. Belan

**Liver**

**HOSPITAL NAME**

McKnight 24 Hr AH

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder wall was slightly echogenic and mildly thickened at 0.1 cm.

**Gastrointestinal**

**REFERRING VET**

Dr. Malaguti

The **stomach** and small intestine were empty. Diffuse minor intestinal thickening noted with 1:1 muscularis to mucosa ratio. The submucosal layer was intact. Reactive mesenteric lymph node noted at 0.51 cm. Reactive mesentery noted associated with the ileocecal junction.

**Pancreas**

**INVOICE**

37724

The **pancreas** was hyperechoic with coarse architecture and mild undulating contour, consistent with remodeling. The pancreas measured 0.91 cm in width.

**ULTRASONOGRAPHIC FINDINGS**

**DATE**

5/18/22



**PATIENT**

Lily McConnell

- Acute on chronic inflammatory bowel presentation with reactive mesentery and slight lymphadenitis
- Pancreatic remodeling
- Geriatric abdomen otherwise

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

16 Years

**WEIGHT**

4.31 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hr AH

**REFERRING VET**

Dr. Malaguti

**INVOICE**

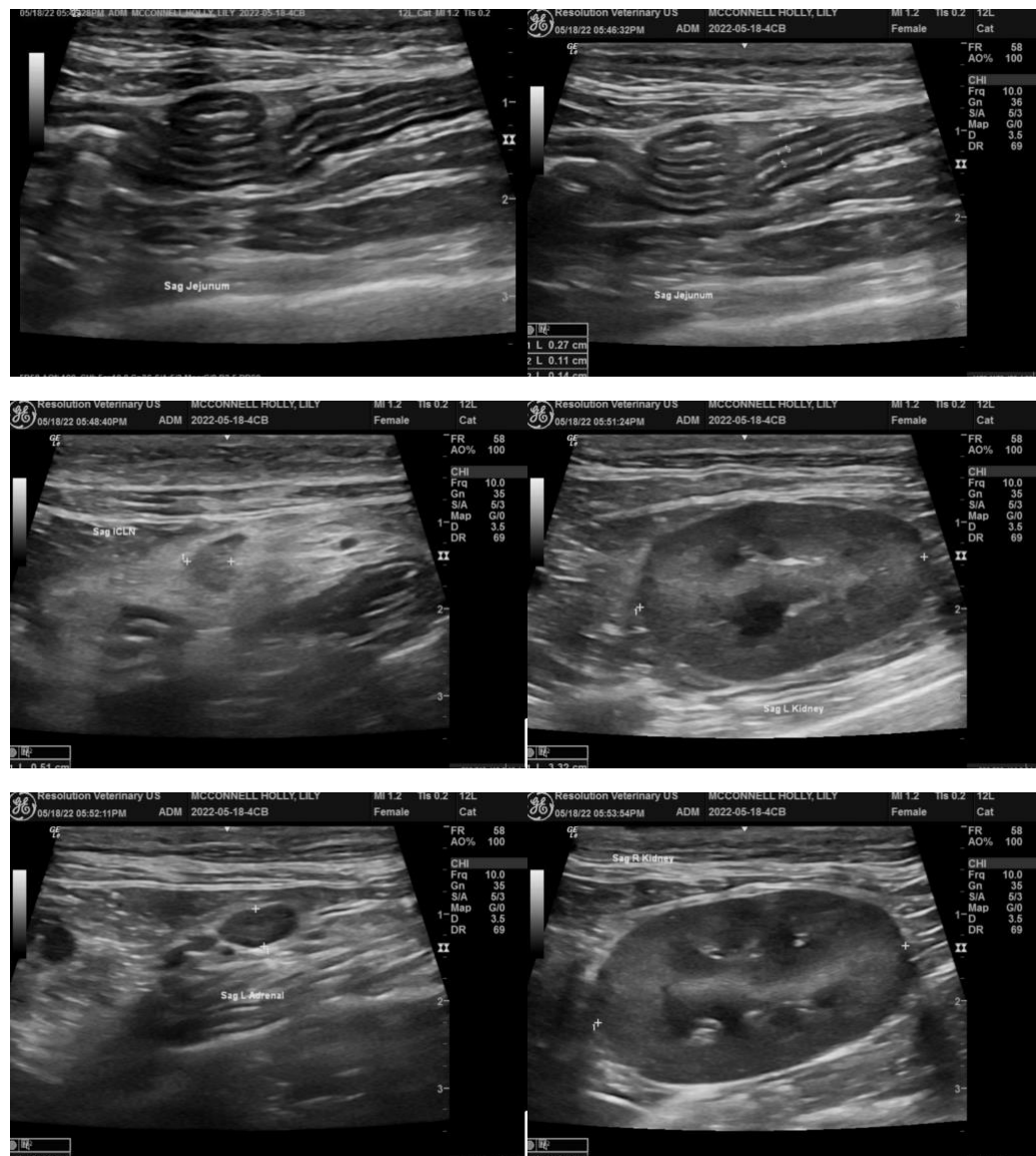
37724

**DATE**

5/18/22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Supportive care should prove effective. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered. No evidence of neoplasia.





**PATIENT**

Lily McConnell

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

16 Years

**WEIGHT**

4.31 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hr AH

**REFERRING VET**

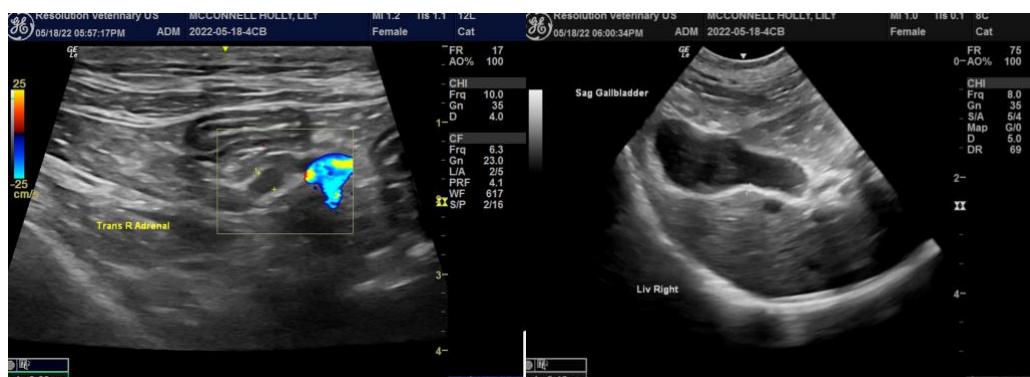
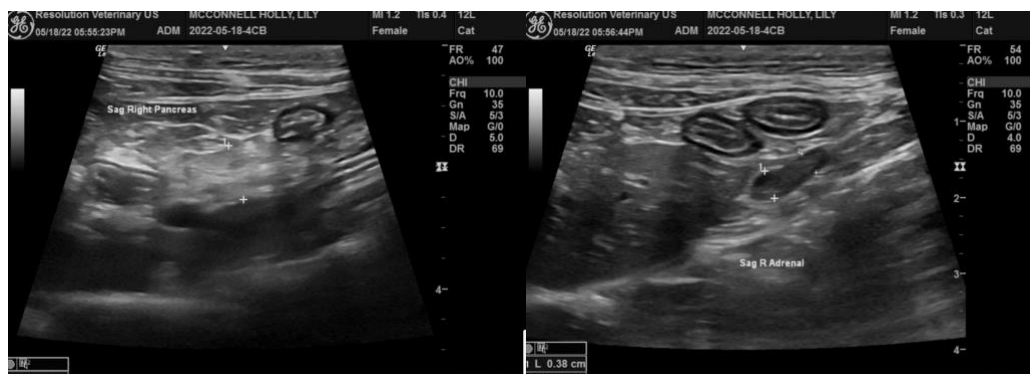
Dr. Malaguti

**INVOICE**

37724

**DATE**

5/18/22



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

[info@SonoPath.com](mailto:info@SonoPath.com)