



**DATE PRESENTING CLINICAL SIGNS**

5/24/26

**Patient History: Presenting Complaint on 05-22-2026:** Anemia. Trouble Breathing.

**PATIENT**

Ozzy Frank

**Current Medications:** Dexamethasone SP 4mg/mL Injection (Per mL) Owners Meds  
Maropitant Citrate (Cerenia) Tablets 16mg Owners Meds

Doxycycline Hyclate Tablets 50mg  
PrednisOLONE Tablets 5mg

Dexamethasone SP 4mg/mL Injection (Per mL)  
Maropitant Citrate (Cerenia) 10mg/mL Solution Injection (Per mL)

**Lab Results:** Attached.

**SPECIES**

Feline

**Date of Previous IntraPet Ultrasound:** No previous.

**Sedation:** IV Buprenex required to complete full diagnostic ultrasound.

**Stat Report:** STAT requested.

**Imaging Performed by:** Rachel Brillhart, RDMS.

**BREED**

Domestic Shorthair

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SEX**

Neutered male

**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 was noted. Ureteral papillae were normal.

**AGE**

2025

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 4.34 cm. The left kidney measured 4.0 cm.

**WEIGHT**

10.3 lbs

**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 0.54 cm. The right adrenal gland measured 0.49 cm.

**INTERPRETED BY**

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

**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 was noted.

**HOSPITAL NAME**

Animal Emergency  
Hospital

**REFERRING VET**

Dr. Rodriguez

**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.

**INVOICE**

77894

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

### ***Pancreas***

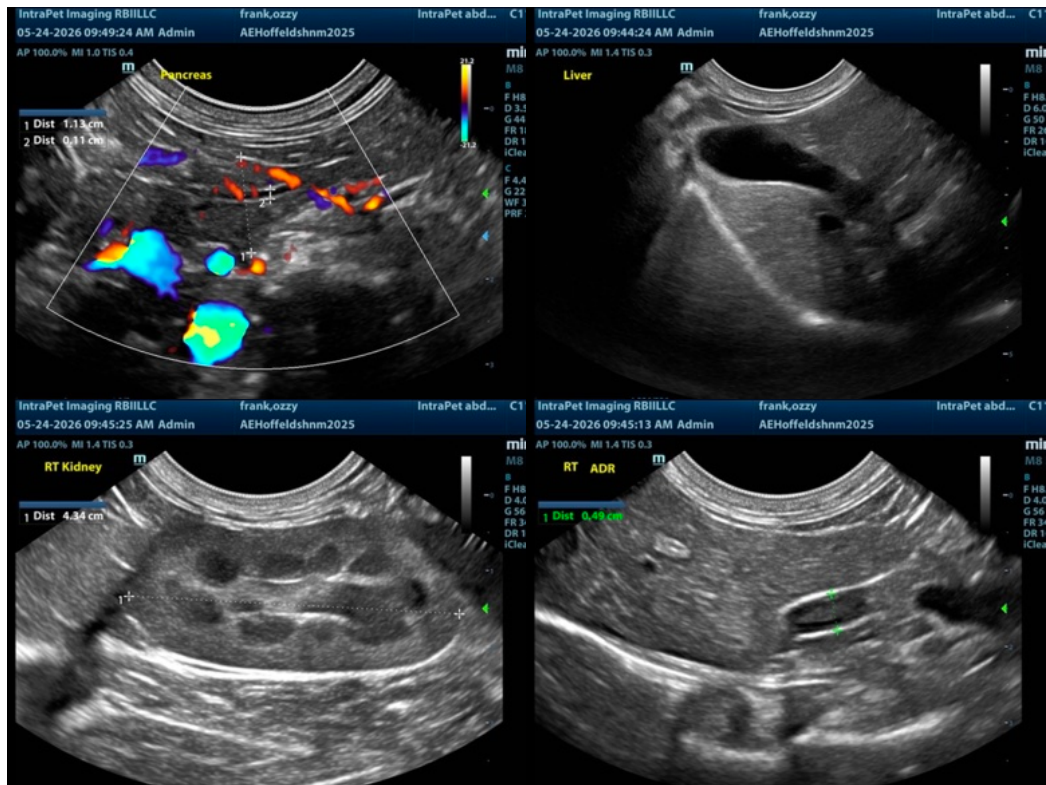
The **pancreas** was prominent and mildly hypoechoic with undulating contour and minor duct dilation measuring 0.16 cm. The pancreas measured 1.07 cm in width.

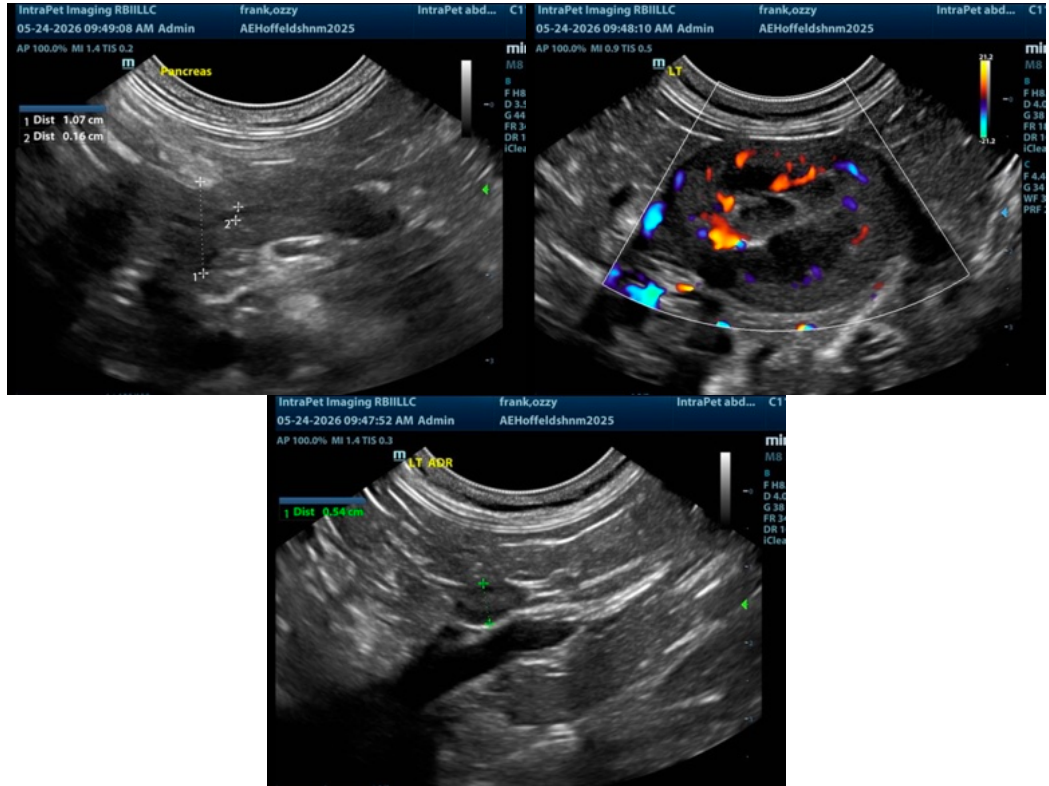
### **ULTRASONOGRAPHIC FINDINGS**

Prominent pancreas.  
Otherwise, unremarkable abdomen.

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

There was no evidence of pathology related to the anemia. CBC path review and bone marrow biopsy are indicated. Infectious disease should be considered, yet unlikely given the severity of the anemia and lack of reported elevated bilirubin.





**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 (CFM), Cert. IVUSS, CEO of SonoPath.com

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

