



PATIENT

Penny McDougal

PRESENTING CLINICAL SIGNS

History: Chronic vomiting (2-3 x monthly) Acute pancreatitis and diarrhea 5/23 - has since resolved and she is eating again
Abnormal PE/Chem/CBC/UA Results: CBC - WNL CHEM - WNL T4 - WNL fPL - abnormal 5/23

SPECIES

Feline

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 was noted. Ureteral papillae were normal.

BREED

Domestic Shorthair

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.

AGE

12 years

WEIGHT

8.4 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 0.3 cm. The right adrenal gland measured 0.37 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 was noted.

IMAGING PERFORMED BY

Dr. Gunther

HOSPITAL NAME

New Frontier Animal
Medical Center

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. Duplicated gallbladder was noted, which is a normal variant.

REFERRING VET

Dr. Gunther

INVOICE

30727

Gastrointestinal

DATE

5/25/22

Progressively shadowing hairball therapy was noted in the **stomach**. Assuming the patient was n.p.o. at the time of the sonogram. The small intestines were unremarkable. Soft stool was noted in the colon. A slight 0.8 x 0.4 cm reactive mesenteric lymph node was noted.



PATIENT

Pancreas

Penny McDougal

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.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

BREED

Hairball density in the stomach.

Domestic Shorthair

Duplicated gallbladder, not pathological.

Structurally unremarkable otherwise.

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

12 years

The hairball in the stomach should be medically manageable. Hairball irritation +/- structurally insignificant inflammatory bowel, occult food intolerance are all potentials. There is no evidence of obstruction.

WEIGHT

8.4 lbs

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REFERRING VET

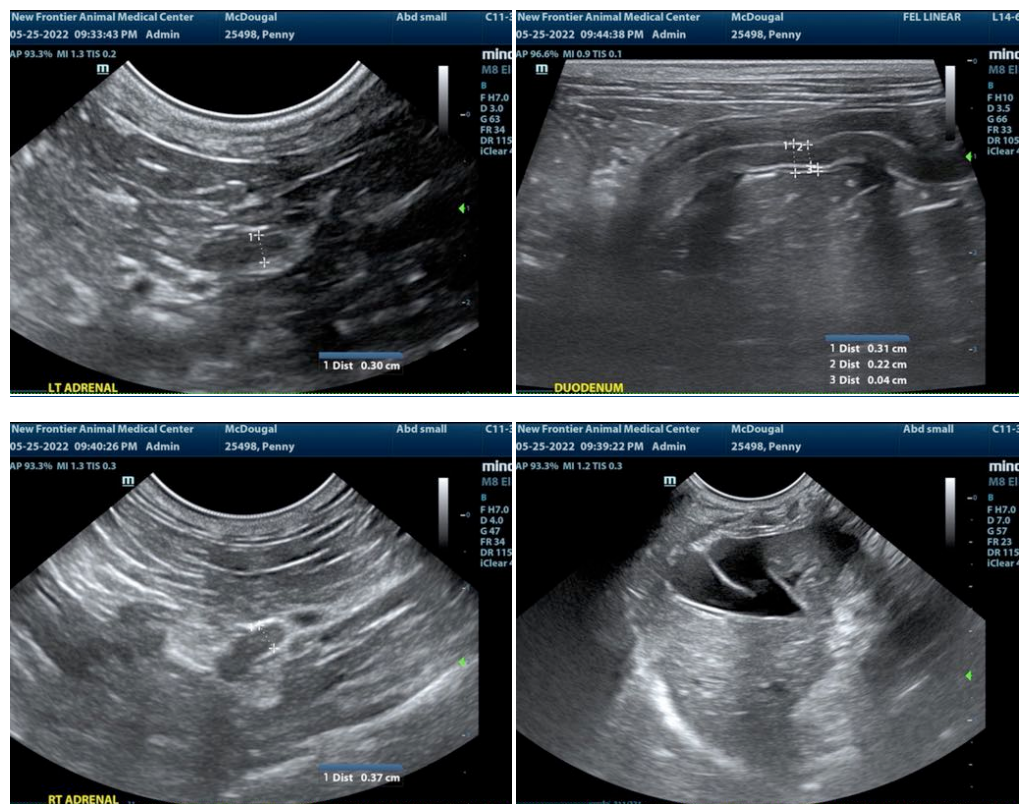
Dr. Gunther

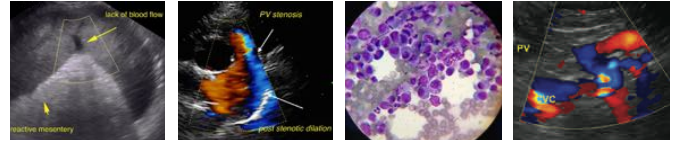
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PATIENT

Penny McDougal

SPECIES

Feline

BREED

Domestic Shorthair

SEX

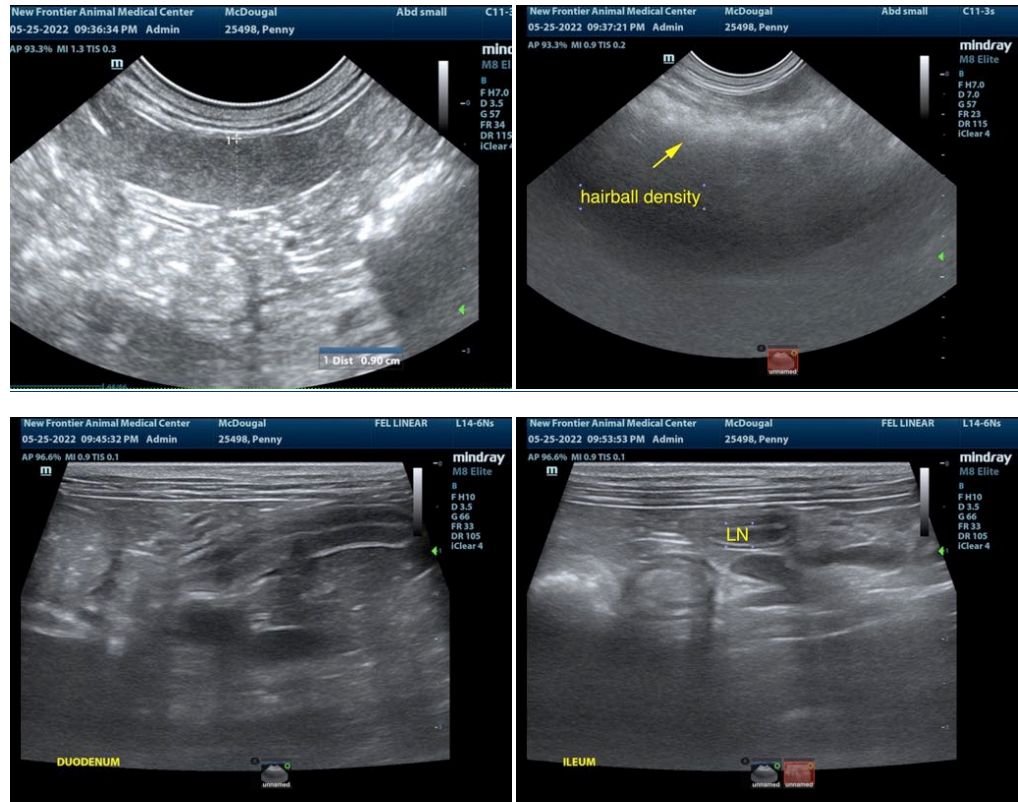
Spayed Female

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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.

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