

PATIENT PRESENTING CLINICAL SIGNS

PATIENT Yiyi Tang Shi
SPECIES Feline
BREED British Longhair
SEX Intact Female
AGE 1 Year
WEIGHT 5.09 lbs

Vomiting for two days. 3 times overnight and once yesterday. Inappetence and low energy. Suspected ingestion of a fabric string Tuesday at 10 PM. O isn't sure if she is passing stool not since Tuesday. Didn't eat as usual, just a little. No coughing or sneezing. Possible pregnancy (mating with a male cat three weeks ago). No history of eating human food, except for a small amount of ice cream. Owner is unsure if the cat is pregnant following a mating event three weeks ago.

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 left ovary was uniform measuring 0.34 cm x 0.8 cm. The uterus presented empty in this patient.

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. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.4 cm in length. The right kidney measured 3.7 cm in length. Slight pyelectasia was present.

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 0.32 cm width. The right adrenal gland measured 0.31 cm width.

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** 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

INTERPRETED BY

Eric Lindquist, DMV,
 DABVP(CFM), Cert.
 IVUSS

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Creditview-Eglington
 Animal Hospital

REFERRING VET

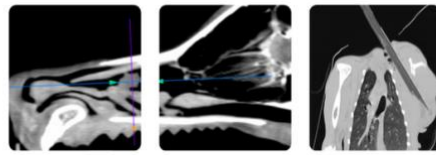
Dr. Ghorbial

INVOICE

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DATE

05/28/26



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The **colon** was filled with soft stool. Some shadowing material was noted in the pyloric outflow measuring 0.9 cm. A separate small intestinal structure was presented measuring 0.9 cm. A minor amount of stasis was present along with chyme. There is a strong potential that the structures in the intestine will transit. Some longer somewhat linear structure was also noted measuring up to 2.0 cm.

Pancreas

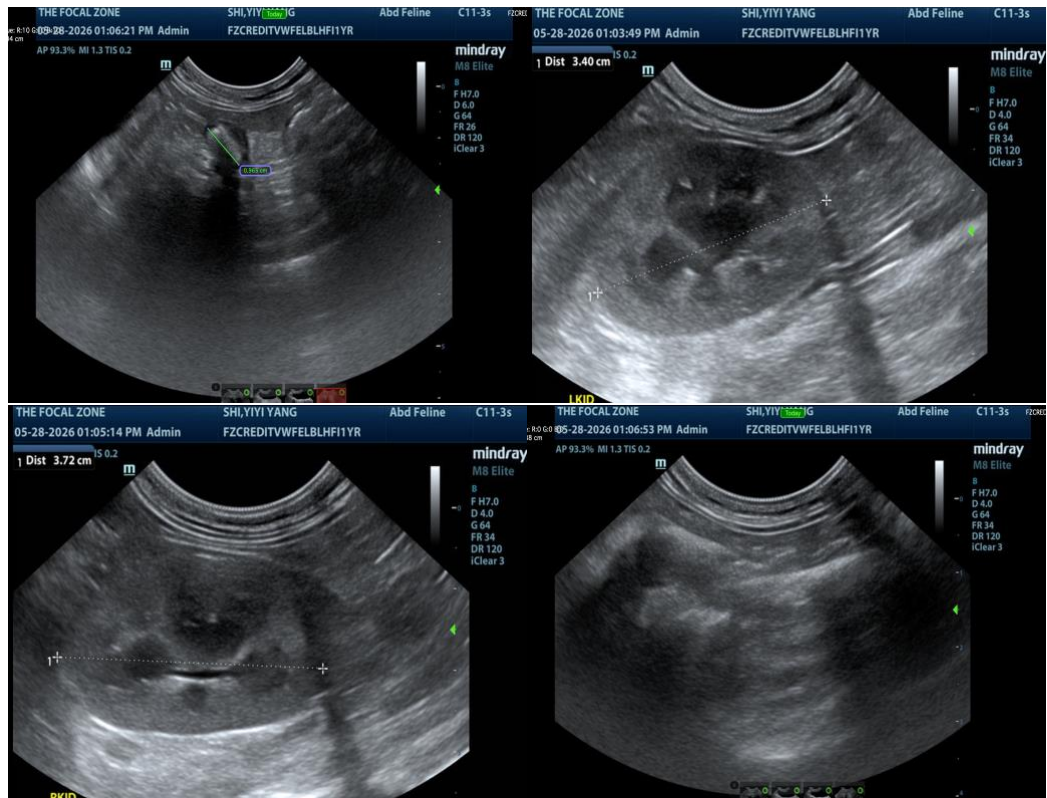
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

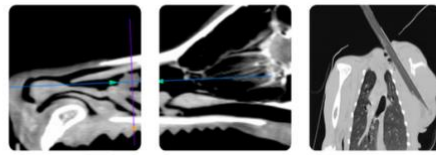
ULTRASONOGRAPHIC FINDINGS

- Minimally obstructive shadowing material in the pylorus and small intestine.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Fecal test is recommended. There was no evidence of a positive pregnancy. If the patient is able to be stabilized with medical management, recommend recheck sonogram in 24 hours. If clinical decline is continuing, then exploratory surgery is indicated, however, a full obstructive pattern is not present and appears the material is transiting. No accordion pleading nor sharp turns of the GI tract are present.





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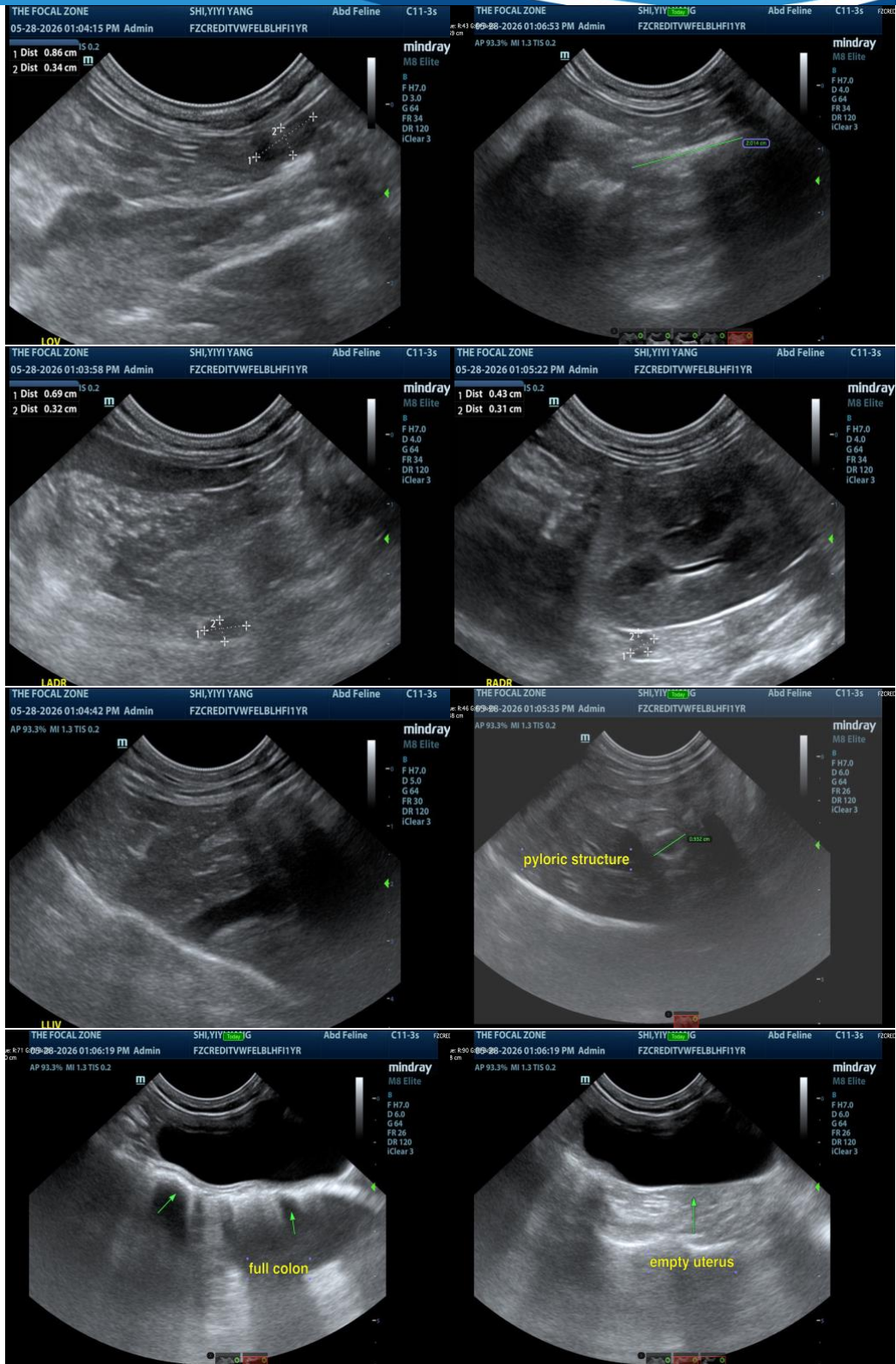
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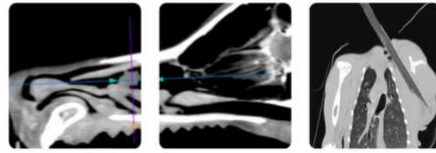
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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(CFM), Cert. IVUSS,

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