



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Rosie Lick
Presented at our hospital for O thinks flare up for pancreatitis or gastroenteritis, vomiting- today pink bile, not eating, hiding, doesn't want treats at all Previous Health Concerns: here for: 2017 URI, 2020 pancreatitis, 2020- URI, 2021- pancreatitis- chronic, 2021- gastroenteritis Any changes in their environment: major construction in house- ended about week and a half ago/ tree work done yesterday
SPECIES Abnormal PE/Chem/CBC/UA Results: Abdominal: Tender on palpation Liver panel - tbili (0.6) EPOC - pO2: 189.9 H; O2SAT: 99.6 H; Ca++: 1.18 L; BE (ecf): -8.1
Feline

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

DSH 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.

SEX

Spayed Female

AGE

4 Years

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 left kidney measured 3.7 cm. The right kidney measured 4.04 cm.

WEIGHT

4.8 kg

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

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.

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

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. No evidence of post-hepatic obstruction.

REFERRING VET

Dr. Moser

Gastrointestinal

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropey" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.

INVOICE

38587

DATE

6/10/22



PATIENT

Pancreas

Rosie Lick

The **pancreas** was heterogeneous with irregular contour and areas of remodeling. Minor areas of enhanced mesentery noted. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas. The right limb revealed a 1.0 cm x 2.0 cm region of hypoechoic parenchyma and enhanced surrounding mesentery, suggestive for focal pancreatitis. May be discovered with pain sollicitation upon the right subxiphoid digital palpation.

SPECIES

Feline

BREED

DSH

- Intestinal thickening
- Right limb pancreatitis (chronic active form)

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Pain management, broad-spectrum antibiotics, fluid support recommended. No overt evidence of neoplasia. Hospitalization and treatment recommended with recheck sonogram prior to discharge.

AGE

4 Years

WEIGHT

4.8 kg

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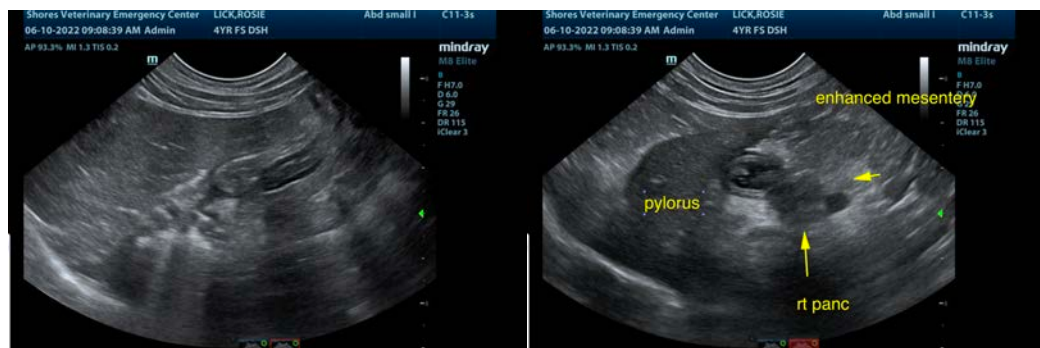
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PATIENT

Rosie Lick

SPECIES

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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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