

**DATE**

6/13/23

**PRESENTING CLINICAL SIGNS**

Has been losing weight for a few months. Last year was 12 lbs, 1-2 months ago at wellness visit was 10 lbs. Went through a period where she was uncharacteristically voracious. now she has stopped eating at all, last meal was Saturday morning. No history of other concerns, no other illness. Has been acting fine until the past few days. Has intermittently vomited or had diarrhea in the past. Blood work from last wellness visit in 2022 was normal per owner.

**PATIENT**

Fiona Mulig

Current Medications: Potassium Chloride, Gabapentin, Mirtazapine, Humulin R, Cerenia.

Lab Results: See attached.

**SPECIES**

Feline

Radiographs: Mild constipation, gas distended colon, large urinary bladder.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**BREED**

Norwegian Forest

Imaging Performed By: Rachel Brillhart, RDMS.

**SEX**

Spayed female

**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.

**AGE****WEIGHT**

10/5/10

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 4.07 cm with slight pyelectasia that measured 0.27 cm. The right kidney measured 4.17 with pyelectasia that measured 0.65 cm.

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**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.

**HOSPITAL NAME**Animal Emergency  
Hospital**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.

**REFERRING VET**

Dr. Goessling

**Liver**

The **liver** revealed mild coarse architecture and mild enlargement. Minor increased portal markings were noted. The gallbladder revealed a minor amount of debris. The common bile duct was distended and tortuous measuring 0.23 cm. The cystic duct was tortuous without overt obstruction. This is likely an age related change.

**INVOICE**

44714

**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 walls

measured 0.24 cm. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. The mesenteric lymph nodes were reactive and measured up to 1.0 x 0.4 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.

### ***Free Abdomen***

A trace amount of free fluid was noted.

### **ULTRASONOGRAPHIC FINDINGS**

Non-specific, mild hepatomegaly with tortuous cystic duct. Likely an age related change. Early infiltrative disease of the liver is possible.

Gallbladder debris.

Distended and tortuous common bile duct.

Minor intestinal thickening without neoplasia criteria.

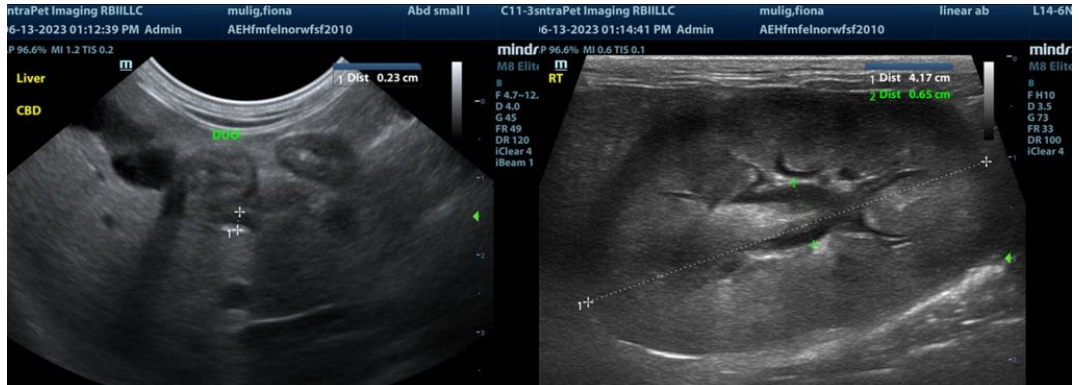
Free fluid in abdomen.

Pyelectasia.

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

Hepatic FNA is warranted for further definition, yet this is unlikely to be the major clinical issue as liver enzymes are not reported to be elevated.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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