



**PATIENT**

Honey Bear Cieslik

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed female

**AGE**

13 years

**WEIGHT**

17 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Rosen

**HOSPITAL NAME**

South Bellmore VG

**REFERRING VET**

Dr. Rosen

**INVOICE**

44755

**DATE**

6/14/23

**PRESENTING CLINICAL SIGNS**

History: presented 4/25 for PU/PD, BW included, limping also so we gave solensia which has helped a lot, stable until earlier this week became lethargic, PU/PD again, not acting herself and decreased appetite, presented 6/12 (did not repeat full BW at that time due to having just done it) spot BG was 346 and urine showed glucose ++, started IVF cerenia, convenia, and 1U R insulin IM, sent out urine culture (neg), BG later in the evening was only 200 so did not start any long acting insulin, rechecked BG 6/13 in the morning and it was 191, did not give any insulin and BG stayed in the mid 200s, 6/14 BG this morning was 130 and has also stayed in a normal to mildly elevated state, no vomiting or diarrhea, patient did start eating some today, have continued with cerenia daily IV and added mirtaz TD  
Abnormal PE/Chem/CBC/UA Results: inconsistent hyperglycemia, no ketones elevated GGT normal TPR hepatomegaly on radiographs  
Chronic bronchial changes and large amount of abdominal fat on radiographs

**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.

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 revealed a cortical infarct at the caudal pole with slight pyelectasia and dystrophic changes. The left kidney measured 3.91 cm. The right kidney revealed cortical infarcts and non-obstructive mineralization. The right kidney measured 3.6 cm.

**Adrenal Glands**

The right **adrenal gland** was 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 right adrenal gland measured 0.4 cm. The region of the left adrenal gland was 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 was noted.



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**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**

Minor retention of ingesta or hair type density was noted in the **stomach**. 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 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.

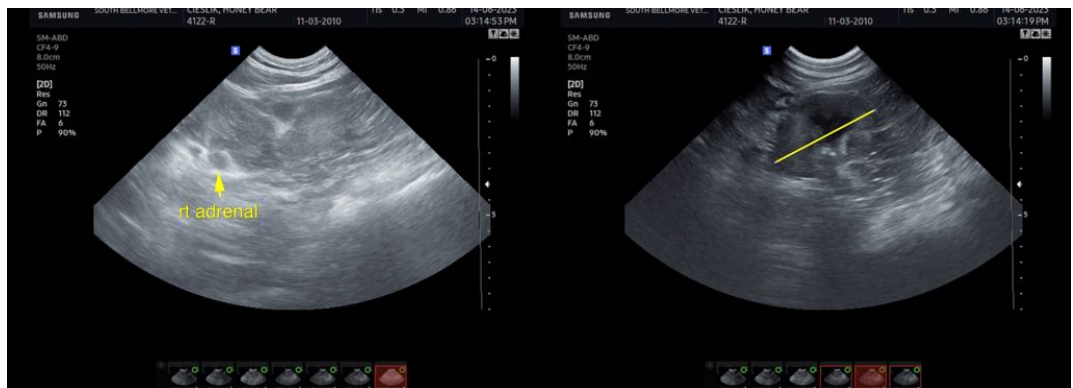
**ULTRASONOGRAPHIC FINDINGS**

Renal infarcts and slight mineralization of the right kidney.

Otherwise, benign abdomen.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Full urinary work-up is warranted to assess for any evidence of UTI that may be playing a role in the diabetic dysregulation. There was no other evidence of pathology.





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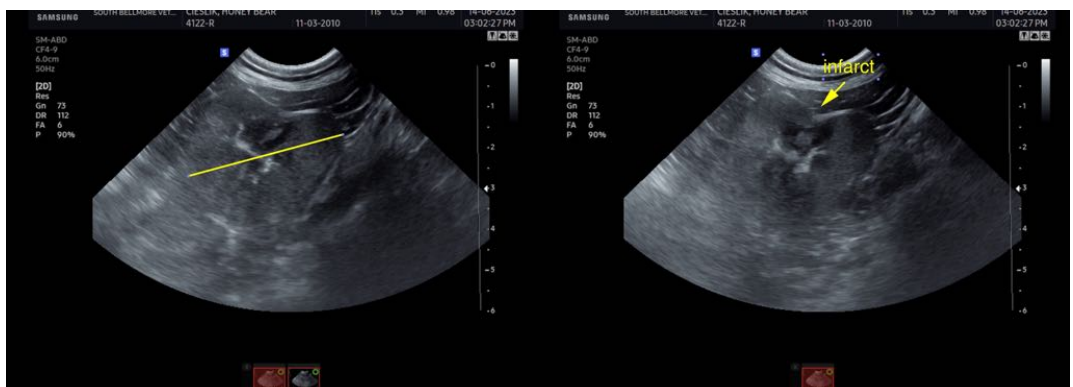
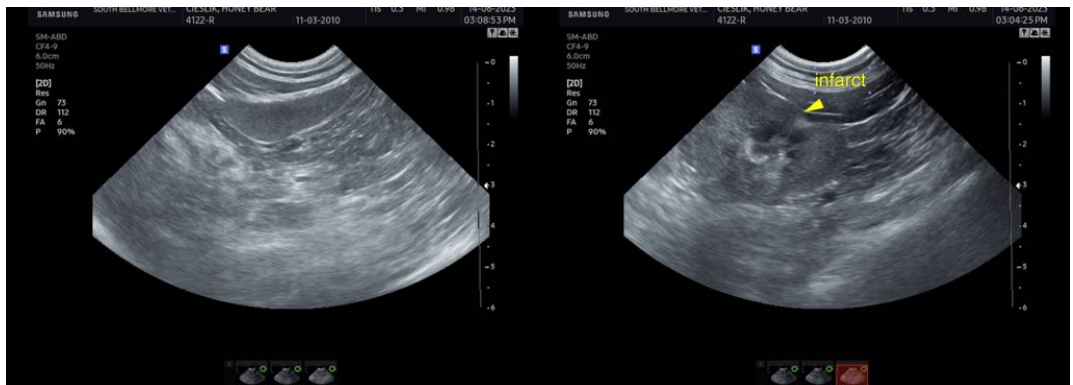
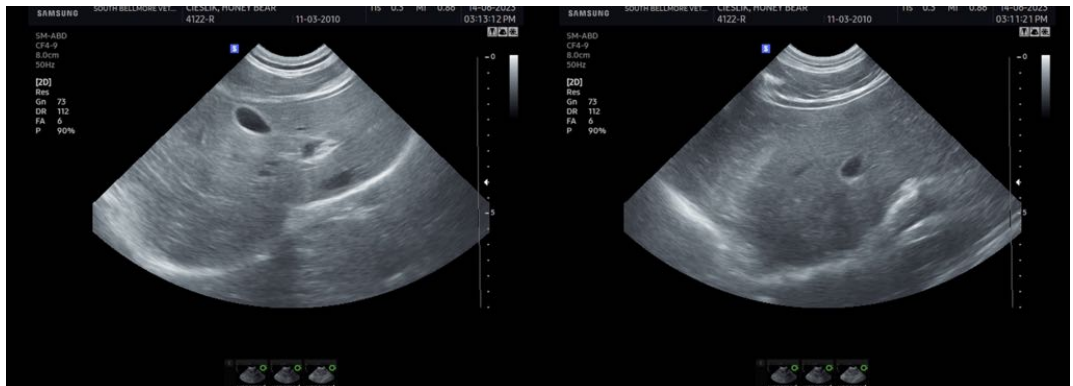
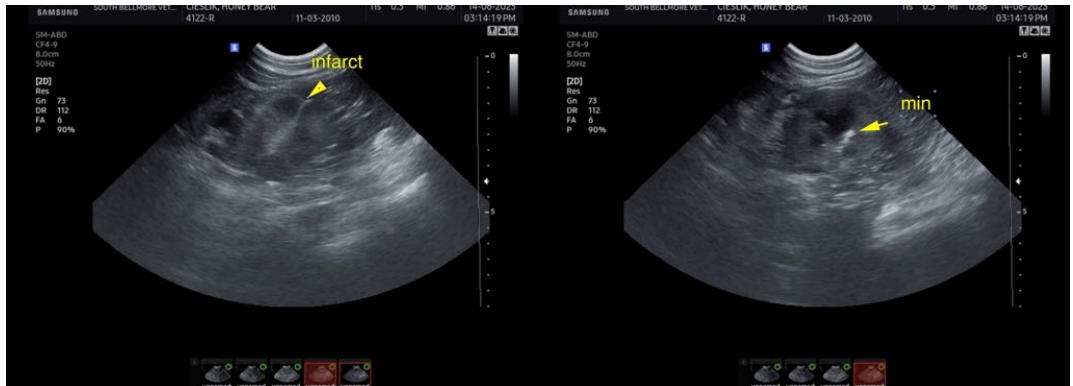
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com