



**PATIENT PRESENTING CLINICAL SIGNS**

Simba Rounds History: ADR for 1 day, V+ starting last night. Indoor/outdoor. Neighbor grows lilies per O.  
 Abnormal PE/Chem/CBC/UA Results: CBC: Neu 19.06 Chem10: Glu 213 CREA 11, BUN 95 Blood gas: Bicarb 13.1, Ca 0.65, Crea 7.21, BUN 106, Glu 226, Na 145, BEecf -13.7 U/A: USG 1.011, Protein trace, Glu 300, No crystals seen. Ethylene glycol negative

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Domestic Shorthair

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.

**SEX**

Neutered male

**AGE**

2 years

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Hyperechoic medullary rim sign was noted. The left kidney measured 3.0 cm. Blood flow to the kidneys was subnormal. The right kidney measured 3.5 cm.

**WEIGHT**

10.4 lbs

**INTERPRETED BY**

**Adrenal Glands**

Eric Lindquist, DMV  
 DABVP, Cert. IVUSS

The **adrenal glands** were not visualized.

**IMAGING PERFORMED BY**

**Spleen**

Dr. Beachy

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.

**HOSPITAL NAME**

Willamette VH

**REFERRING VET**

**Liver**

Dr. Beachy

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.

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**PATIENT**

**Gastrointestinal**

Simba Rounds

A minor amount of fluid **gastric** lumen was noted. The intestines were free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. 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.

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**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.

**SEX**

Neutered male

**ULTRASONOGRAPHIC FINDINGS**

Chronic interstitial nephrosis pattern. Primary renal dysplasia is possible, yet chronic infectious or toxin insult is suspected.

**AGE**

2 years

Fluid filled gastric lumen was noted.

**WEIGHT**

10.4 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Toxin or chronic infectious insult is suspected, yet there is a minor potential for dry form FIP. Blood pressure measurements and 72 hour fluid protocol and renal biopsy is all indicated. The long term prognosis is guarded.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Beachy

**HOSPITAL NAME**

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Dr. Beachy

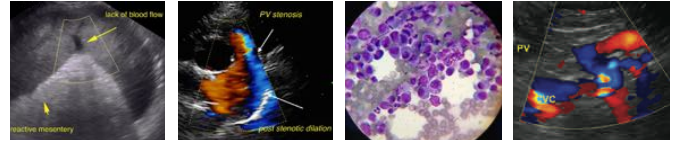
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**PATIENT**

Simba Rounds

**SPECIES**

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Domestic Shorthair

**SEX**

Neutered male

**AGE**

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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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