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|---|---|
| <b>PATIENT</b>                            | <b>PRESENTING CLINICAL SIGNS</b>  |
| Buster Sullivan                           | History: renal dysfunction vs pyelonephritis  |
| <b>SPECIES</b>                            | <b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>  |
| Feline                                    | <b>Urinary System</b>   |
| <b>BREED</b>                              | The <b>urinary bladder</b> , 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.  |
| Domestic Shorthair                        |   |
| <b>SEX</b>                                | The <b>kidneys</b> were irregular in contour with some loss of corticomedullary definition. The right kidney revealed pyelectasia and ill-defined pelvic fat. Enhanced pericapsular renal fat was noted. The right kidney measured 5.26 cm. The left kidney measured 6.0 cm.  |
| Neutered male                             |   |
| <b>AGE</b>                                | <b>Adrenal Glands</b>   |
| 2016                                      | Both <b>adrenal glands</b> 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.   |
| <b>WEIGHT</b>                             |   |
| <b>INTERPRETED BY</b>                     | <b>Spleen</b>   |
| Eric Lindquist, DMV<br>DABVP, Cert. IVUSS | The <b>spleen</b> 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. |
| <b>IMAGING PERFORMED BY</b>               |   |
| Jenn                                      | <b>Liver</b>  |
| <b>HOSPITAL NAME</b>                      | The <b>liver</b> was hypoechoic and irregular. 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.  |
| Rockaway AH                               |   |
| <b>REFERRING VET</b>                      | <b>Gastrointestinal</b>   |
| Dr. Maniar                                | Examination of the <b>gastrointestinal tract</b> revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Variable small intestinal thickening was noted, yet empty. . Free fluid was noted in the abdomen.  |
| <b>INVOICE</b>                            |   |
| 31198                                     |   |
| <b>DATE</b>                               |   |
| 6/22/22                                   |   |



**PATIENT**

**Pancreas**

Buster Sullivan

The **pancreas** was obscured by the enhanced mesentery.

**SPECIES**

**Free Abdomen**

Feline

Enhanced mesentery was noted.

**BREED**

Domestic Shorthair

**ULTRASONOGRAPHIC FINDINGS**

Swollen, irregular kidneys. Pyelonephritis versus round cell neoplasia.

**SEX**

Free fluid and enhanced mesentery.

Neutered male

Minor intestinal thickening.

**AGE**

2016

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a strong for underlying mastocytosis or similar. Abdominocentesis and cytospin of the free fluid is recommended for further definition. The prognosis is guarded. 25-gauge FNA of either kidney is warranted to assess for infiltrative disease as well as full urinary work-up.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

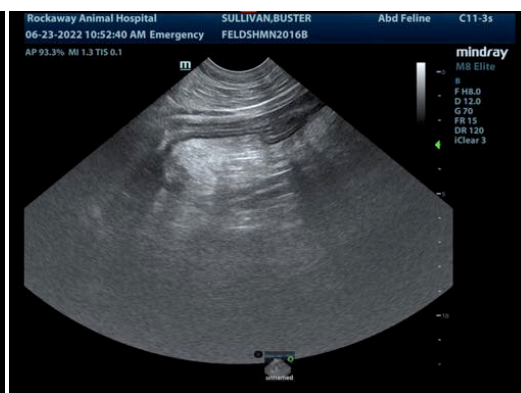
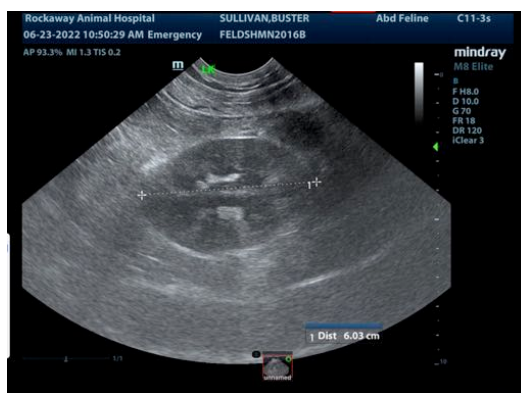
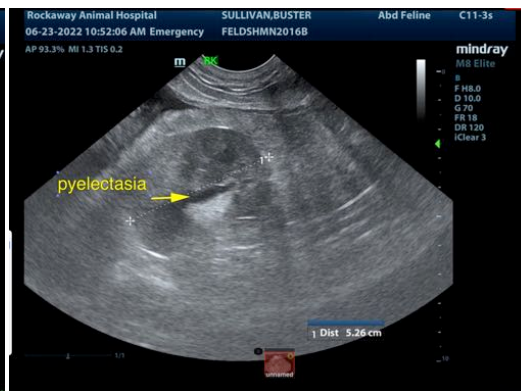
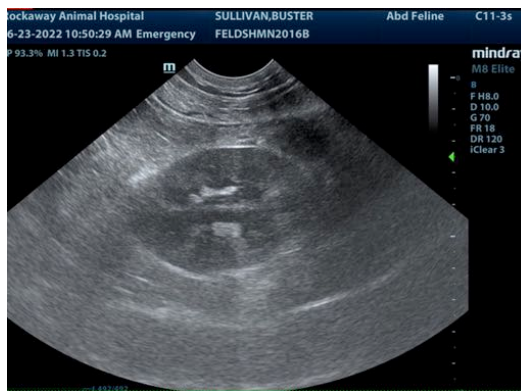
Dr. Maniar

**INVOICE**

31198

**DATE**

6/22/22





**PATIENT**

Buster Sullivan

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.

**SPECIES**

Feline

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.

**BREED**

Domestic Shorthair

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

**SEX**

Neutered male

**AGE**

2016

**WEIGHT**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

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