



PATIENT

Bebe Moyer

SPECIES

Feline

BREED

Siamese

SEX

Spayed Female

AGE

12 Years

WEIGHT

7.4 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Chrissy Krell, DVM

HOSPITAL NAME

Paws & Prairie AC

REFERRING VET

Chrissy Krell, DVM

INVOICE

15886

DATE

6/3/22

PRESENTING CLINICAL SIGNS

History: Bebe began gagging and vomiting last night, producing mucous and clear fluid. She had been outside yesterday (generally an indoor only cat that escapes sometimes). She has refused eating and drinking. Owner concerned she ate something or had a oropharyngeal foreign body. No previous issues with this condition.

Abnormal PE/Chem/CBC/UA Results: PE: relatively unremarkable PE, mild weight loss of 0.2lbs. Video of cat last night does show notable gagging with terminal retch. CBC - slight monocytosis, ownl Chem - stress hyperglycemia, unremarkable otherwise. Oral exam - noted everted laryngeal sacculles, mucous, no FB or mass noted Thoracic Radiographs - dilated esophagus, no evidence of obstruction or mass.

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 were 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 right kidney measured 3.7 cm. The left kidney measured 3.1 cm.

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. The right adrenal gland measured 0.44 cm. The left adrenal gland measured 0.35 cm.

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.

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



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Gas accumulation was noted in the **stomach**, obscured some visibility. The small intestine and colon were unremarkable.

Bebe Moyer

Pancreas

SPECIES

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.

Feline

BREED

ULTRASONOGRAPHIC FINDINGS

Siamese

- Gas accumulation noted in the stomach
- Normal abdomen

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

No structural evidence of disease. Supportive care, diet change, antiparasitic protocol and GI protectants would all be indicated given the patient history. If clinical signs persist, endoscopy indicated.

AGE

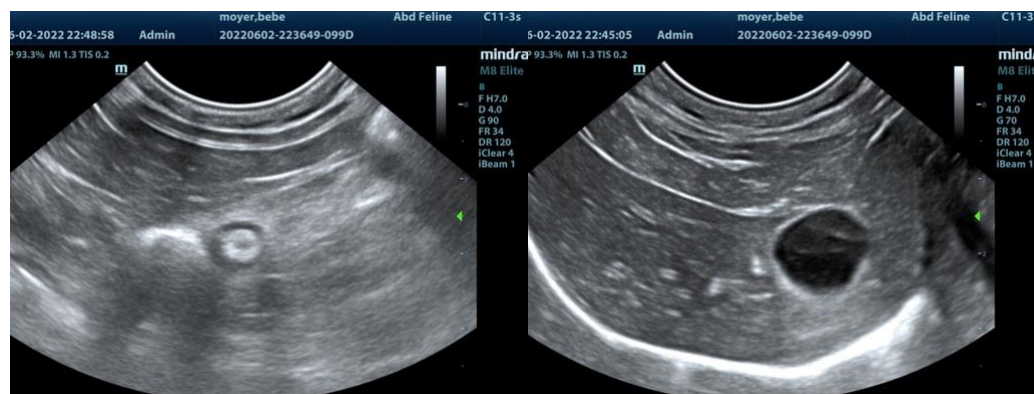
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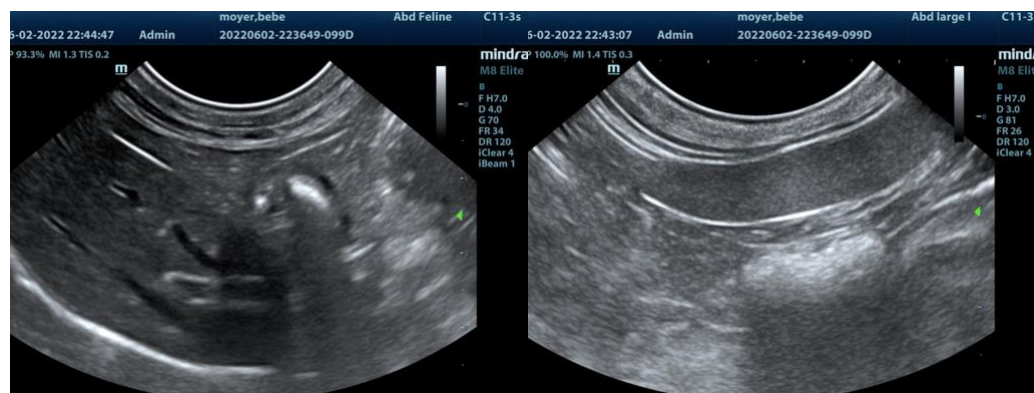
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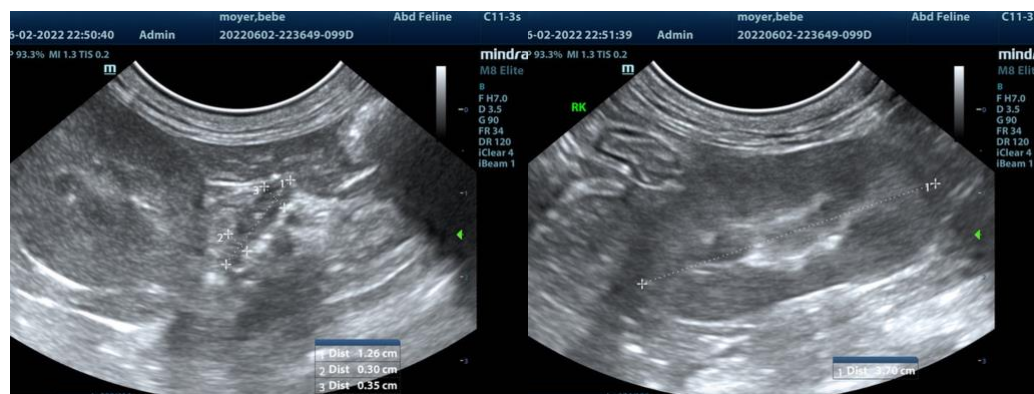
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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