



PATIENT

Pepito Pinilla

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11

WEIGHT

7.4

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Stockmal

INVOICE

23347

DATE

7/14/23

PRESENTING CLINICAL SIGNS

History: Seems to have lost weight throughout the year. Drinking more and urinating more (has always been a good drinker). Appears hungry but doesn't always eat. Throws up fluid every other day, sometimes has food in it. Had not been to a vet since a kitten. May be having loose stool (multi-cat house).

Abnormal PE/Chem/CBC/UA Results: Creat 1.7, BUN 38, Neu 14.5k, USG 1.028

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 moderate degenerative changes with minor subtle hyperechoic medullary rim sign and increased cortical echogenicity consistent with interstitial nephrosis. The left kidney measured 4.2 cm. Blood flow to the kidneys was subnormal. The right kidney measured 4.4 cm. Slight renal calculi were noted in the right renal pelvis, nonobstructive at the time of the sonogram. Trace pyelectasia was noted in the right kidney.

Adrenal Glands

The regions of the **adrenal glands** revealed no evident pathology.

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

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small intestine demonstrated normal luminal chyme. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted. Soft stool was noted in the colon.

Pancreas



PATIENT

Pepito Pinilla

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11

WEIGHT

7.4

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Stockmal

INVOICE

23347

DATE

7/14/23

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some mild parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

Free Abdomen

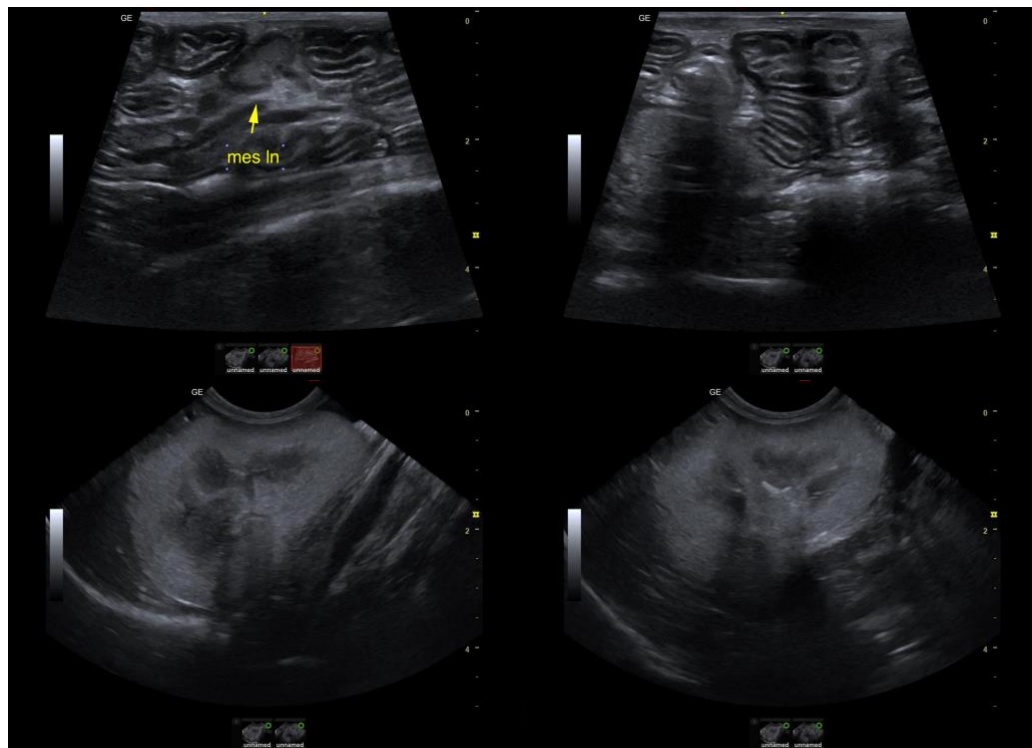
Slight amounts of **free fluid** were noted in the abdomen, possibly owing to cachexia. No obvious neoplasia was noted. The mesenteric lymph nodes were slightly enlarged, measuring 1.0 cm x 0.5 cm, reactive.

ULTRASONOGRAPHIC FINDINGS

- Geriatric abdomen with chronic interstitial nephrosis pattern
- Minor free fluid in the abdomen is a concern for cachexia or occult neoplasia yet no neoplastic criteria is met by any of the organ systems.
- Minor reactive mesenteric lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered. 73hr IV fluid protocol to treat the azotemia is indicated. The kidneys appear near end stage. Prognosis long term is guarded.





PATIENT

Pepito Pinilla

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11

WEIGHT

7.4

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

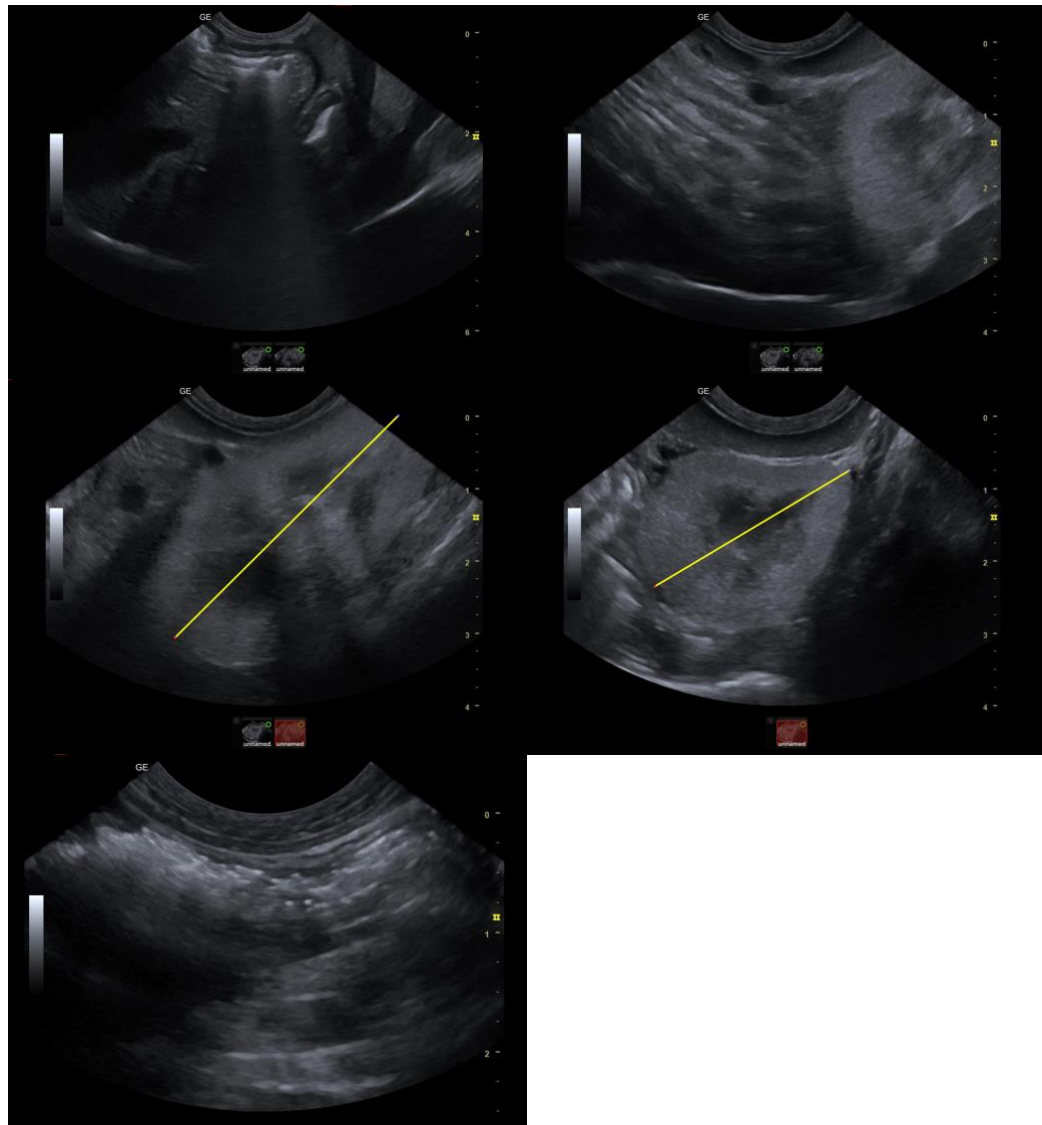
Stockmal

INVOICE

23347

DATE

7/14/23



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