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Clinical Sonography & Telectology

EDUCATIONAL TELECONSULTATION SERVICES™

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**DATE**

7/26/22

**PATIENT**

Bullet Hutson

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

3/24/13

**WEIGHT**

17 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Stephanie Pearce  
RDMS, RVT

**HOSPITAL NAME**

Perry Hall AH

**REFERRING VET**

Dr. Miller

**INVOICE**

39829

**PRESENTING CLINICAL SIGNS**

Patient presents for evaluation of chronic GI concerns and vomiting.

Current Medications: None currently.  
Lab Results: WNL. USG 1.058  
Radiographs: WNL.  
Date of Previous IntraPet Ultrasound: No previous.  
Sedation: Dexdomitor/Torbugesic.  
Stat Report: Not requested.

**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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.6 cm. The right kidney measured 3.76 cm.

**Adrenal Glands**

The **adrenal glands** were uniform, yet bilaterally swollen and hypoechoic. This is most consistent with stress-induced hyperplasia. The right adrenal gland measured 0.52 cm. The left adrenal gland measured 0.66 cm.

**Spleen**

The **spleen** presented subtle micronodular changes. Normal size at 9.0 mm. Likely reactive state.

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder was duplicated, which is a normal variant.

**Gastrointestinal**

Minor **gastric** fluid present. Slight pyloric thickening present with anechoic lumen. The small intestine and colon were unremarkable. Slight epigastric lymph node enlargement noted at 4.0 mm.

**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.

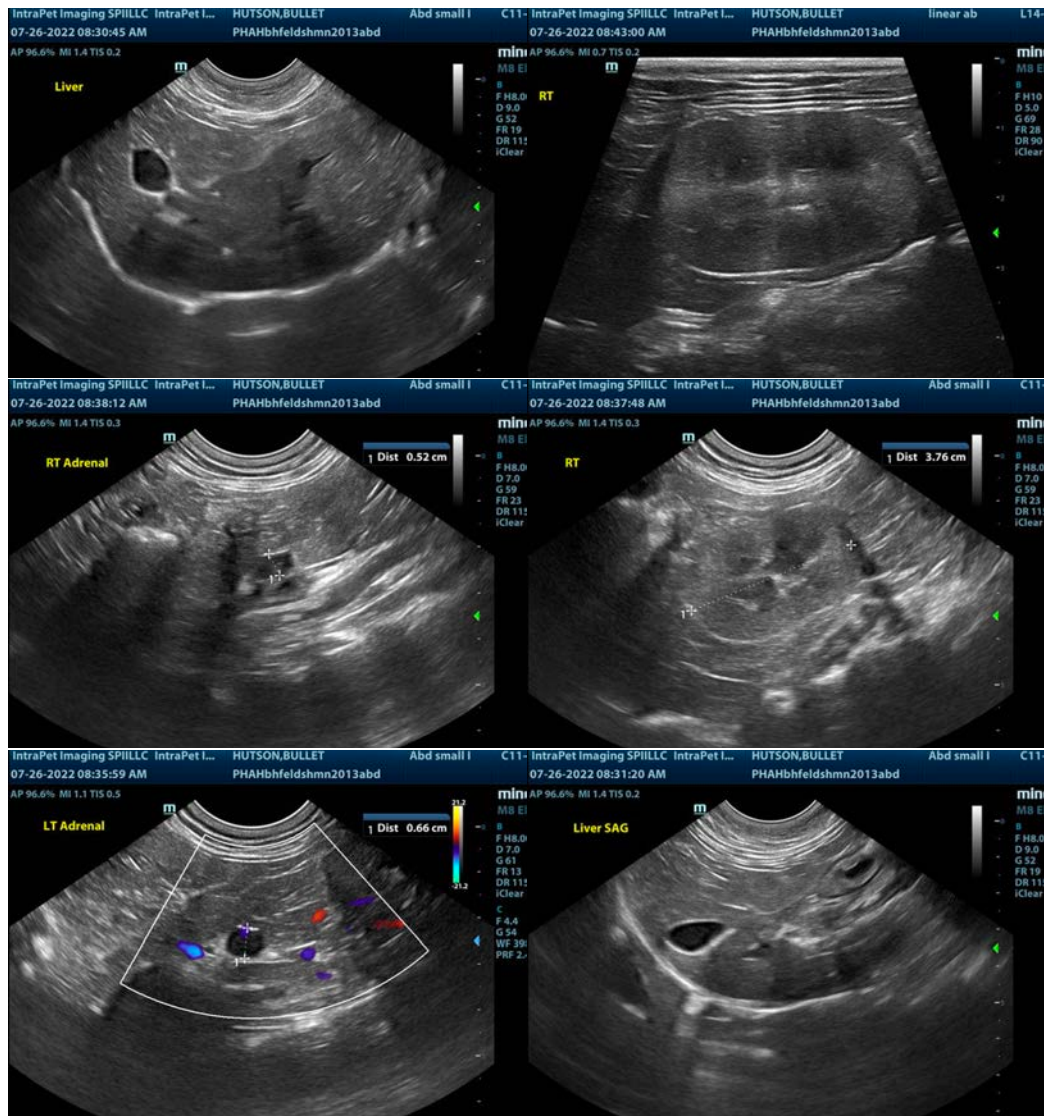
**ULTRASONOGRAPHIC FINDINGS**

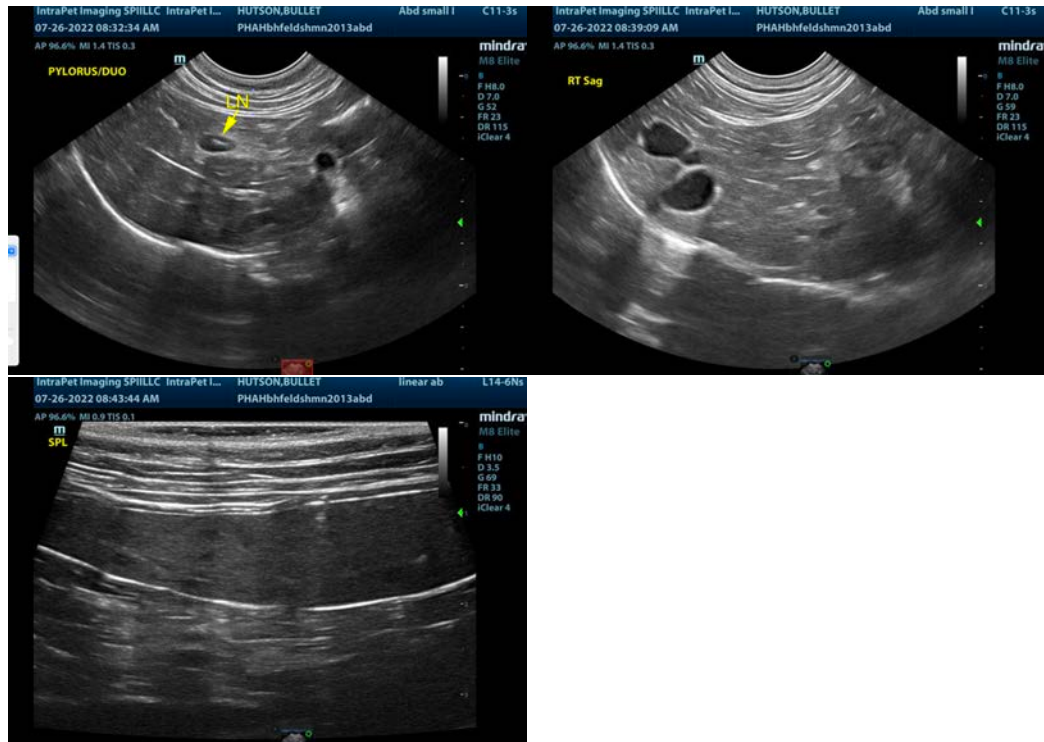
- Minor gastritis pattern with slight reactive epigastric lymph node
- Micronodular spleen
- Stressed adrenal glands

- Age related renal and hepatic changes
- Duplicated gallbladder (normal variant)

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If weight loss is an issue, FNA of the spleen would be indicated. Dietary intolerance, structurally benign inflammatory bowel, occult parasitism all possible. Geriatric hydrolyzed diet and broad-spectrum anti-parasitic protocol would be recommended in this patient as well as fecal test.





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  
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