



PATIENT PRESENTING CLINICAL SIGNS

Maple Wright

History: Chronic history of bloat after eating. Prior to adoption by owner, Maple had an intestinal entrapment resulting in resection of bowel (3 years ago). Recently, bloat following eating has increased in severity and frequency in addition to recent weight loss despite a good appetite at home.

SPECIES

Abnormal PE/Chem/CBC/UA Results: WBC 20.5 (3.9 - 19.0 K/ μ L) BUN 46 (16 - 37 mg/dL) Sodium 159 (147 - 157 mmol/L) Potassium 3.3 (3.7 - 5.2 mmol/L) Na: K Ratio 48

Feline

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Persian

Urinary System

SEX

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.

Spayed female

AGE

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. Polycystic cortical changes were noted. The left kidney measured 3.7 cm. The right kidney measured 3.85 cm. Blood flow to the kidneys appeared subnormal on power Doppler assessment.

5 years

WEIGHT

4.8 lbs

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 0.22 cm. The left adrenal gland measured 0.26 cm.

IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Spleen

Willow Run VC

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.

REFERRING VET

Dr. Brubaker

INVOICE

Liver

32017

The **liver** revealed multi-focal, cystic changes with coarse architecture and increased portal markings and remodeling. The largest cyst measured 3.0 cm. 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.

DATE

7/27/22



PATIENT

Maple Wright

Gastrointestinal

The **gastrointestinal tract** revealed over distension. Hyperperistalsis was noted. A large amount of gastrointestinal artifact was noted in this patient.

SPECIES

Feline

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.

BREED

Persian

SEX

Spayed female

Free Abdomen

Free fluid was noted in the abdomen.

AGE

5 years

ULTRASONOGRAPHIC FINDINGS

Gastroenteritis pattern.

WEIGHT

4.8 lbs

Undefined free fluid.

Polycystic kidneys and polycystic liver.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full thickness gastrointestinal biopsies would be ideal in this patient. There is no overt evidence of neoplasia; however, lymphomatosis, carcinomatosis or similar cannot be completely ruled out. Maldigestion panel is also indicated. The prognosis is guarded. Abdominocentesis of the free fluid and cytospin is indicated. Drainage of the large hepatic cyst can also be considered from a palliative perspective.

IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

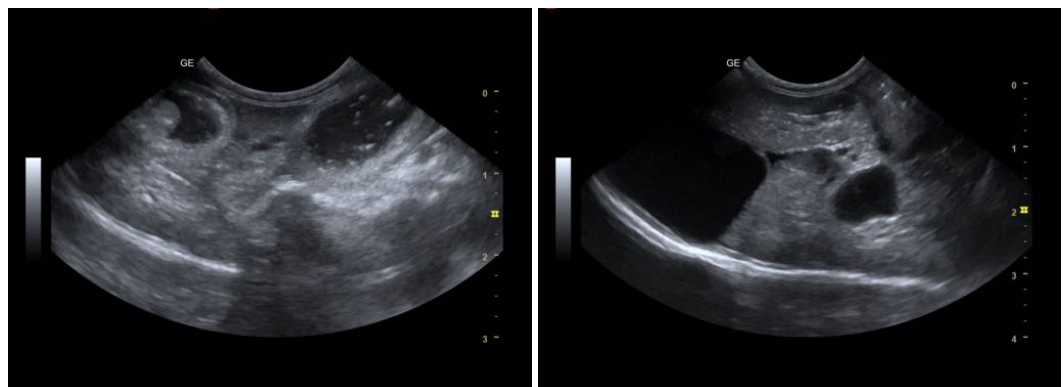
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PATIENT

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SPECIES

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Persian

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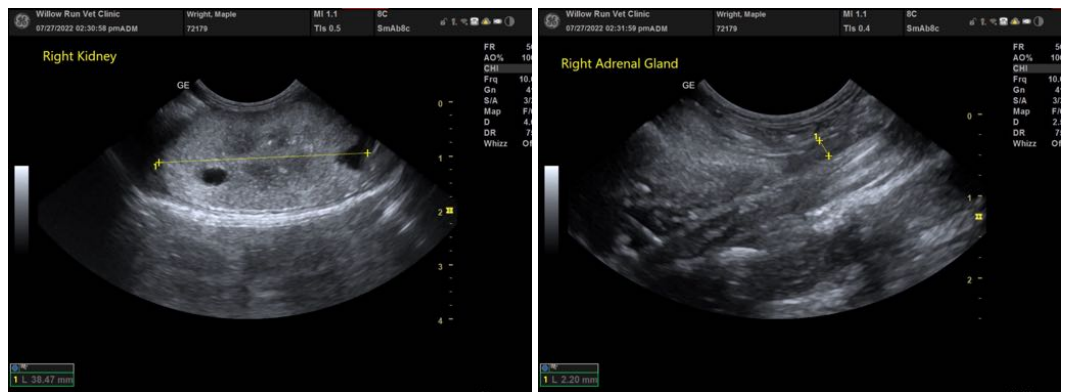
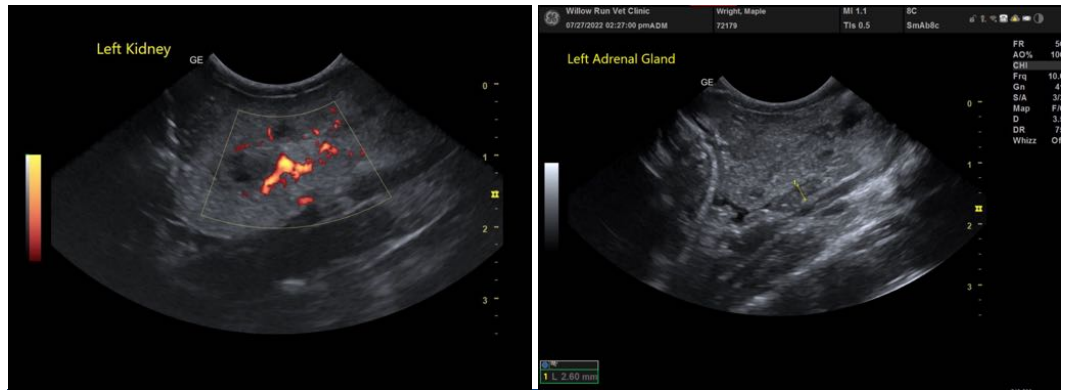
Spayed female

AGE

5 years

WEIGHT

4.8 lbs



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IMAGING PERFORMED BY

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HOSPITAL NAME

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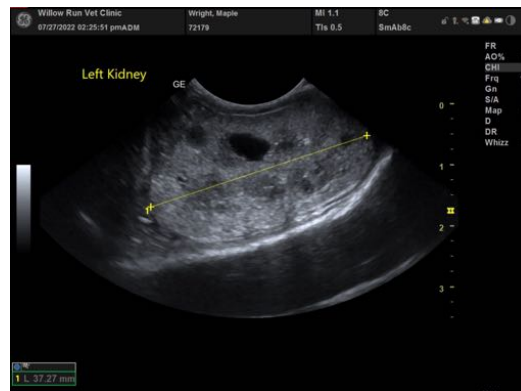
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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