



**PATIENT PRESENTING CLINICAL SIGNS**

Bibi Cross History: liquid diarrhea , consumed exotic angel plant

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Feline Urinary System**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

9 Months

**WEIGHT**

6.7

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

23168

**DATE**

7/3/23

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 left kidney measured 3.54 cm. The right kidney measured 3.68 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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

**Spleen**

The **spleen** presented slight scalloping contour with subtle micronodular changes. The spleen was mildly enlarged, measuring 1.1 cm. If any weight loss is an issue, then FNA is indicted.

**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. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. The gallbladder was slightly edematous and mildly thickened.

**Gastrointestinal**

The **gastrointestinal tract** revealed soft gastric material, consistent with ingesta. Minor intestinal wall thickening was noted. Transit of chyme appeared to be normal. Soft stool was noted in the colon.

**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.

**Free Abdomen**

The mesenteric **lymph node** (up to 1.0 cm x 0.5 cm) presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia.



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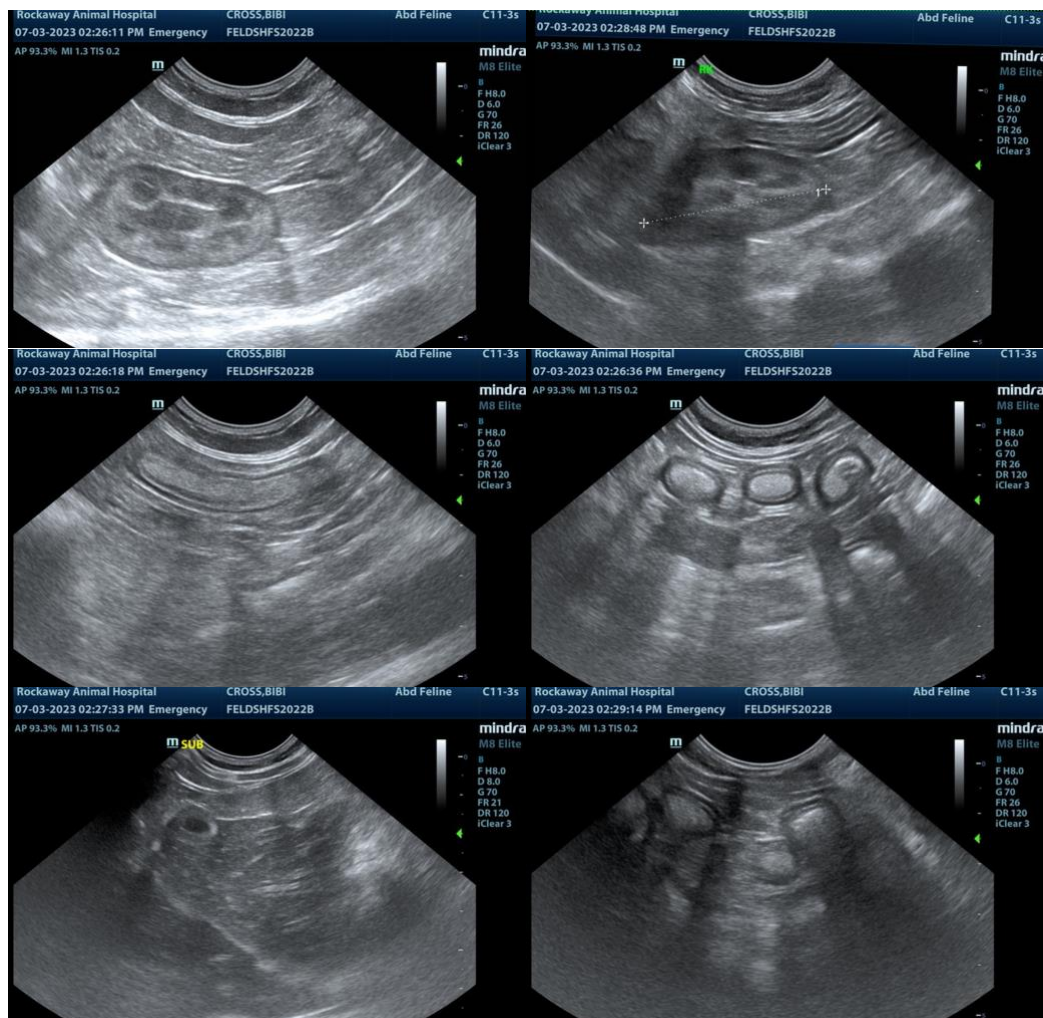
Dr. Maniar

**ULTRASONOGRAPHIC FINDINGS**

- Minor intestinal thickening
- Full GI tract, consistent with postprandial presentation
- Slight scalloping contour to the spleen with subtle micronodular changes- reactive spleen vs emerging round cell neoplasia or FIP are all possible, as well as splenitis.
- Reactive mesenteric lymph nodes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Supportive GI care should prove effective.



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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  
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