



PATIENT

Chan Finney

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

16 Years

WEIGHT

14 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Mack

HOSPITAL NAME

Northside VC

REFERRING VET

Mack

INVOICE

16838

DATE

8/12/22

PRESENTING CLINICAL SIGNS

History: Patient has had intermittent vomiting with severe constipation

Abnormal PE/Chem/CBC/UA Results: Lipase is elevated

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 **left kidney** revealed slight undulating contour and normal size, measuring 3.5 cm in width.

The **right kidney** revealed similar irregular contour as the left. The right kidney was normal in size, measuring 3.2 cm. Enhanced fat was noted around the right kidney. Only minor disruption of architecture was noted.

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 left adrenal gland measured 0.4 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** revealed coarse architecture and mild increased portal markings. The gallbladder and common bile ducts were unremarkable.

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 and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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



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- Minor nephritis pattern in the right kidney, mild to moderate degenerative renal changes
- Liver, coarse architecture and mild increased portal markings
- Largely age-related abdominal changes otherwise

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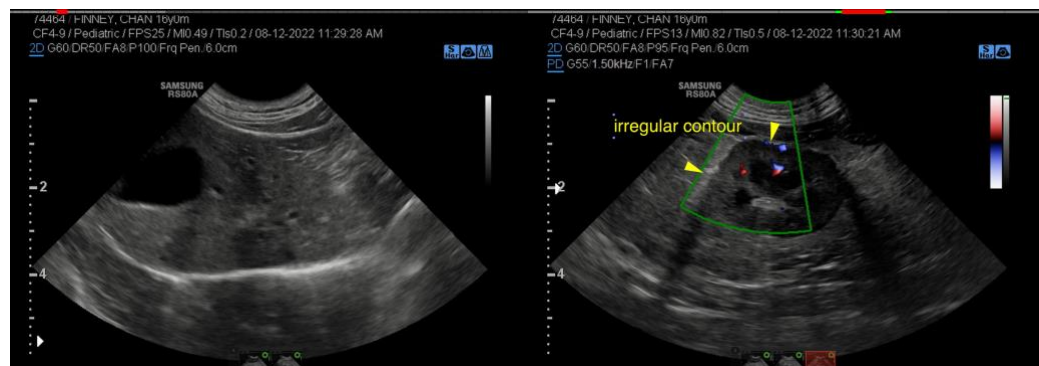
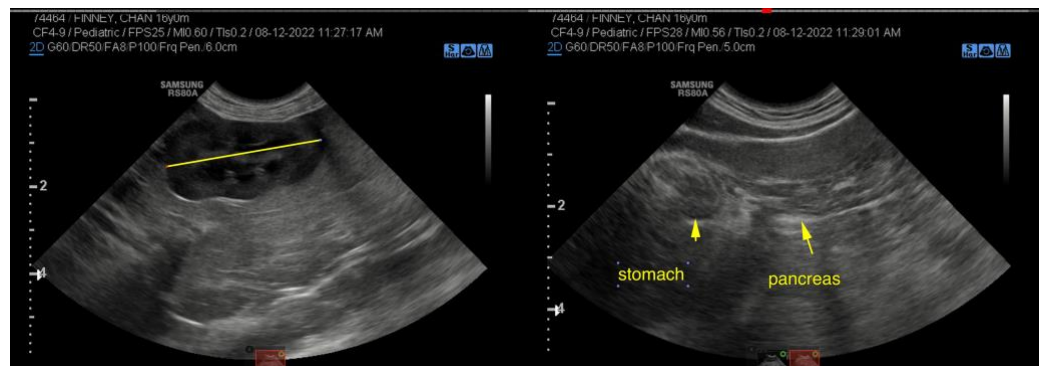
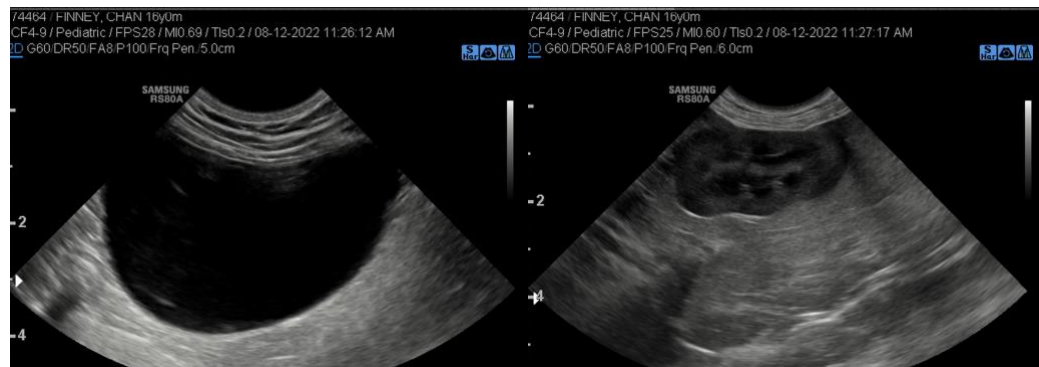
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is minor potential for emerging renal lymphoma in this patient. The right kidney should be monitored for any progression over the next 7-10 days, especially if clinical signs persist. Full urinary work up is indicated. Supportive care for GI upset should prove effective. No neoplastic criteria is overtly present, however, I am somewhat concerned about potential emerging disease in the right kidney.





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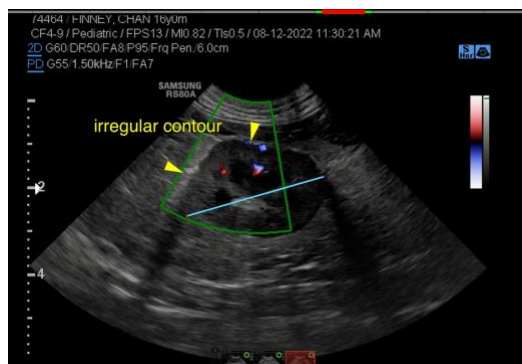
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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