

**DATE PRESENTING CLINICAL SIGNS**

8/13/22

History: Vomiting 1-2x weekly, ravenous appetite and 1lb wt loss since last exam.

PATIENT

William Warga

Current Medications: Rx diet Royal Canin UR/HP dry.

Lab Results: Sent out labs today.

Date of Previous IntraPet Ultrasound: Previous 12/29/17, attached.

Sedation: Gabapentin PO 50mg night before and 100mg 2hr prior to apt.

Stat Report: Not requested.

Imaging Performed By: Stephanie Warga RDCS, RVT.

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

2015

WEIGHT

8 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**

Perry Hall AH

REFERRING VET

Dr. Bear

INVOICE

16847

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**The **urinary bladder** revealed minor bladder wall thickening with minor suspended and dependent debris.

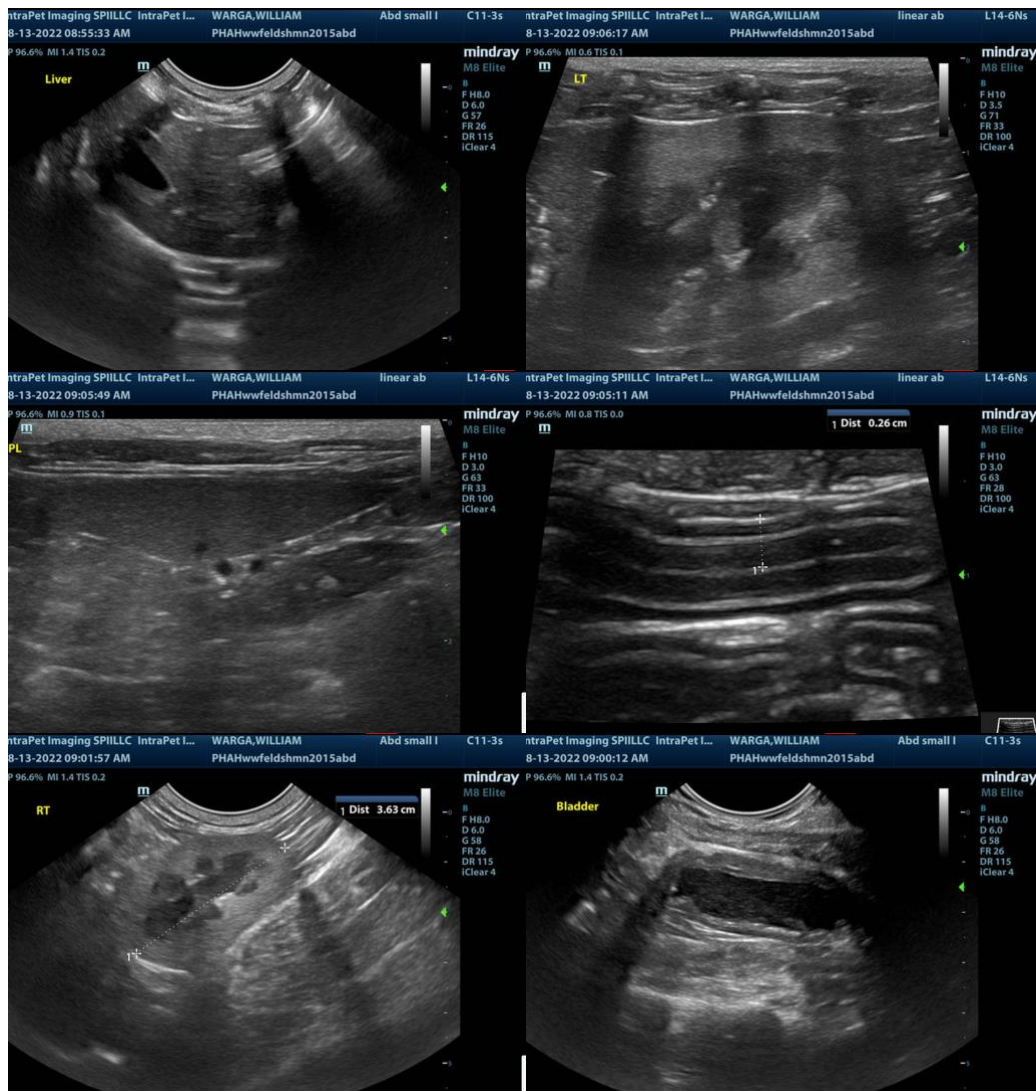
The bladder wall thickening continued into the proximal urethra.

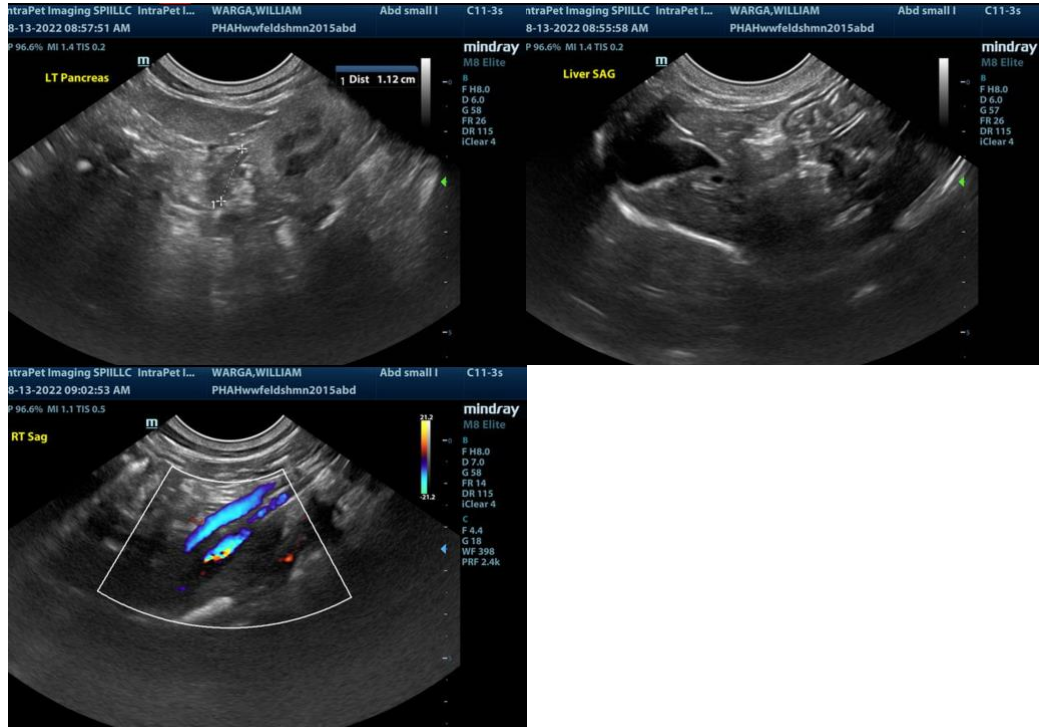
The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 3.63 cm.**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**The **gastrointestinal** tract was structurally unremarkable with curvilinear patterns maintained. Minor intestinal wall thickening without loss of detail noted. Wall thickness measured 0.26 cm.**Pancreas**The **pancreas** revealed slight hypoechoic parenchymal changes and undulating contour. No evidence of significant disease.**ULTRASONOGRAPHIC FINDINGS**

- Urinary bladder debris
- Minor intestinal wall thickening without loss of detail
- Hypoechoic pancreatic changes with undulating contour- no evidence of significant disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant disease or neoplasia. Given the patient history, a maldigestion profile is warranted. If recent UA hasn't been done, then recheck urinalysis is warranted to assess for any evidence of UTI.





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