



PATIENT

Killer Roman

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

20 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

INVOICE

12582

DATE

8/18/21

PRESENTING CLINICAL SIGNS

History: diabetes intermittent hypoglycemia

Abnormal PE/Chem/CBC/UA Results:

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** 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 moderate chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Pericapsular inflammatory pattern was noted around the left kidney. The left kidney measured 4.43 cm. The right kidney measured 4.87 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

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** was uniformly enlarged and hypoechoic to falciform fat. This is most consistent with hepatic lipodosis. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

Some minor retention of chyme was present in the **stomach**. The small intestine and colon were unremarkable.

Pancreas

The **pancreas** was irregular with undulating contour and hypoechoic parenchyma. Enhanced surrounding mesentery was present, suggestive for inflammation.

ULTRASONOGRAPHIC FINDINGS

- Chronic active pancreatitis
- Possible nephritis



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- Liver, uniformly enlarged and hypochoic to falciform fat
- Minor retention of chyme in the stomach

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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IV fluid support and treatment for pancreatitis warranted. Full urinary work up warranted. Liver values should be monitored carefully. If ALP elevation occurs then FNA indicated.

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Potential Causes of Diabetic Dysregulation

SEX

Neutered Male

- This is a suggestive checkoff list when faced with an unregulated diabetic patient:
- UTI
 - Dietary indiscretion/intolerance
 - Pancreatitis
 - Hyperthyroidism/hypothyroidism
 - Exogenous steroids (including topical eye meds)

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Cushing's

WEIGHT

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Acromegaly

Owner compliance

Insulin quality issues

Antibodies to insulin

Underlying Neoplasia

Diffuse liver disease

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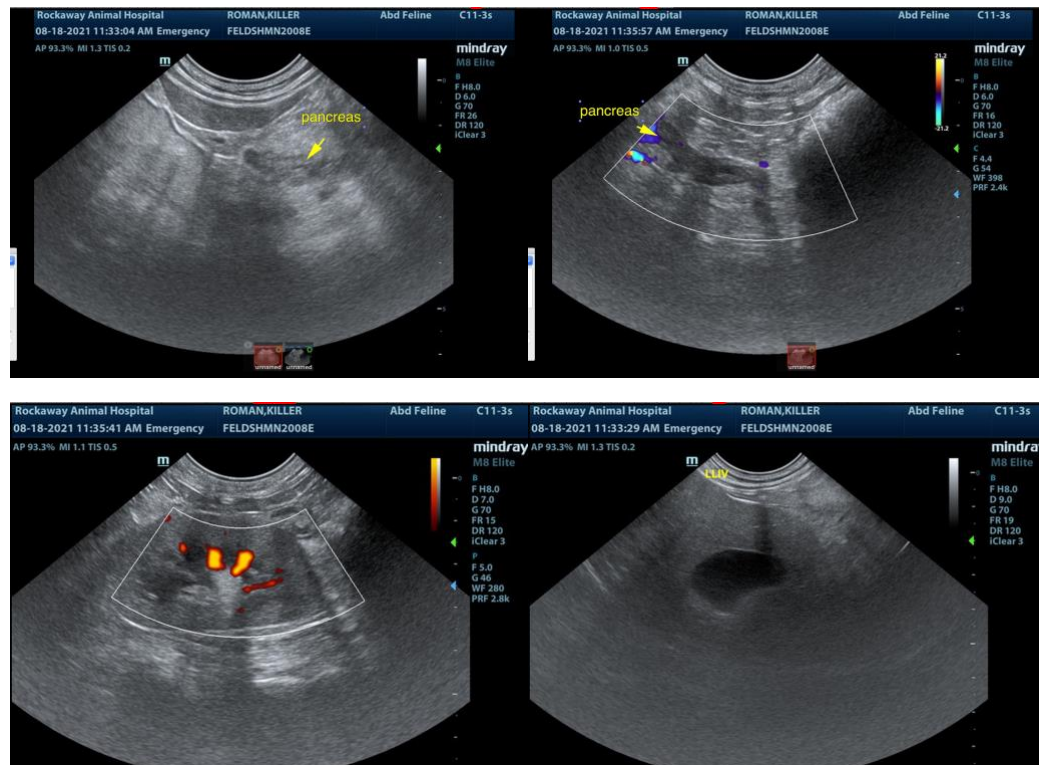
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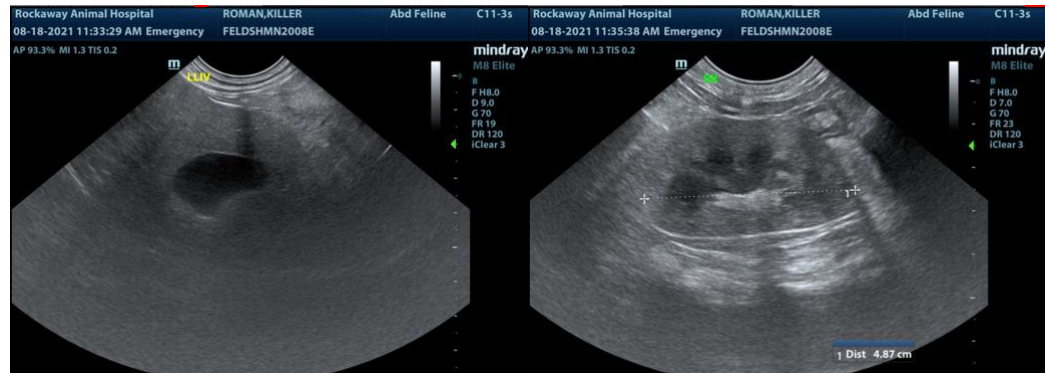
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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