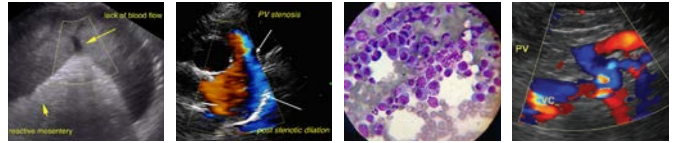


<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Miss Honey Urling	<p>History of intermittent non-regenerative anemia for 6 years. Always eventually resolves, but never diagnosed cause. Also has history of splenic nodule 6 years ago that was sampled and came back as reactive tissue. Earlier this week had brief targeted ultrasound at a different clinic and lymph nodes were FNA'd and came back as inflammatory. Other than non-regenerative anemia, bloodwork last week was normal. Sending out more today to check for pancreatitis. Indoor only cat. Also sending out Anemia PCR panel to IDEXX.</p>
<b>SPECIES</b>	
Feline	
<b>BREED</b>	
DSH	Abnormal PE/Chem/CBC/UA Results: BW pending
<b>SEX</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Spayed Female	<b>Urinary System</b>
<b>AGE</b>	The <b>urinary bladder</b> , 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.
6.0	
<b>WEIGHT</b>	The <b>kidneys</b> 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 3.0 cm. The right kidney measured 3.26 cm.
7.4	
<b>INTERPRETED BY</b>	<b>Adrenal Glands</b>
Eric Lindquist, DMV	Both <b>adrenal glands</b> 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 0.31 cm. The right adrenal gland measured 0.27 cm.
DABVP, Cert. IVUSS	<b>Spleen</b>
<b>IMAGING PERFORMED BY</b>	The <b>spleen</b> was mildly enlarged with slight scalloping contour, measuring 1.2 cm in width.
Mandy Foley	<b>Liver</b>
<b>HOSPITAL NAME</b>	The <b>liver</b> presented mild increased portal markings. Slightly echogenic gallbladder wall noted. History of cholangitis likely yet changes were minor.
All Creatures Great & Small	<b>Gastrointestinal</b>
<b>REFERRING VET</b>	Examination of the <b>gastrointestinal tract</b> revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Soft stool noted in the colon.
Dr. Beth Marszewski	<b>Pancreas</b>
<b>INVOICE</b>	The base and limbs of the <b>pancreas</b> 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.
44935	
<b>DATE</b>	
8/24/23	



**PATIENT**

Miss Honey Urling

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

6.0

**WEIGHT**

7.4

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Mandy Foley

**HOSPITAL NAME**

All Creatures Great & Small

**REFERRING VET**

Dr. Beth Marszewski

**INVOICE**

44935

**DATE**

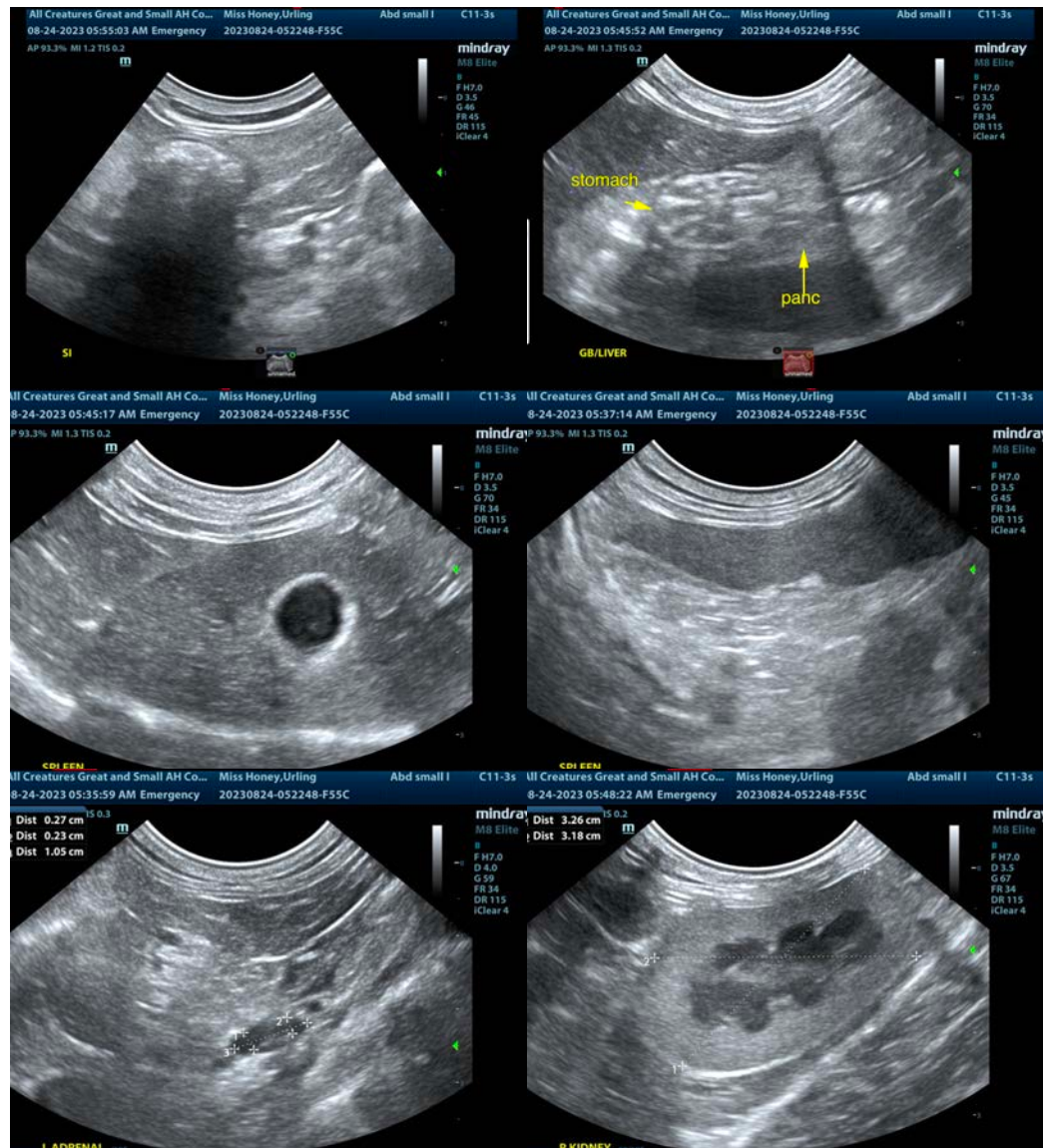
8/24/23

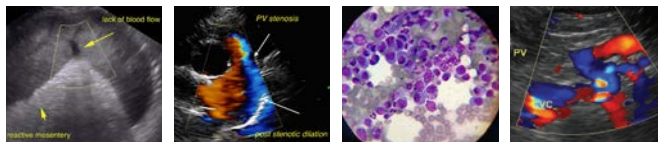
**ULTRASONOGRAPHIC FINDINGS**

- Minor splenic enlargement
- Minor hepatic remodeling

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No obvious evidence of significant disease. CBC path review, splenic FNA +/- bone marrow aspirate would be ideal in this patient.





**PATIENT**

Miss Honey Urling

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

6.0

**WEIGHT**

7.4

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Mandy Foley

**HOSPITAL NAME**

All Creatures Great & Small

**REFERRING VET**

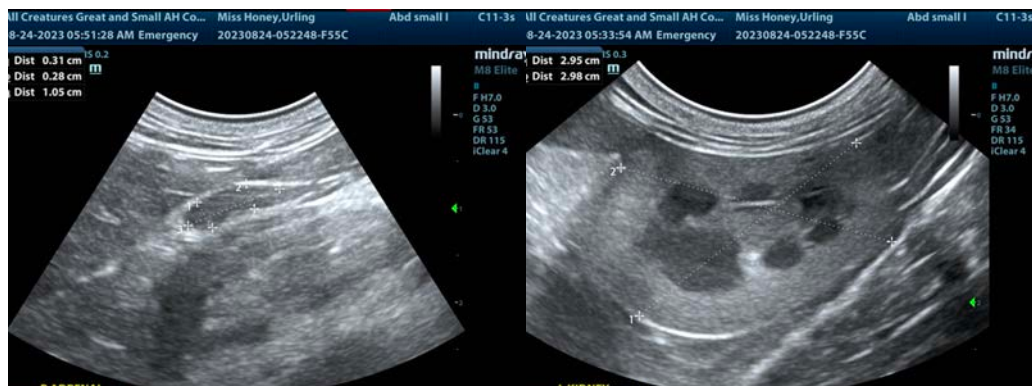
Dr. Beth Marszewski

**INVOICE**

44935

**DATE**

8/24/23



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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

[info@SonoPath.com](mailto:info@SonoPath.com)