

PATIENT

Peaches Hill

SPECIES

Feline

BREED

Calico

SEX

Spayed Female

AGE

10 Years

WEIGHT

4.42 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Charlie Rodriguez

HOSPITAL NAME

Bethany Family PC

REFERRING VET

Dr. Kristin Velasco

INVOICE

17059

DATE

8/26/22

PRESENTING CLINICAL SIGNS

History: P presented 8/25- O have been force feeding her for the past two days. 8% dehydrated, ataxic, and weak. Extremely malodorous mouth with frank bleeding. Treatments IVF Normosol IV Cerenia, famotidine, Unasyn, and Baytril

Abnormal PE/Chem/CBC/UA Results: BW/pending diagnostics BUN 362 mg/dl Creat 14.9 mg/dl Phosphorus 27.2 mg/dl Magnesium 4.8 mEq/L Amylase 1230 IU/L HCT 14% Urine- culture pending Protein trace Yeast present

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** were swollen with mild interstitial nephrosis pattern. The left kidney measured 4.0 cm. The right kidney measured 4.25 cm. Blood flow appeared to be adequate to slightly subnormal, subjectively.

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 0.5 cm.

Spleen

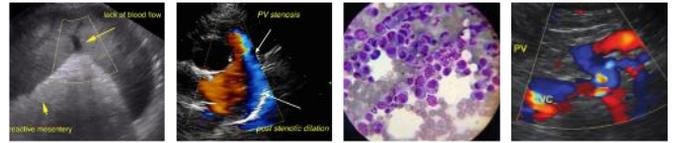
The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** 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

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.



PATIENT

Pancreas

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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.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

BREED

- Mild degenerative renal changes, acute renal insult
- Unremarkable abdomen otherwise

Calico

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

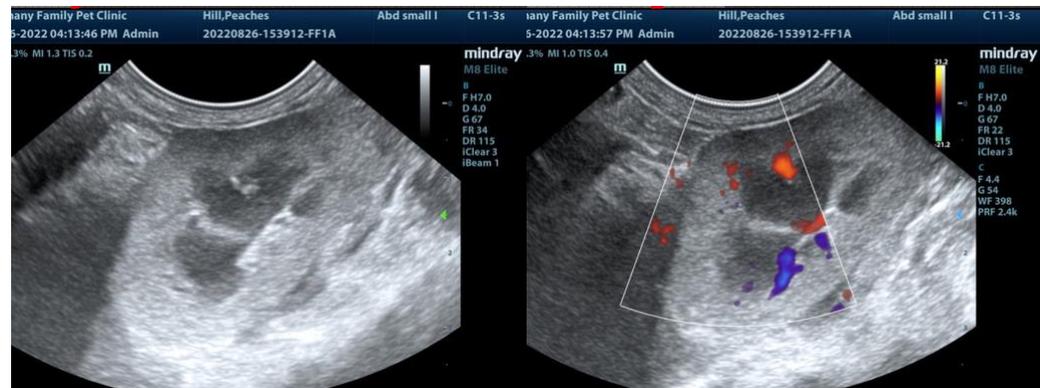
SEX

Toxin exposure or infectious agents are primary concerns. Coagulation panel, 72 IV fluid protocol, coverage for infectious agents, urine culture and blood pressures all indicated. The kidneys have minor chronic changes but do not appear end stage. Bone marrow aspirate would be indicated, as well as CBC path review. Prognosis is guarded to poor, depending on response to therapy.

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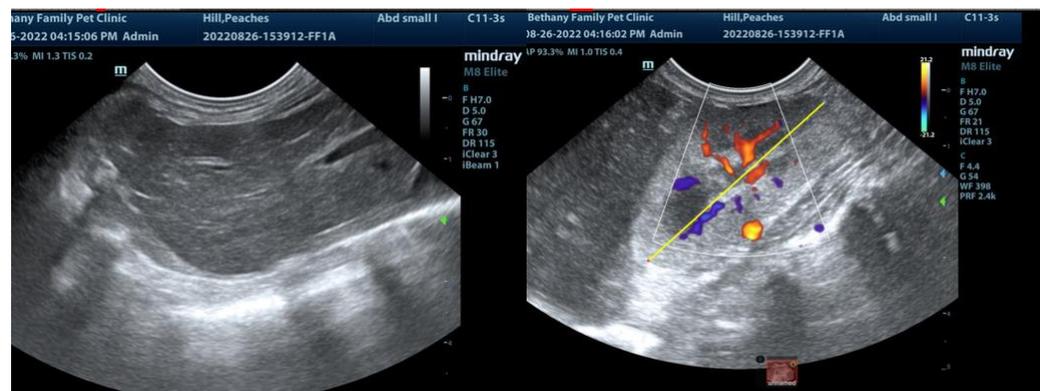
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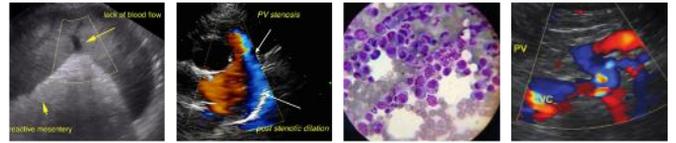
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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