

PATIENT

Marshmallow Grein

SPECIES

Feline

BREED

Siamese

SEX

Neutered Male

AGE

14 Years

WEIGHT

11.4 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

HOSPITAL NAME

The Ark VC

REFERRING VET

Dr. Mercer

INVOICE NUMBER

12818

DATE

8/27/21

PRESENTING CLINICAL SIGNS

History: Presents for: Pt has been defecating outside of his litter box started about 4 weeks ago. O states his stool looks almost black in color and appears sticky. Pt is going all throughout the house not in one specific location. Pt has a hx of gi upset and vomiting. O states over the past few months it has begun to get worse. V is yellow/ orange and bile like, pt will howl when hes going to vomit. E/D: wnl U/D: U wnl C/S/V/D: c/s none EENT: MM pink, moist. CRT <2 seconds. Pupils dilated OU (stress vs other), lenses appear to have some deposits or crystallization ventrally, eyes appear comfortable, conj quiet. Clean AU. Nares free of any discharge. ORAL: Significant tartar and gingivitis present. At least one FORL (205), possible others INTEGUMENT: No external parasites observed. No evidence of skin disease at this time. LYMPH NODES: Lymph nodes are small and of normal texture CIRCULATORY: No murmur or arrhythmia ausculted. Femoral pulses are strong and synchronous. RESPIRATORY: Eupneic. Lungs clear bilaterally. No cough on tracheal palpation. DIGESTIVE: Abdomen soft/benign. No masses palpated. GENITOURINARY: No significant findings. MUSCULOSKELETAL: Ambulatory x all 4. NEURO: No neurologic deficits noted at this time. OTHER:

Abnormal PE/Chem/CBC/UA Results: Attached

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. The left kidney measured 4.24 cm. The right kidney measured 4.47 cm.

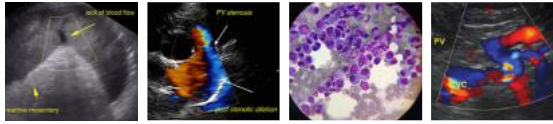
Adrenal Glands

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 0.33 cm. The right adrenal gland measured 0.26 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



PATIENT The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Minor gallbladder sand noted- a thin accumulation of 1.0 cm. Lobar biliary calculi noted.

Marshmallow Grein

Gastrointestinal

SPECIES 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.

Feline

BREED **Pancreas**

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some mild parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

SEX
Neutered Male

ULTRASONOGRAPHIC FINDINGS

- AGE** 14 Years
- Minor lobar biliary calculi and gallbladder sand, non-obstructive at the time of the sonogram
 - Prominent pancreas
 - Intersitital nephritis
 - Geriatric abdomen otherwise

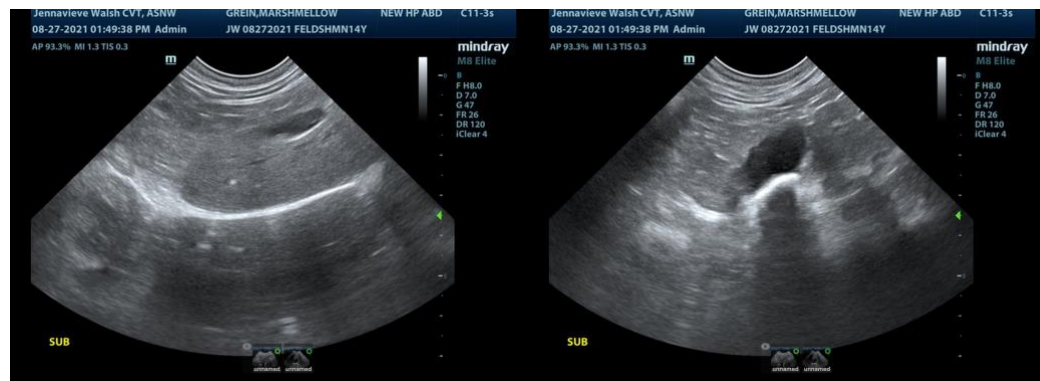
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of visceral disease to be responsible for the clinical signs.

INTERPRETED BY

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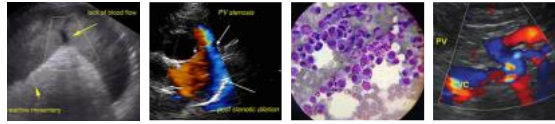
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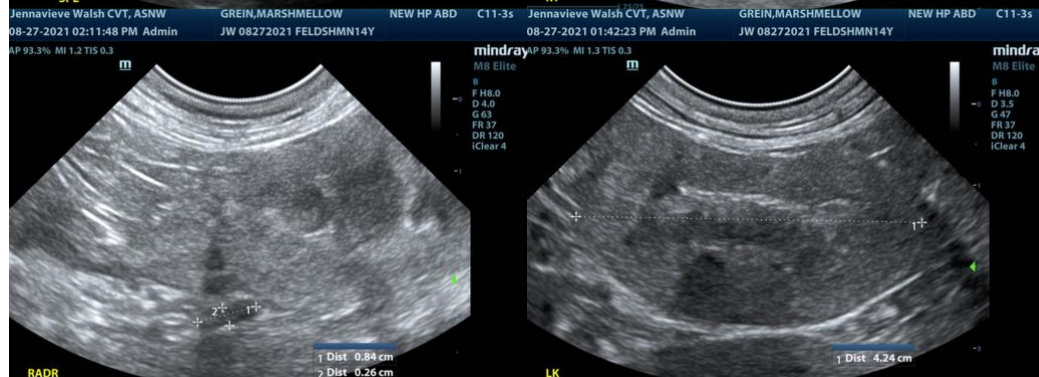
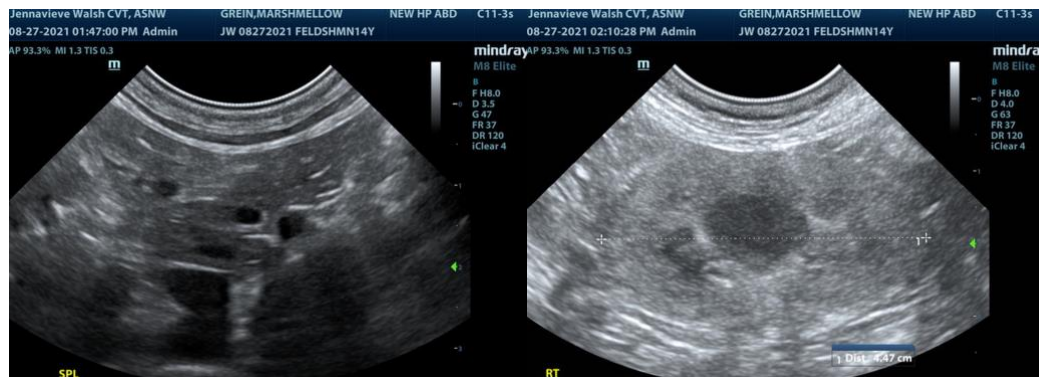
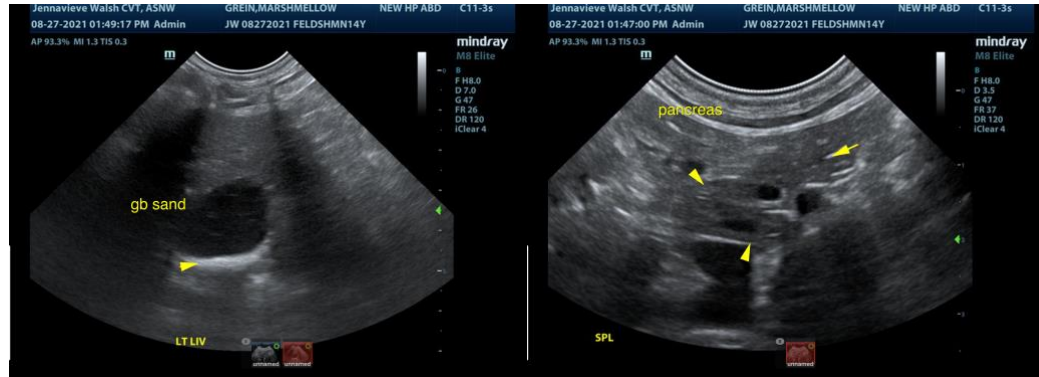
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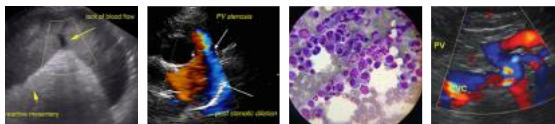
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The information and recommendations provided are based on the images presented by



PATIENT 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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Eric.Lindquist@SonoPath.com

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