



PATIENT

Thumbs Atieh

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13 years

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Animal Care Center of
Flanders

REFERRING VET

Dr. Hallihan

INVOICE

91568

DATE

8/31/21

PRESENTING CLINICAL SIGNS

Persistent hematuria.

ALT 165. Urinalysis 3+ blood, pH 6.5, 2+ protein, urine specific gravity 1.054

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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 was noted. Ureteral papillae were normal.

The **left kidney** in this patient presented moderate degenerative changes with pelvic calculi, slight pyelectasia and thickened irregular cortices. Generalized enlargement was noted in the kidneys. This is consistent with chronic nephrosis with likely periodic obstructive disease. The right kidney measured 4.86 cm with mild to moderate degenerative changes and slightly increased cortical echogenicity.

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.

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 was noted.

Liver

The **liver** revealed coarse architecture with mildly increased portal markings. Biliary calculi were noted and non-obstructive.

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.



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Pancreas

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The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some 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 subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

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ULTRASONOGRAPHIC FINDINGS

Domestic Shorthair

Chronic nephrosis in the left kidney with pelvic calculi, likely the cause of hematuria.

Minor degenerative right renal changes.

SEX

Normal lower urinary tract.

Neutered male

Chronic cholangitis liver pattern with biliary mineralization.

AGE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinary culture is indicated. Palpation of the left kidney is recommended to assess periodic inflammation associated with the nephrolithiasis.

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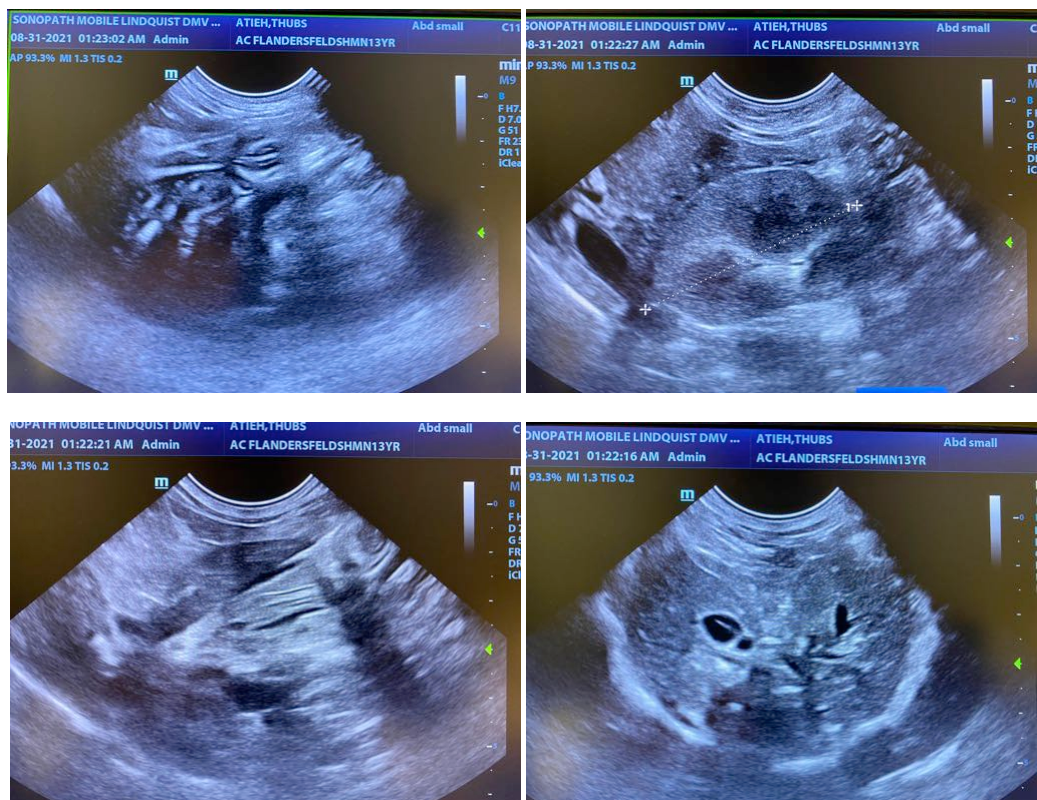
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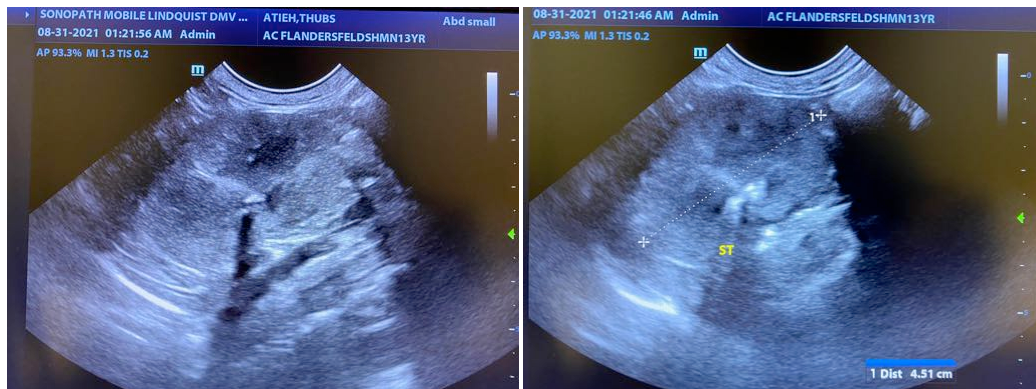
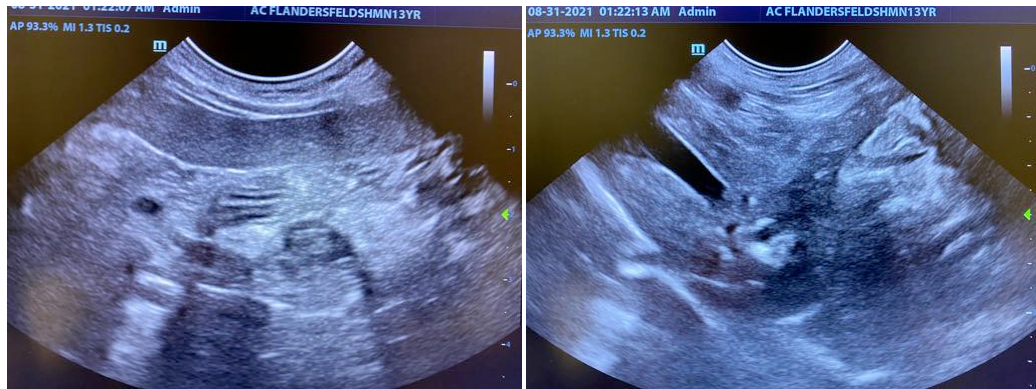
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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