



**PATIENT**

Yummie Senkel

**SPECIES**

Feline

**BREED**

Ragdoll X

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

2.9 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Woodside

**HOSPITAL NAME**

Sherwood Family PC

**REFERRING VET**

Dr. Woodside

**INVOICE**

41412

**DATE**

9/16/22

**PRESENTING CLINICAL SIGNS**

Hyporexia since mid August. She had been eating renal food consistently for over a year prior to presentation. Owner tried a variety of foods but Yummie still did not eat well. She may eat a bite or two of tuna if offered.

Abnormal PE/Chem/CBC/UA Results: BCS 2/9, MCS 2/5, dehydrated with increased skin turgor; small, smooth, spherical kidneys; thickened, small intestines with impression of small mass effect in central abdomen; discomfort with palpation; SDMA 21 ug/dL 0 - 14 (Cr 1.2, BUN 25); TP 5.6 g/dL 6.3 - 8.8; GLOB 2.9 g/dL 3.0 - 5.9; ALB 2.7 g/dL 2.6 - 3.9; SP GRAVITY 1.049; UPC = 0.03; fPL normal

**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 **right kidney** revealed a pelvic calculus. Pericapsular inflammation noted. Mild subnormal size at 3.0 cm. Corticomedullary definition maintained.

The **left kidney** measured 2.48 cm with pericapsular inflammation and loss of corticomedullary definition. A dramatic cortical infarct was noted in the caudal pole of the left kidney.

**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 diffusely hyperechoic to falciform fat. A nodule was noted on the right medial aspect of the liver. The liver was also swollen. Other hypoechoic nodules noted in the liver. The gallbladder was mildly congested as was the cystic duct.

**Gastrointestinal**

Some retention of ingesta noted in the **stomach**. Variable intestinal thickening noted.

**Pancreas**

The **pancreas** was hypoechoic and irregular in the left limb, mildly enlarged at 1.0 cm with pericapsular inflammation.

**Free Abdomen**

A moderate amount of free fluid was noted in the abdomen.

Multifocal hypoechoic, enlarged, rounded lymph nodes noted.



**PATIENT**

Reactive mesentery noted throughout the mid abdomen.

Yummie Senkel

**ULTRASONOGRAPHIC FINDINGS**

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- Diffuse enhanced irregular mesentery associated with the pancreas and intestinal tract and kidneys
- Renal infarcts and calculi
- Nodular hepatic changes with minor gallbladder congestion
- Variable intestinal thickening
- Multifocal regional lymphadenopathy
- Free fluid

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Strong concern for lymphomatosis, carcinomatosis, or similar neoplasia. Ultrasound guided abdominocentesis and cytospin of the free fluid recommended and FNA of the hepatic nodules for further definition, or direct exploratory surgery. Extensive pancreatitis/peritonitis possible, yet less likely.

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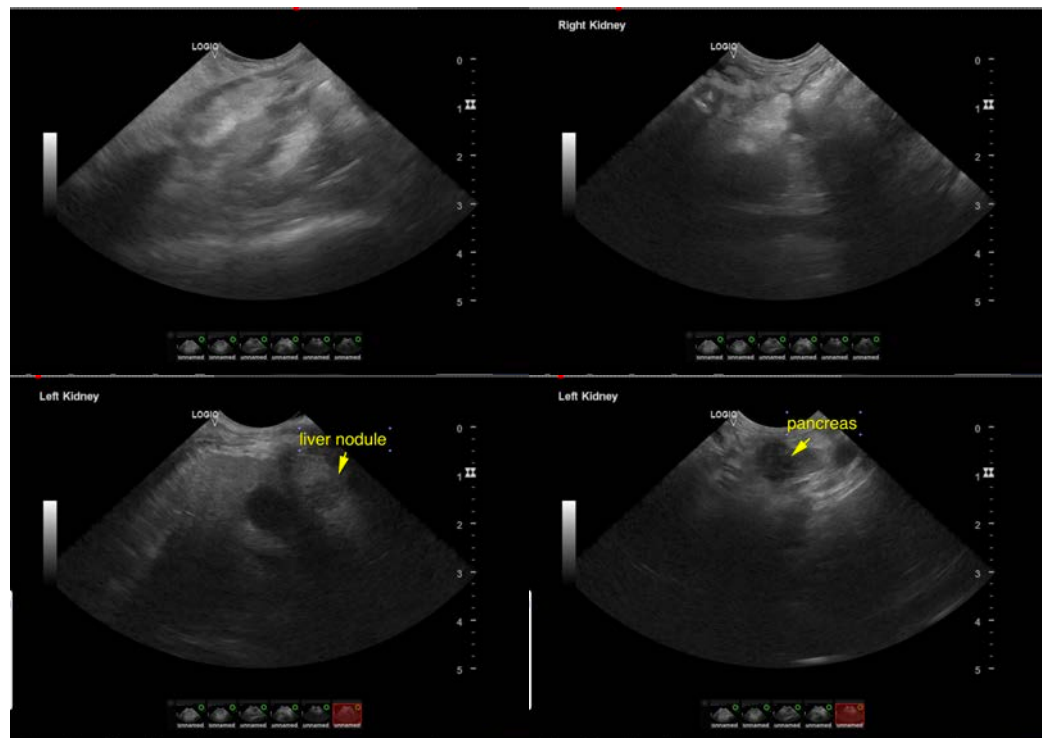
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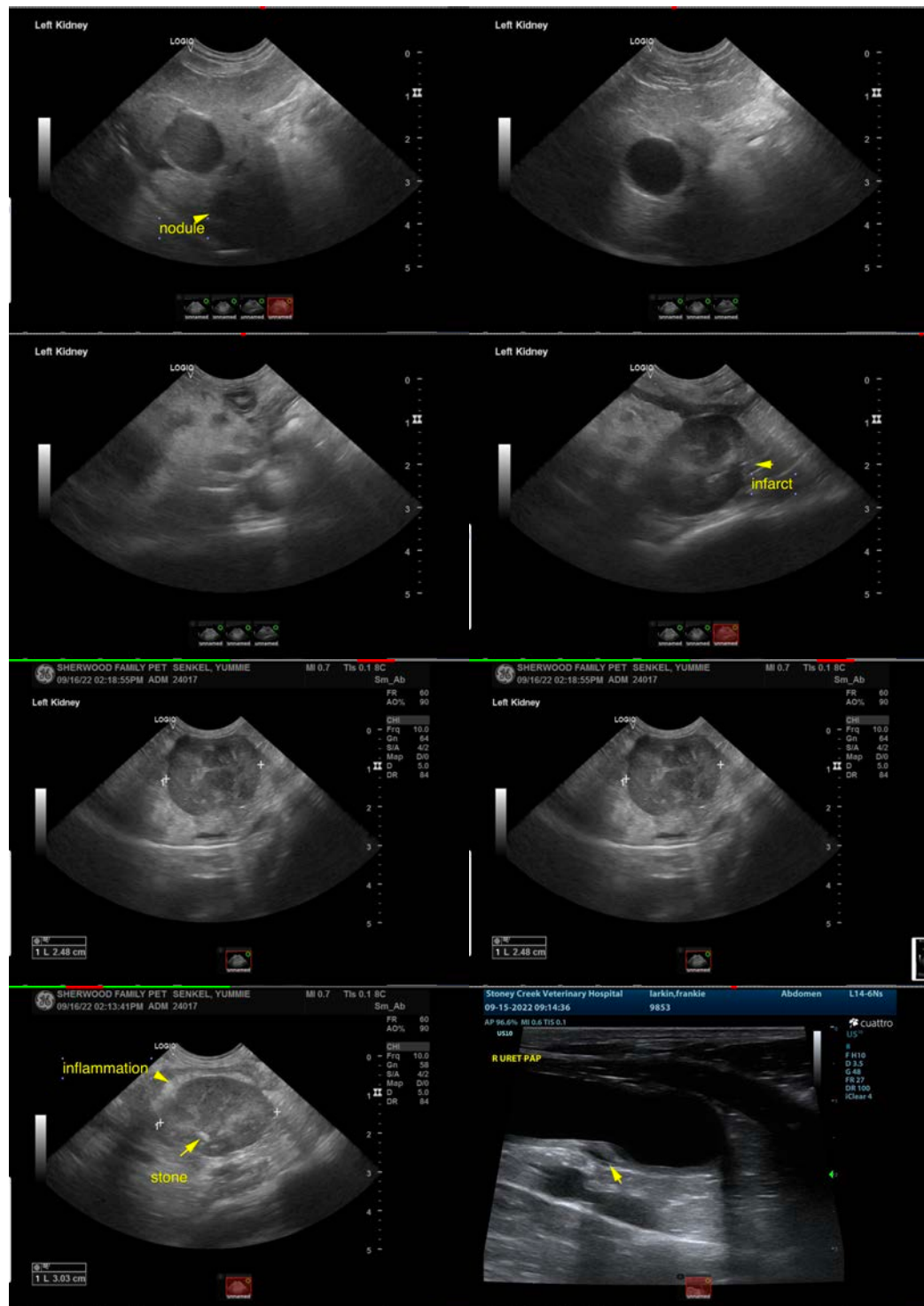
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Feline

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)

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