

**DATE**

9/19/22

**PRESENTING CLINICAL SIGNS****PATIENT**

Foxy Zimmerman

History: Foxy, FS, 3 yr, British shorthair presents for FB ATO In room: - darts in bin latched- still got into them- O is removing them from household - has habit of eating darts- usually vomits them up - has been vomiting routinely and a lot- O thinks it's a blockage - P has been hiding and no one in the house can confirm the last time she ate - vomits at night, had vomited back to back throughout the day as well - no blood in vomit- looks like bile - no diarrhea, coughing or sneezing - no hx medical conditions - no sx for FB prior - no hx of getting into anything else- no toxicity hx - P has been drinking water in "wandering ju plant"- O unsure if this is toxic

**SPECIES**

Feline

Current Medications: Buprenorphine, Ondansetron, Convenia.

**BREED**

British Shorthair

Radiographs: abnormal gas patterns still present in SI; stomach not more dilated abnormal appearing material in colon.

**SEX**

Spayed Female

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

**AGE**

3/30/19

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****WEIGHT**

12.8 Pounds

**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.

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The **kidneys** 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 right kidney measured 4.06 cm. The left kidney measured 3.83 cm.

**HOSPITAL NAME**Animal Emergency  
Hospital**Adrenal Glands**The **right adrenal gland** was slightly enlarged, measuring 0.65 cm.**REFERRING VET**

Dr. Thompson

The **left adrenal gland** was 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 0.38 cm.

**INVOICE**

17372

**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 subnormal in size. Mild passive congestion liver pattern was noted. The gallbladder appeared to be partially duplicated.

### **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.

### **Pancreas**

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.

### **Other**

A rapid view of the **chest** revealed "shower curtain lung pattern" with pleural effusion.

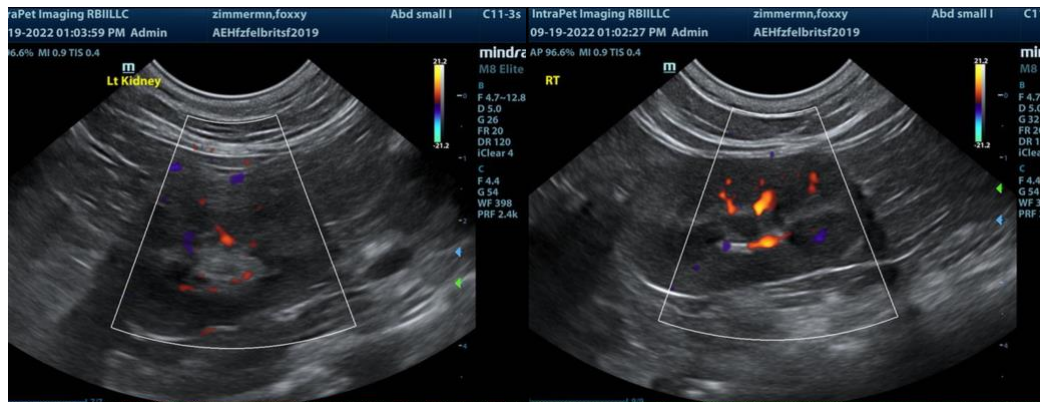
A rapid view of the **heart** revealed trace pericardial effusion with normal volumes.

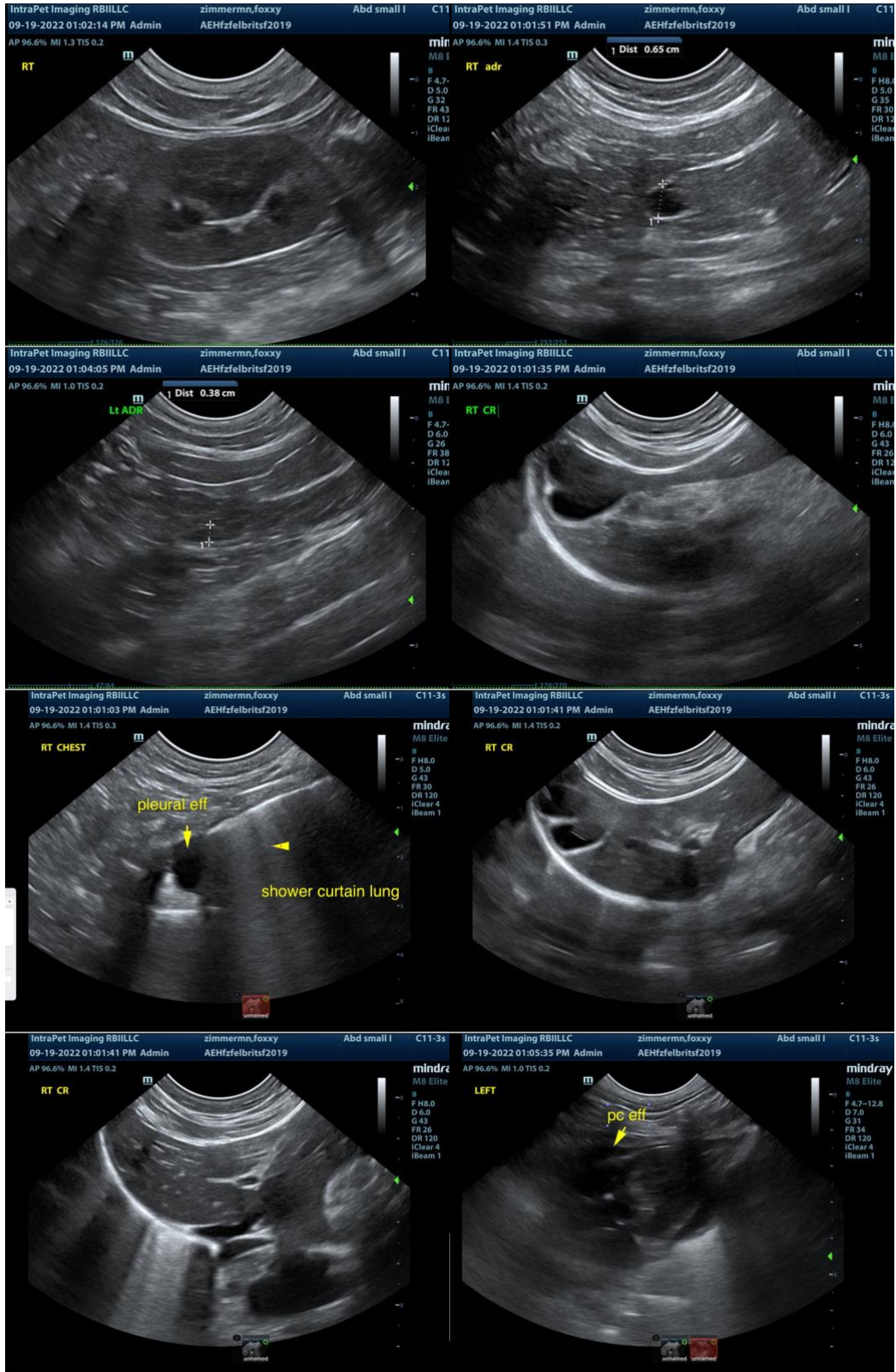
## **ULTRASONOGRAPHIC FINDINGS**

- Subnormal liver size with minor passive congestion liver pattern
- Bifid gallbladder
- Noncardiogenic pleural effusion and diffuse lung alveolar consolidation
- Trace pericardial effusion
- Slightly enlarged right adrenal gland
- Unremarkable abdomen otherwise

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Vasculitis, infectious disease, FIP and occult neoplasia are all potentials in this patient. No evidence of abdominal disease. Chest radiographs +/- chest CT would be ideal for further definition. Systemic infectious disease that may be causing a vasculitis/pneumonitis should also be considered. The pleural and slight pericardial effusion are noncardiogenic in this patient, as the heart appears subjectively normal with normal volumes.





**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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