



PATIENT PRESENTING CLINICAL SIGNS

Stanley Bradley Ran a quick scan- US No ascites seen

SPECIES Abnormal PE/Chem/CBC/UA Results: R/O IMHA, hepatobil disease/shunt ALT - 358 H AMY - 1272
H Tbil = 1.0 H HCT = 30.5 L but stable PLT = 86 L (blood smear - clumped plts) Lym = 0.21 L Eosin = 0.01
Feline L Current Medications Denamarin 90mg Doxycycline 25/5mL Mirtazapine ointment

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Maine Coon **Urinary System**

SEX 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.

Neutered Male

AGE The **left kidney** was severely enlarged at 5.0 cm. Irregular cortices with hyperechoic medullary rim noted. Expansive irregular contour with pericapsular inflammatory pattern. The **right kidney** presented similar changes at 5.09 cm. Pyelectasia noted in both kidneys.

16 Months

WEIGHT **Adrenal Glands**

5.18 Pounds 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 0.63 cm.

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner.

IMAGING PERFORMED BY

Sara Hansen

Liver

HOSPITAL NAME

Echo Hollow VH

The **liver** was swollen, hypoechoic and irregular with subtle micronodular changes. The gallbladder and common bile duct were unremarkable. Given the patient history and paired with the renal presentation, infiltrative hepatic disease is suspected.

REFERRING VET

Dr. Kenna

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

INVOICE

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DATE

9/22/22



PATIENT *Pancreas*

Stanley Bradley The **pancreas** presented undulating contour with hypoechoic, irregular parenchyma. Secondary inflammation likely.

SPECIES *Free Abdomen*

Feline Minor amounts of free fluid noted.

BREED **ULTRASONOGRAPHIC FINDINGS**

- Maine Coon
- Infiltrative renal and hepatic patterns
 - Micronodular spleen
 - Hypoechoic pancreas
 - Free fluid

SEX

Neutered Male

AGE

16 Months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of either kidney cortex and the liver indicated. Lymphoma versus FIP are primary differentials. Prognosis is extremely guarded to poor.

WEIGHT

5.18 Pounds

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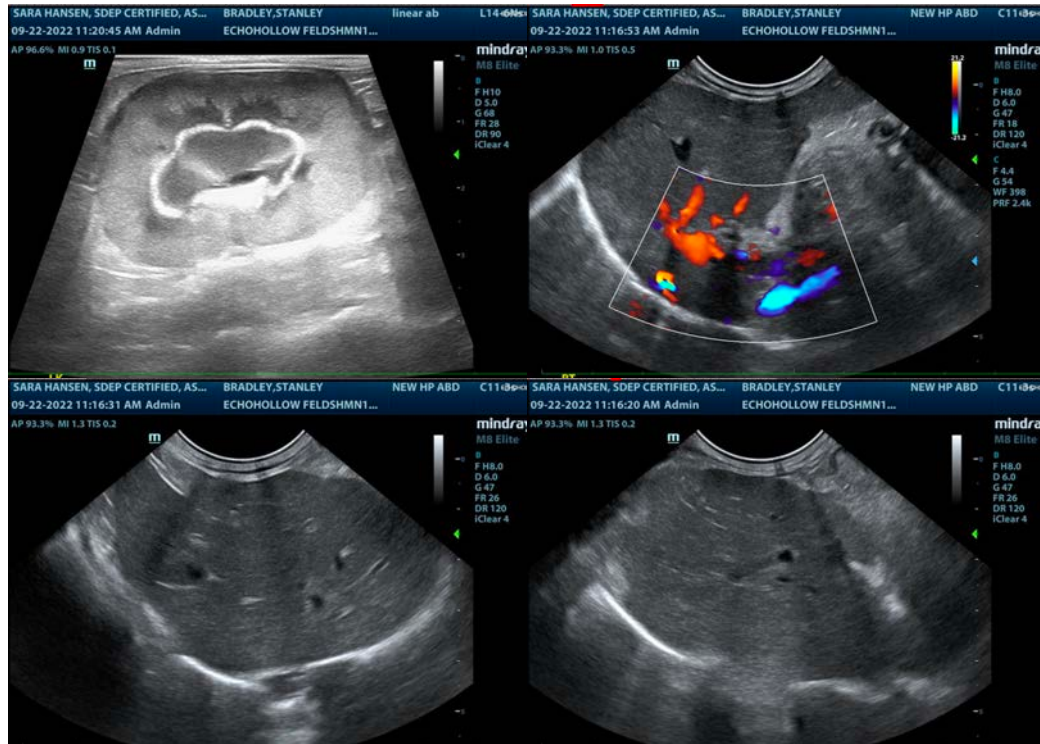
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PATIENT

Stanley Bradley

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered Male

AGE

16 Months

WEIGHT

5.18 Pounds

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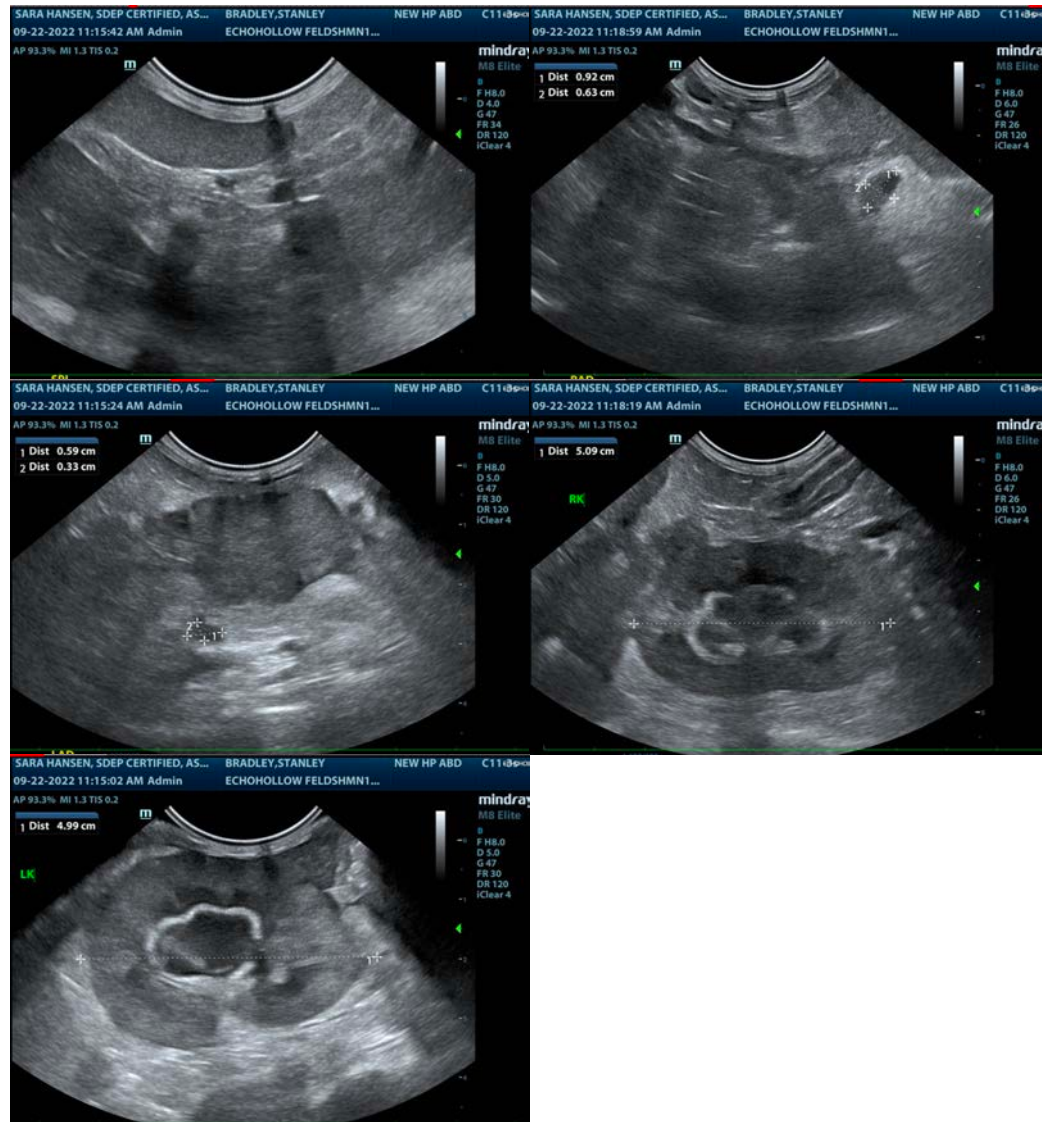
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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