



PATIENT

Kitty Girl Shinn

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

17 Years 2 Months

WEIGHT

6.13 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Kirk

HOSPITAL NAME

Shiloh Animal Hospital

REFERRING VET

Dr. Audra Alley

INVOICE

41630

DATE

9/23/22

PRESENTING CLINICAL SIGNS

Elevated liver enzymes, progressive weight loss over the course of a few years. Lab work performed in preparation for dental cleaning as there is an inflammatory lesion in the caudal oral cavity. No primary GI signs other than weight loss.

Abnormal PE/Chem/CBC/UA Results: see attached

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralizations noted. The right kidney measured 3.24 cm. The left kidney measured 3.35 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

Spleen

The **spleen** was mildly enlarged (1.07 cm). Subtle micronodular changes noted. Splenic lymph nodes were slightly enlarged, example measured 1.2 cm, reactive.

Liver

The **liver** revealed coarse architecture and increased portal markings. The common bile duct was unremarkable. The gallbladder was slightly echogenic.

Gastrointestinal

The **gastrointestinal tract** revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malabsorption of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content was unremarkable. The gastric wall presented some echogenic mucosal remodeling, yet lumen was empty.

Pancreas

The pancreas presented hypoechoic, coarse architecture with irregular contour. Minor duct dilation noted.

ULTRASONOGRAPHIC FINDINGS

- Chronic inflammatory hepatopathy liver pattern with potential emerging round cell neoplasia
- Splenic enlargement



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Splenic and hepatic FNA warranted to ensure an emerging round cell neoplasia is not present. Otherwise, treatment for splenitis and cholangiohepatitis recommended.

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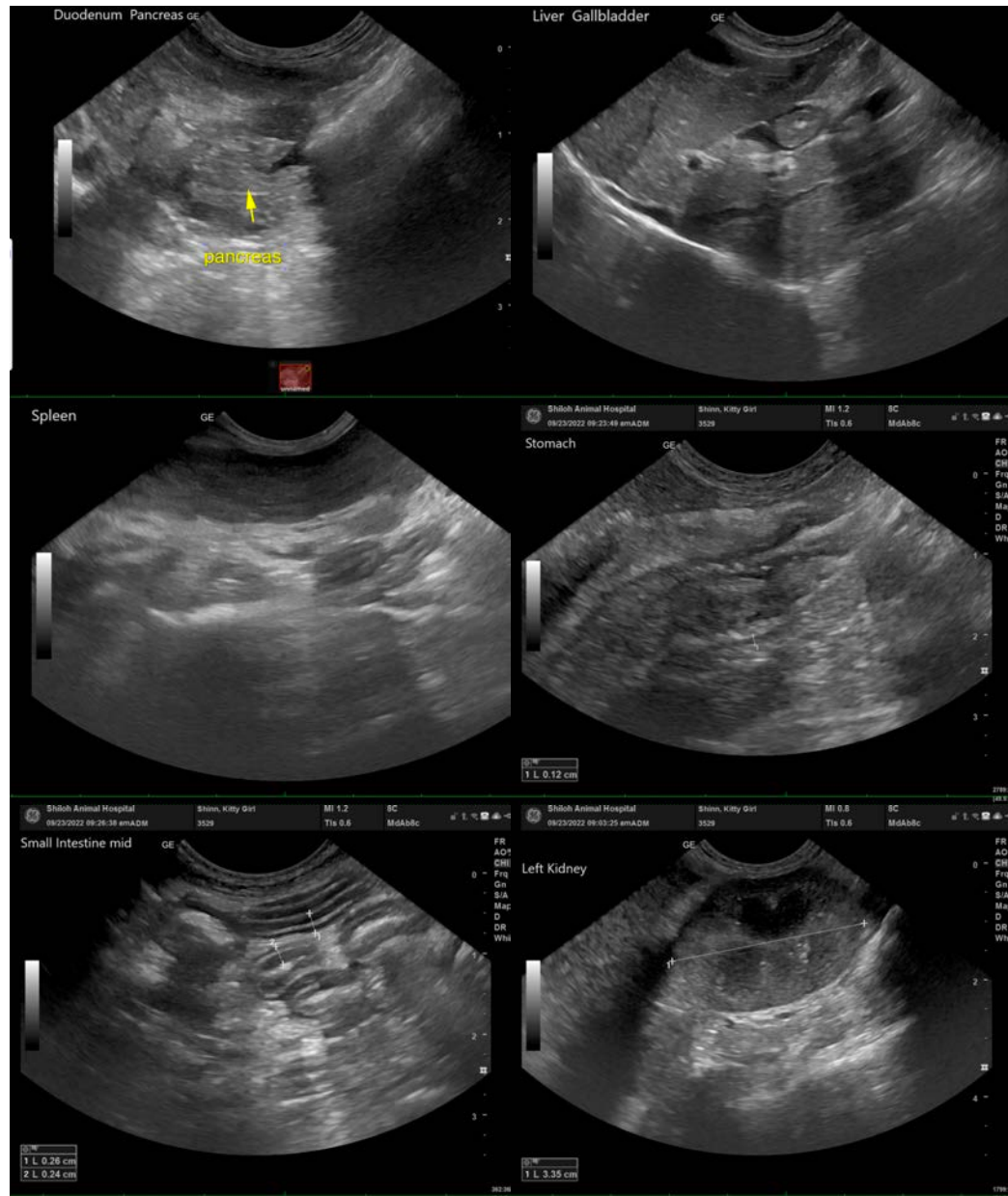
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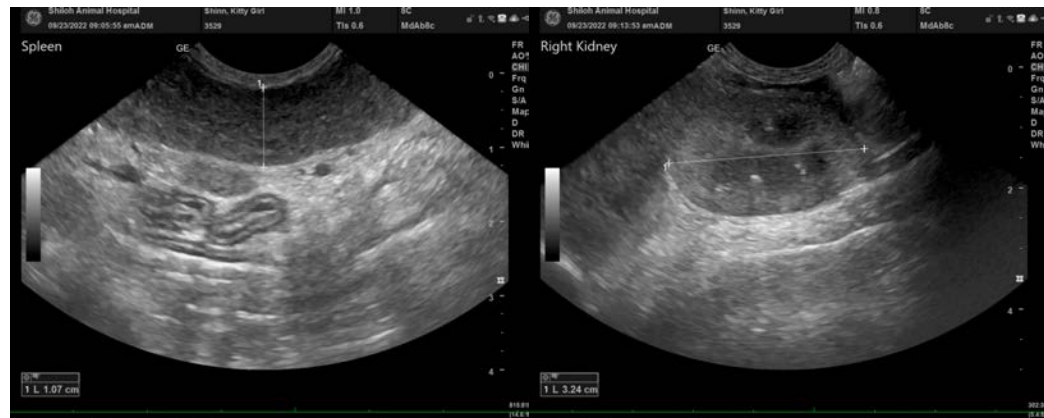
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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