



PATIENT

Wolfgang Burchiel

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

7 Years

WEIGHT

6 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Callihan/AEC

HOSPITAL NAME

Animal Emergency Care

REFERRING VET

Dr. Johnson/AEC

INVOICE

41651

DATE

9/26/22

PRESENTING CLINICAL SIGNS

Hx of vomiting, started ~1 year ago, hairballs per O. Improved when O started giving hairball remedy (which she still does). Blood work done by RDVM then was WNL. Vomiting got bad again about a month ago, daily or every other day, usually mostly clear fluid. Does like to go outside and eat grass, then vomit it. Has gotten really bad in past week. O got metoclopramide from her RDVM (no exam done) and she gave it for first time this morning. Then at 4pm he vomited a little fluid and a piece of grass with a little frank blood in it (scant per O). Appetite hasn't been great, sometimes just licks the gravy off pate, but always loves his kibble. Pate is Fancy Feast, variety pack. No diarrhea per O. A: chronic vomiting and somewhat picky appetite ddx: food allergy, IBD, chronic pancreatitis, intestinal neoplasia, less likely GI foreign body obstruction...

Abnormal PE/Chem/CBC/UA Results: CBC: WNL Chem 17/lytes: WNL fPL test: "abnormal" UA shows very concentrated urine with small amt prot (30) and quiet sediment

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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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 left kidney measured 4.54 cm. The right kidney measured 4.58 cm.

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. The right adrenal gland measured 0.40 cm. The left adrenal gland measured 0.50 cm.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen measured 1.04 cm. 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** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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Gastrointestinal

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The **stomach** presented complete repletion with hairball type density, measuring 5+ cm. The small intestine revealed minor areas of muscularis hypertrophy without loss of mural detail. Slight reactive mesenteric lymph nodes noted up to 1.0 cm in width x 0.30 cm.

SPECIES

Pancreas

Feline

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.

BREED

DLH

ULTRASONOGRAPHIC FINDINGS

SEX

- Hairball density in the stomach
- Minor IBD GI pattern with reactive mesenteric lymph nodes

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

Management for hairballs warranted and treatment for inflammatory bowel with assessment and coverage for potential concurrent parasites. GI protectant protocol could also be considered. Recheck sonogram in 3 weeks as long as the patient is clinically improving. No evidence or suspicion of neoplasia.

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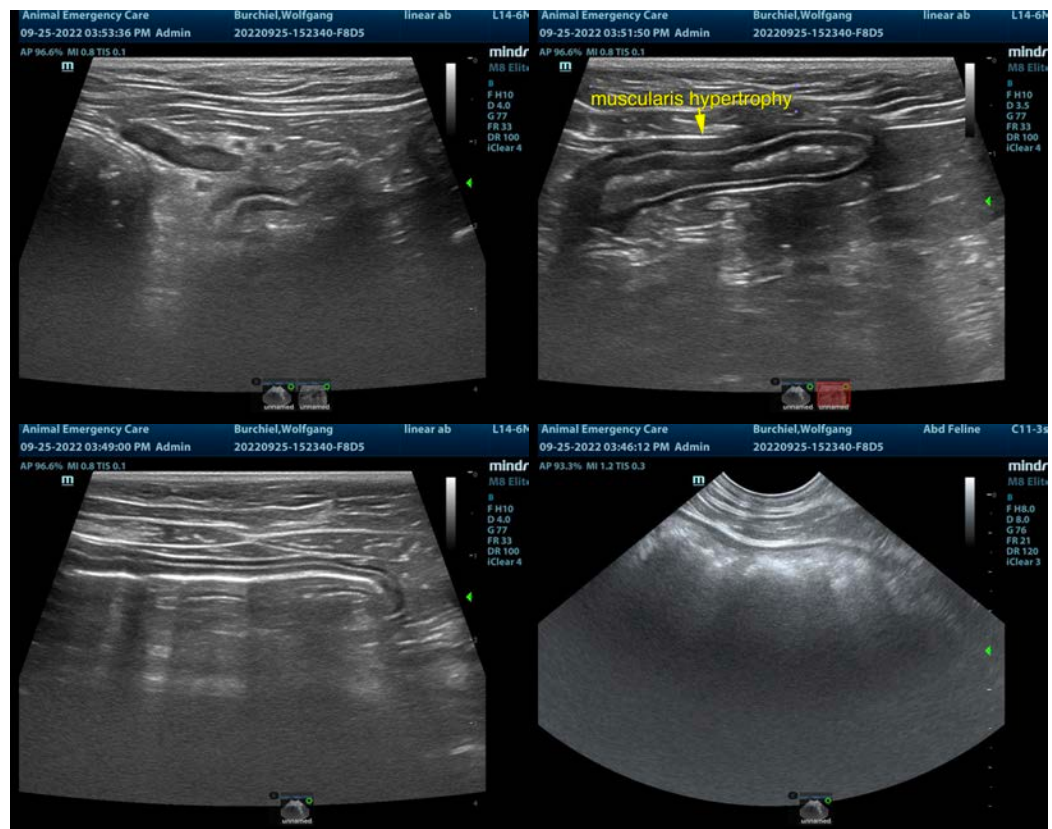
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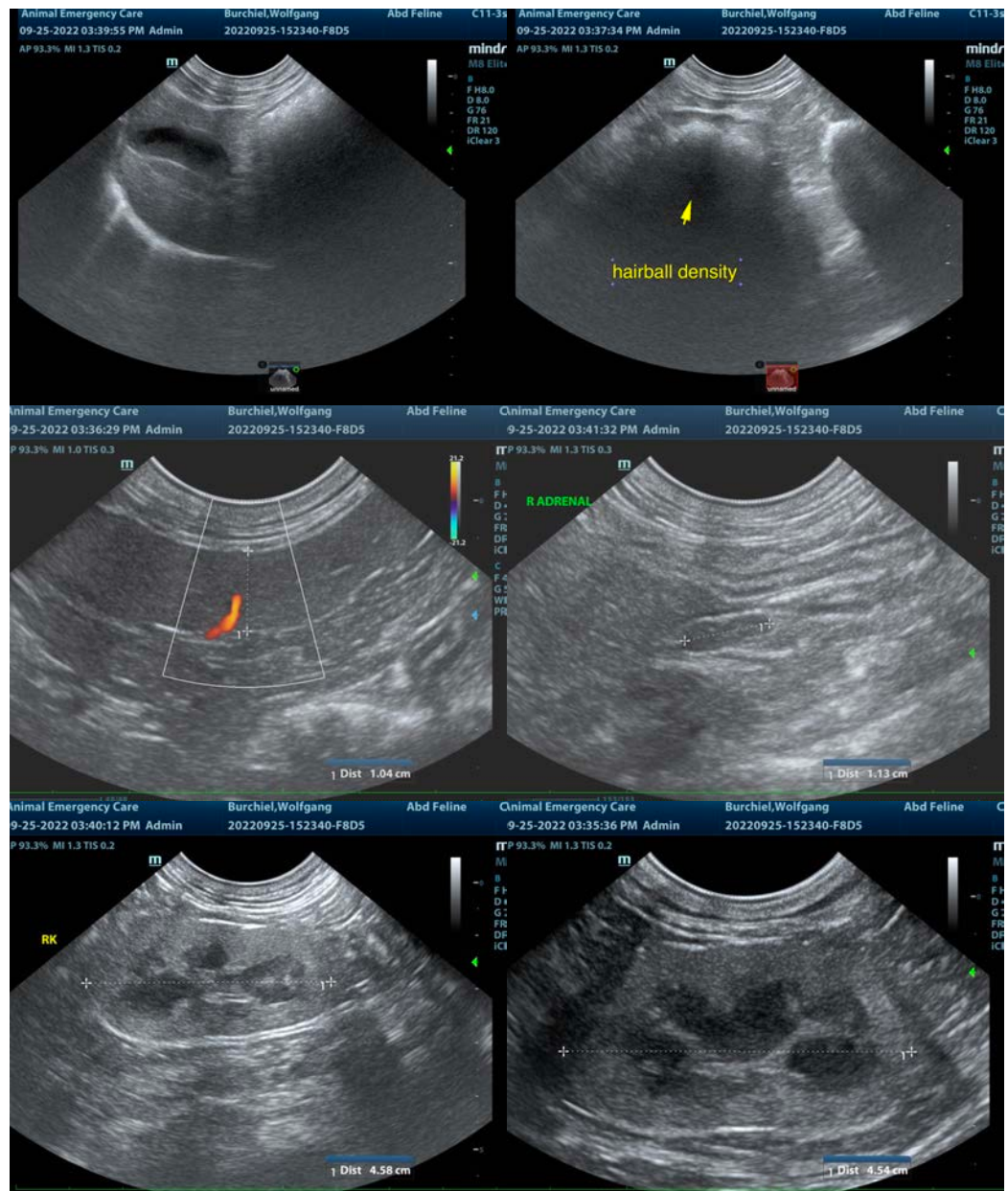
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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