

PATIENT

Dee NG

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

4 Years

WEIGHT

3.9 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Valentina

HOSPITAL NAME

The Veterinary Surgery

REFERRING VET

Dr. Valentina

INVOICE

17496

DATE

9/30/22

PRESENTING CLINICAL SIGNS

History: [3:59 pm, 29/09/2022] Valentina Qatar Number: Dee is a DSH, male neutered , 4 years old. Presented for vomiting several times, after eating wet food that, according with the owner perception, was polluted with small amount of ink. Also the owner reports that even after the castration, the cat does not gain weight. At the clinical presentation the patient is alert and responsive. Mmc pinkish, dehydration 4 percent. HR 140 and RR 25. The palpation of the abdomen elicits discomfort on the cranial area. The blood work was declined. The xray reveals no obvious abnormalities.

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** presented premature degenerative changes with interstitial nephrosis pattern. The left kidney measured 3.35 cm. The right kidney measured 3.5 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.

Spleen

The **spleen** was minimally visualized, appeared unremarkable.

Liver

The **liver** revealed slight increased portal markings and coarse architecture. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

Examination of the **upper gastrointestinal tract** revealed hyperperistalsis and edematous wall. There were minor areas of luminal fluid noted. There was no evidence of obstructive pattern. This is consistent with response to irritation. The colon was fluid filled. The colonic wall was unremarkable.

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.

ULTRASONOGRAPHIC FINDINGS

- Nonspecific gastroenteritis/colitis pattern
- Early degenerative renal changes
- Increased portal markings and coarse architecture in the liver



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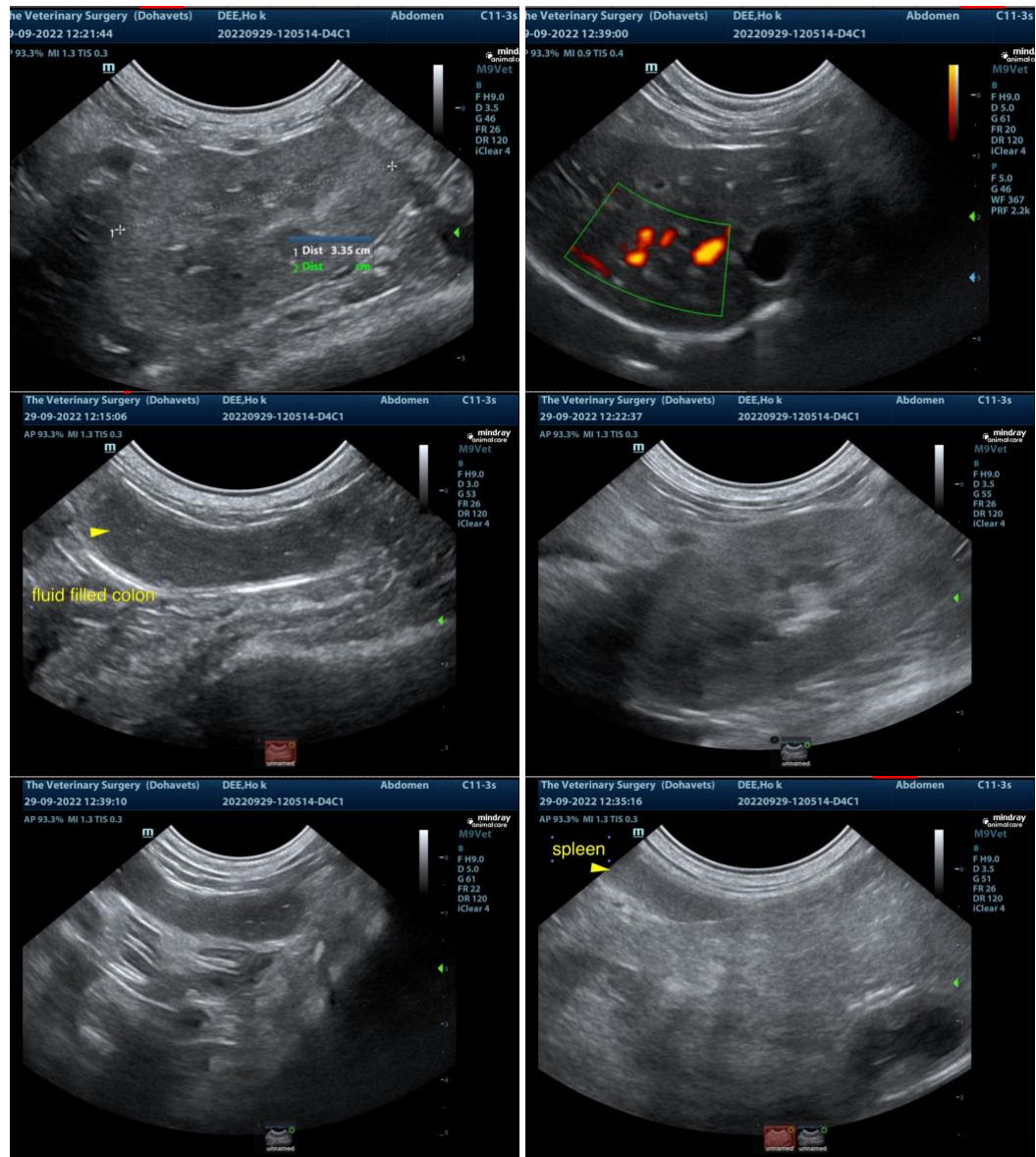
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend a fresh fecal smear and fecal floatation analysis. Consideration for enterotoxin and inflammatory bowel possible. 24-hour NPO, broad spectrum antiparasitic protocol and diet change are all indicated.



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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.



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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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info@SonoPath.com

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