



PATIENT PRESENTING CLINICAL SIGNS

Taz Rosa Consistently losing weight over past year, Prior ultrasound done 08.27 Appetite is pickier, prefers human food. Used to be a great eater. Vomiting even with cerenia the past 2 days. seemed to do better when on a course of prednisolone 5 mg daily. R/O emerging neoplasia, stomach, duodenum

SPECIES Abnormal PE/Chem/CBC/UA Results: Grade 4/6 murmur, general exam unremarkable. No new BW

Feline **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

BREED *Urinary System*

DSH 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 2.0 cm beyond the cystourethral junction.

SEX

Neutered Male The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. The left kidney measured 4.32 cm. The right kidney measured 4.58 cm.

AGE

15 Years

Adrenal Glands

WEIGHT

11.7 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 0.43 cm. The right adrenal gland measured 0.49 cm.

INTERPRETED BY

Eric Lindquist, DMV

Spleen

DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Dr. John Ameraal

Liver

HOSPITAL NAME

Sova Animal Hospital

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.

REFERRING VET

Dr. John Ammeraal

Gastrointestinal

INVOICE

41797

The **gastrointestinal** presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropey" small intestinal wall with 1:1 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.

DATE

9/30/22



PATIENT

Taz Rosa

Pancreas

SPECIES

Feline

The **pancreas** was hypoechoic and irregular in the right limb. Some heterogeneous parenchymal changes noted elsewhere. Likely periodic pancreatitis. Minor duct dilation noted. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas

ULTRASONOGRAPHIC FINDINGS

BREED

DSH

- Chronic inflammatory bowel
- Chronic pancreatic changes – periodic pancreatitis likely.
- Interstitial nephrosis renal pattern

SEX

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Partially suppressed round cell neoplasia of the intestinal tract could not be completely ruled out. However, no neoplastic criteria noted at this time. The Prednisolone may be suppressing a more significant presentation. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.

AGE

15 Years

WEIGHT

11.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. John Ameraal

HOSPITAL NAME

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REFERRING VET

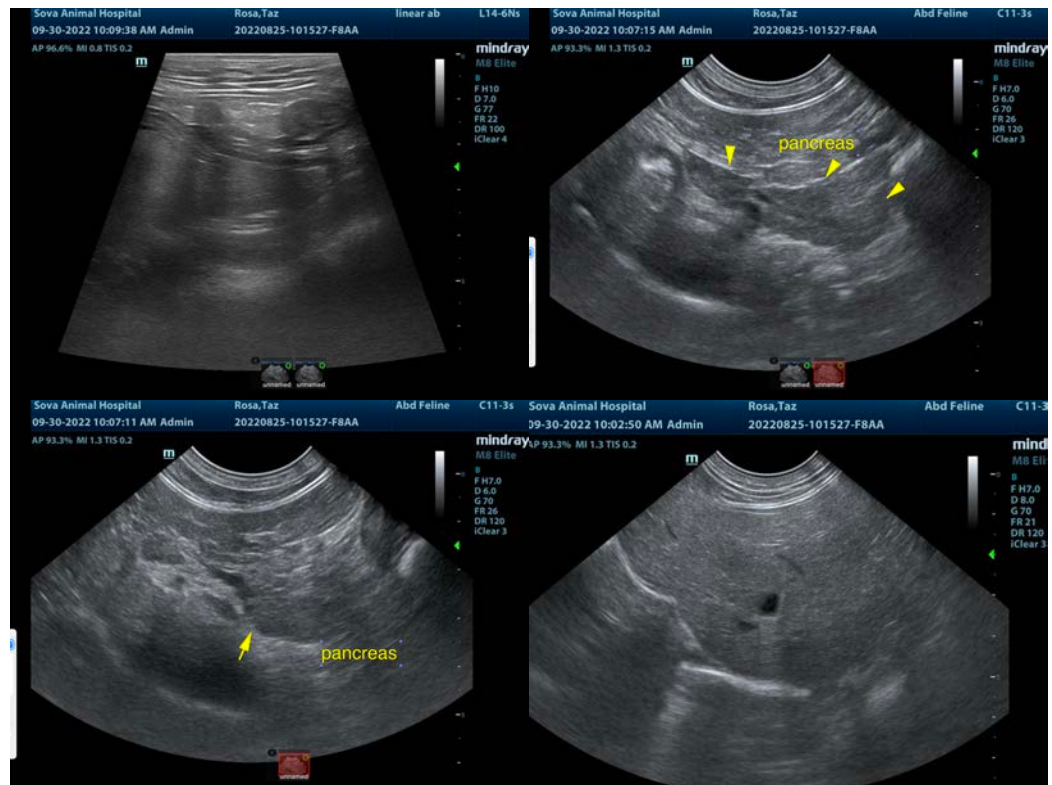
Dr. John Ammeraal

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Neutered Male

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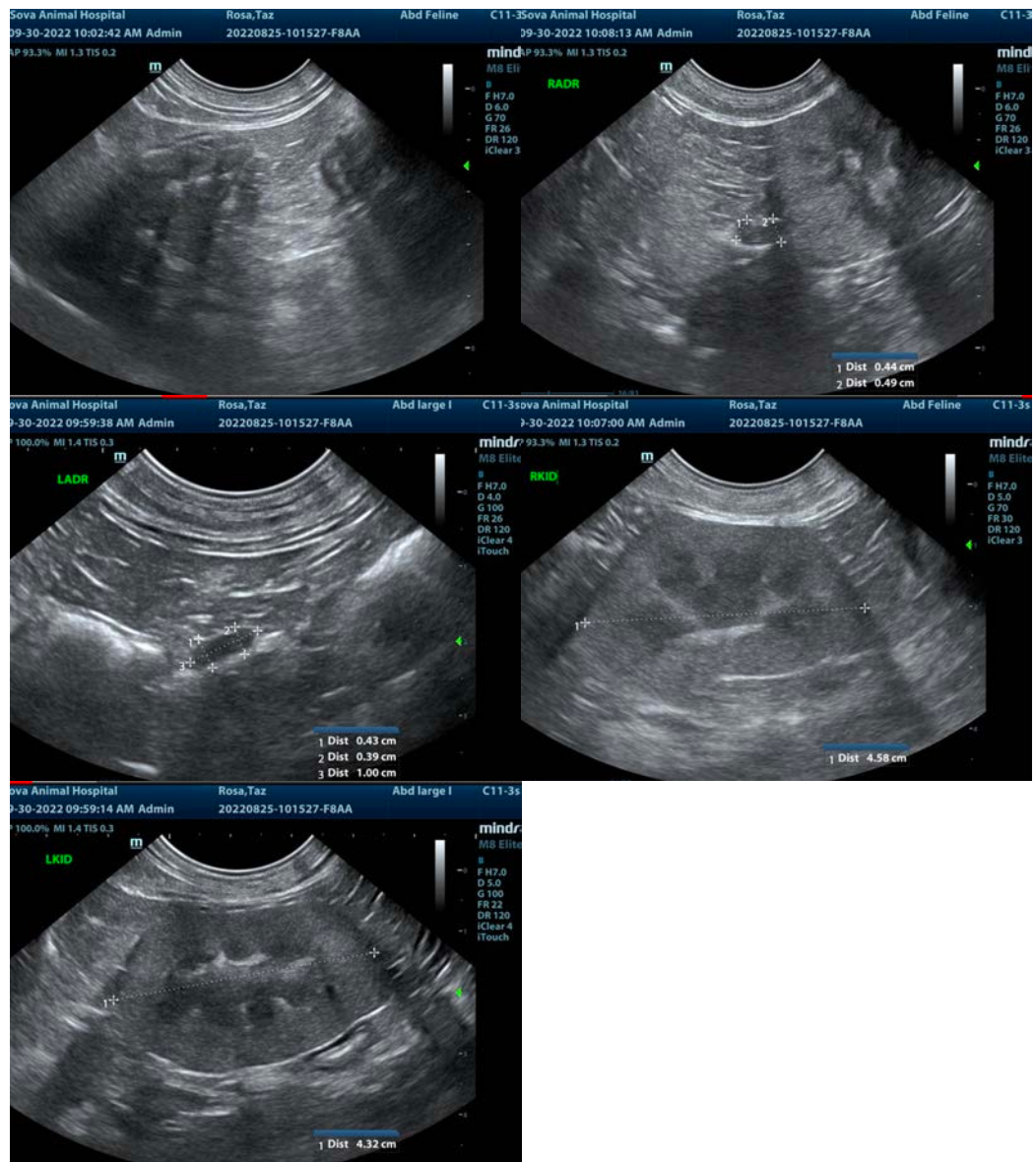
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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