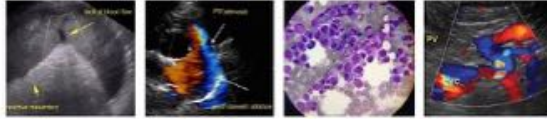


<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Wesker Colling	History: Presented for not eating well, thickened feeling organs on palpation, vomited once, hiding and vocalizing and shaking/wobbly. Was given Vit B, Baytril, SQ fluids, Cerenia and Convenia. Seems a bit better today.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: BUN 68.6, Creatinine 1300, Calcium 1.80, Potassium 8.2, Sodium/Potassium ratio low
Feline	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Domestic Shorthair	<b>Urinary System</b>
<b>SEX</b>	The <b>urinary bladder</b> , trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. 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 was noted. Ureteral papillae were normal.
Neutered male	
<b>AGE</b>	The <b>left kidney</b> was swollen with some loss of corticomedullary definition. Minor pyelectasia was noted in the left kidney. Slight, pinpoint mineralizations were noted. The left kidney measured 4.75 cm. Mild to moderate subnormal blood flow noted on Power Doppler assessment of the left kidney. The right kidney was significantly subnormal in size and dystrophic measuring 1.8 cm with negative blood flow on power Doppler assessment.
11 years	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
11.9 lbs	Both <b>adrenal glands</b> 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 0.36 cm. The right adrenal gland measured 0.52 cm.
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>spleen</b> in this patient was uniform, yet volume contracted. Hydration status should be assessed.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Crystal Hill, RVT	The <b>liver</b> 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.
<b>HOSPITAL NAME</b>	
The Maples AH	
<b>REFERRING VET</b>	
Dr. Kazienko	
<b>INVOICE</b>	
<b>DATE</b>	<b>Gastrointestinal</b>
7/22/22	The <b>stomach</b> was filled with progressively shadowing material, likely hair accumulation. The small intestines and colon were unremarkable.



**PATIENT**

Wesker Colling

**Pancreas**

The left limb of the **pancreas** was hypoechoic and mildly irregular.

**SPECIES**

Feline

**ULTRASONOGRAPHIC FINDINGS**

Acute on chronic nephritis with pyelectasia in left kidney.

Dystrophic right kidney.

Hairball density.

**BREED**

Domestic Shorthair

**SEX**

Minor, irregular left pancreatic limb, suggestive of pancreatitis.

Neutered male

**AGE**

11 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I recommend urine culture and sensitivity along with 72-hour IV fluid protocol and blood pressure measurements are all indicated. Hairball therapy is warranted as well as pain management and broad spectrum antibiotics. The prognosis is guarded.

**WEIGHT**

11.9 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Crystal Hill, RVT

**HOSPITAL NAME**

The Maples AH

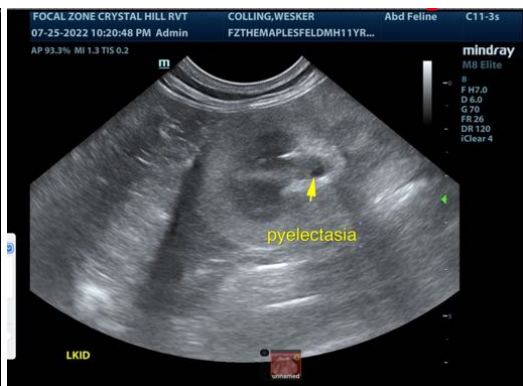
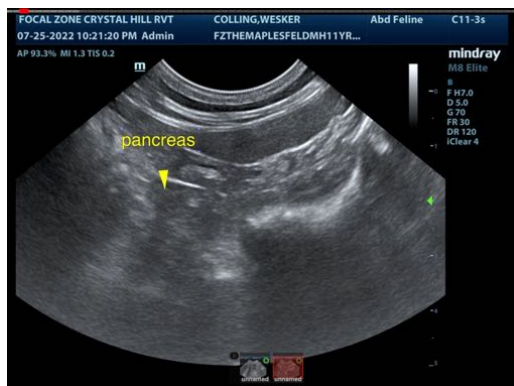
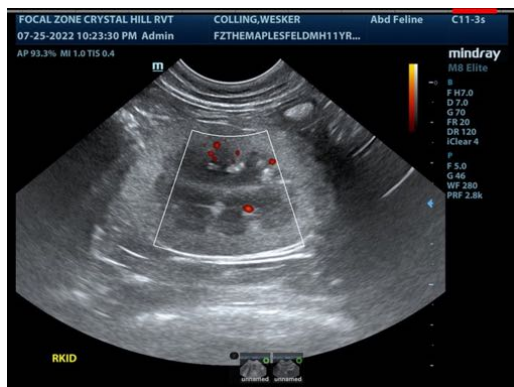
**REFERRING VET**

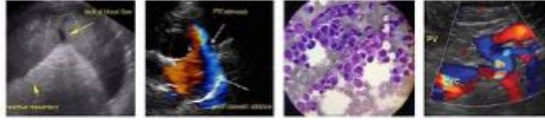
Dr. Kazienko

**INVOICE**

**DATE**

7/22/22





**PATIENT**

Wesker Colling

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Neutered male

**AGE**

11 years

**WEIGHT**

11.9 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Crystal Hill, RVT

**HOSPITAL NAME**

The Maples AH

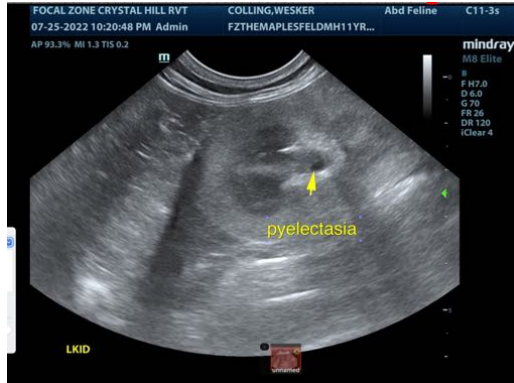
**REFERRING VET**

Dr. Kazienko

**INVOICE**

**DATE**

7/22/22



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  
Eric.Lindquist@SonoPath.com