



## PATIENT

Tinky Devirgilio

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Neutered male

## AGE

15 years

## WEIGHT

7.9 lbs

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS, CEO of  
SonoPath.com

## IMAGING PERFORMED BY

Vincent Ravancho

## HOSPITAL NAME

Woodcliff Lake VH

## REFERRING VET

Dr. Black

## INVOICE

69231

## DATE

12/2/25

## PRESENTING CLINICAL SIGNS

History: Diarrhea BCS: 3/9

## 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 was noted. Ureteral papillae 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.84 cm. The right kidney measured 4.01 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 0.25 cm. The left adrenal gland measured 0.47 cm.

### *Spleen*

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 was noted.

### *Liver*

The **liver** was mildly enlarged and reactive. The liver was diffusely hyperechoic to the falciform fat. The gallbladder and common bile duct were unremarkable.



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**Gastrointestinal**

The **gastrointestinal tract** was hyperperistaltic with wall thickening and occasional hyperechoic linear structure that was non-obstructive. This may be related to roundworm burden. The colon was unremarkable. The mesenteric lymph nodes were mildly enlarged and reactive.

**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**

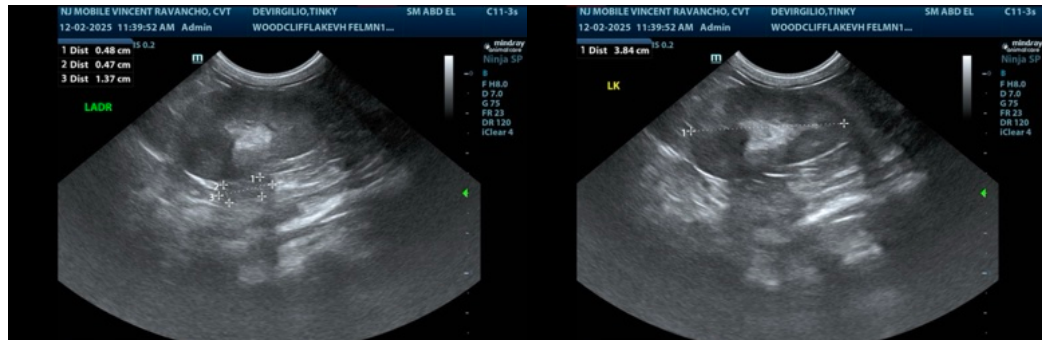
Non-obstructive linear structures noted in the small intestine.

Hyperperistaltic GI tract, suspect chronic inflammatory bowel. Malassimilation may be an issue.

Age related abdominal changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Fecal test is recommended to assess for potential worm burden. Maldigestion panel is indicated.





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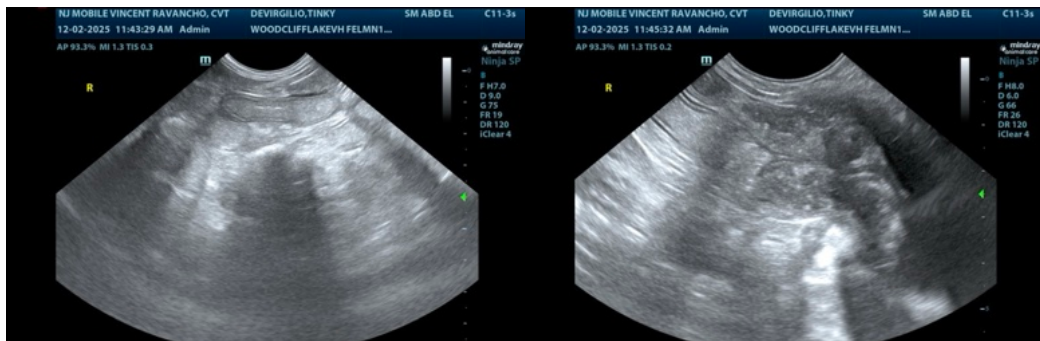
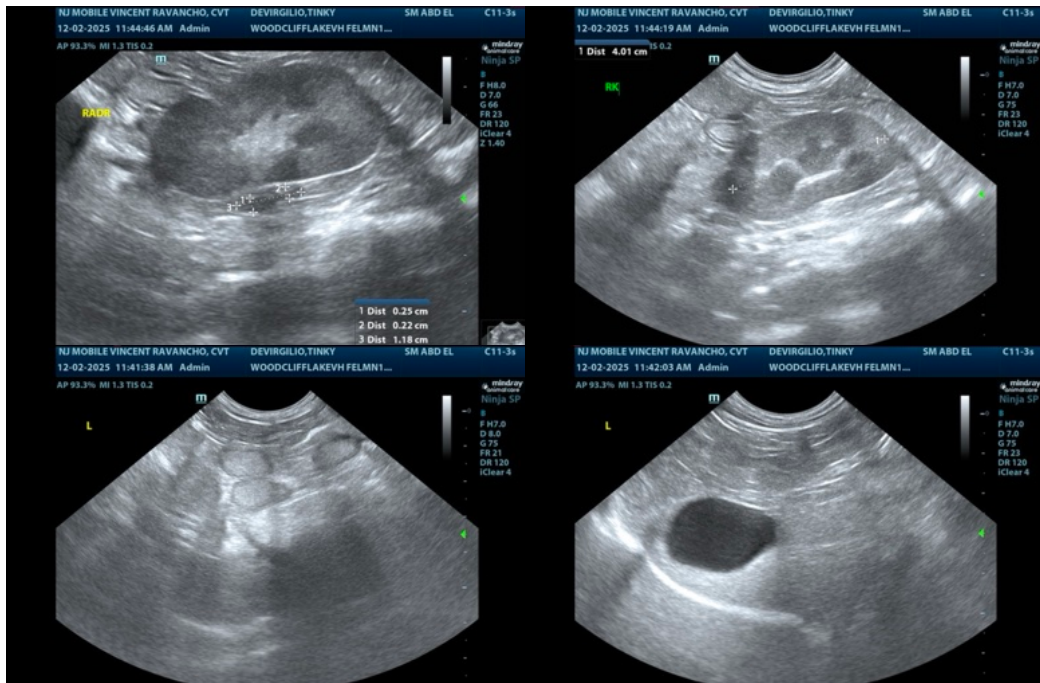
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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.

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS, CEO of SonoPath.com

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