



PATIENT

Luna Griffin

PRESENTING CLINICAL SIGNS

History: Vomiting, owner reports cat ate the string from a balloon. Cat had Gabapentin yesterday.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Domestic Shorthair

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.

SEX

Spayed female

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 right kidney measured 3.78 cm. The left kidney measured 3.48 cm.

AGE

6 months

WEIGHT

5.58 lbs

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 0.33 cm.

INTERPRETED BY

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

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. The spleen measured 0.76 cm.

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

Westwood Regional
VH

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.

REFERRING VET

Dr. Aranow

INVOICE

43081

DATE

12/13/22



PATIENT

Gastrointestinal

Luna Griffin

The **stomach** in this patient presented concentric hypertrophy. There is slight shadowing material in the pylorus measuring 0.3 cm and was non-obstructive. The mesenteric lymph nodes were reactive and measured 1.5 x 0.55 cm. Slight epigastric lymph nodes were enlarged and measured 0.96 cm.

SPECIES

Feline

Pancreas

BREED

Domestic Shorthair

The left limb of the **pancreas** was hypoechoic and irregular with mild, enhanced surrounding mesentery.

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed female

Structurally normal abdomen with juvenile reactive lymph nodes.

AGE

Gastritis, minor pancreatitis pattern with slight non-obstructive 0.3 cm material in the stomach. This may be residual oral medications or ingesta, yet not clinically an issue.

6 months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

5.58 lbs

There was no evidence of pathology. supportive care should prove effective. Gastric biopsies would be ideal in this patient as granulomatous disease is a strong potential or other forms of gastritis. Supportive care, GI protectants are indicated. There is no evidence of string foreign body. A clinical trial of Zithromax, Metronidazole, GI protectants and bland, canned b.i.d. feedings after 24 hour n.p.o. would be appropriate. Otherwise, endoscopy or full thickness gastric biopsies are recommended. No evidence of pathology related to the history of ovariohysterectomy.

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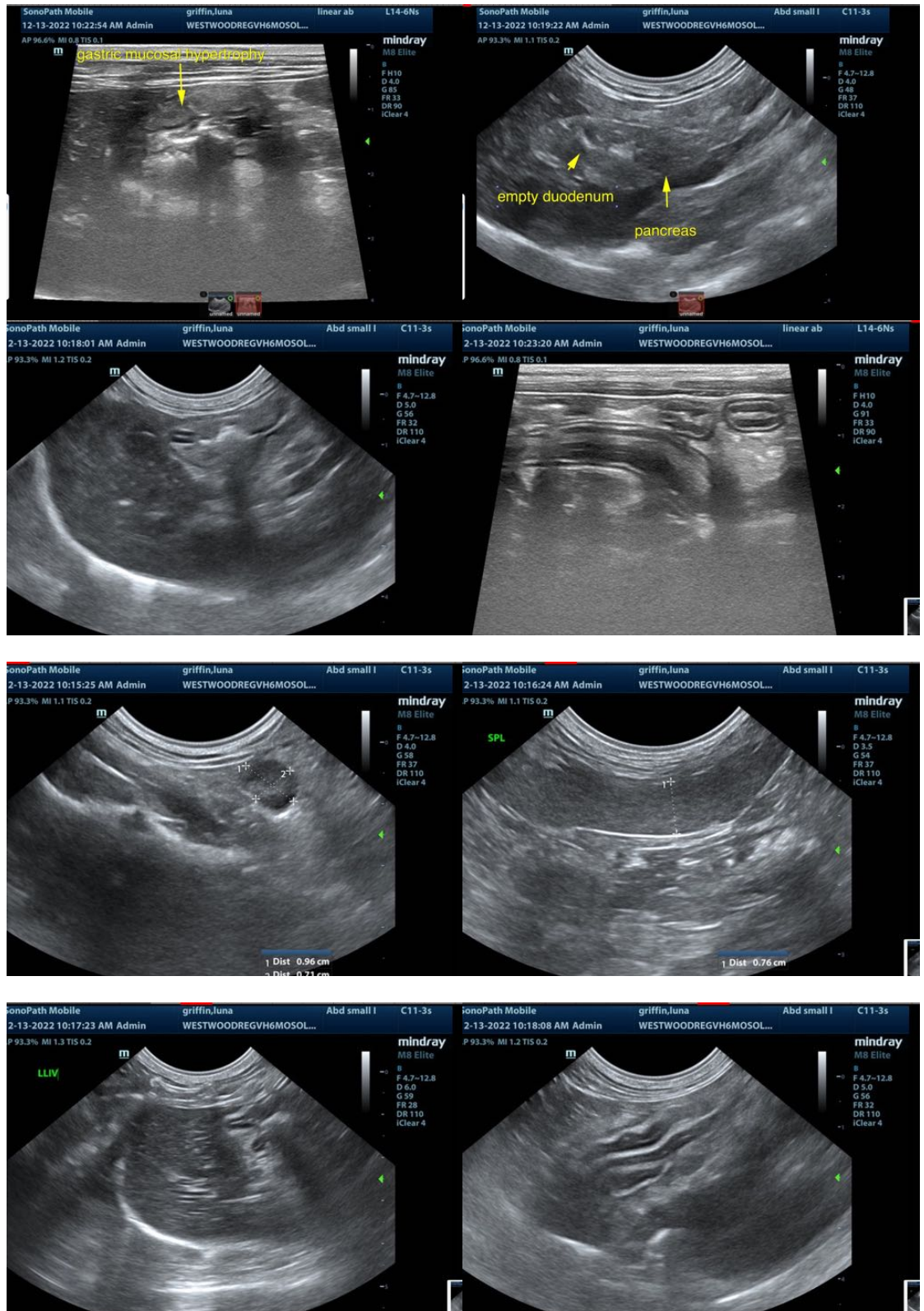
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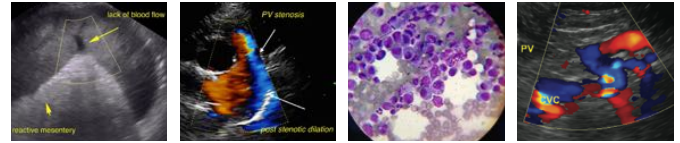
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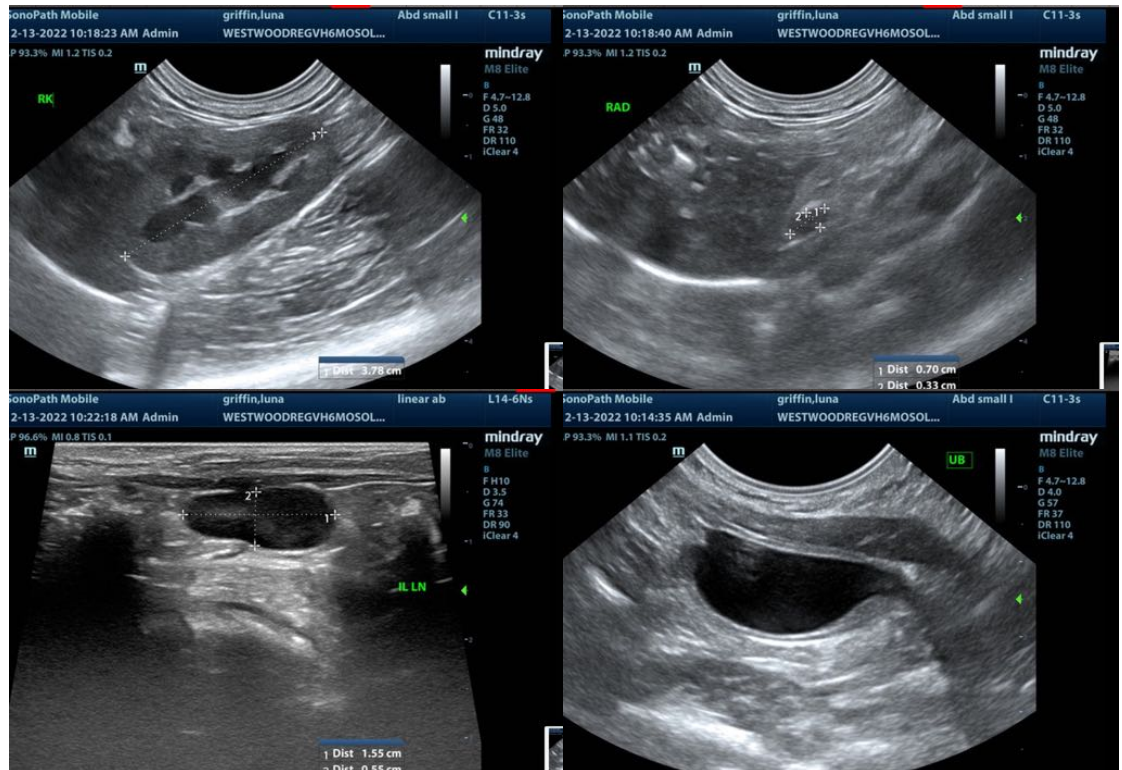
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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