



**PATIENT**

Herman Naus

**SPECIES**

Feline

**BREED**

Persian

**SEX**

Neutered Male

**AGE**

6 Years

**WEIGHT**

9.2 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Kelly Ryan

**HOSPITAL NAME**

City Vets Uptown

**REFERRING VET**

Dr. Kelly Ryan

**INVOICE**

17749

**DATE**

10/16/22

**PRESENTING CLINICAL SIGNS**

History: Here for ultrasound training, no concerns.

Abnormal PE/Chem/CBC/UA Results: Sent out labs - no results currently

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI. This is a mild change. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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 left kidney measured 3.91 cm The right kidney measured 3.65 cm.

**Adrenal Glands**

The regions of the **adrenal glands** revealed no evidence of pathology.

**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 were noted.

**Liver**

The **liver** itself was unremarkable. The gallbladder revealed gallbladder sand, measuring 1.16 cm.

**Gastrointestinal**

The **stomach** itself was unremarkable. Minor transit of chyme was noted in the small intestine.

**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**

- Minor gallbladder sand
- Urinary bladder debris



**PATIENT**

- Minor transit of chyme into the small intestine noted

Herman Naus

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Ursodiol therapy could be considered from a proactive standpoint, though it's highly variable on dissolution of this type of gallbladder sand. No evidence of significant disease.

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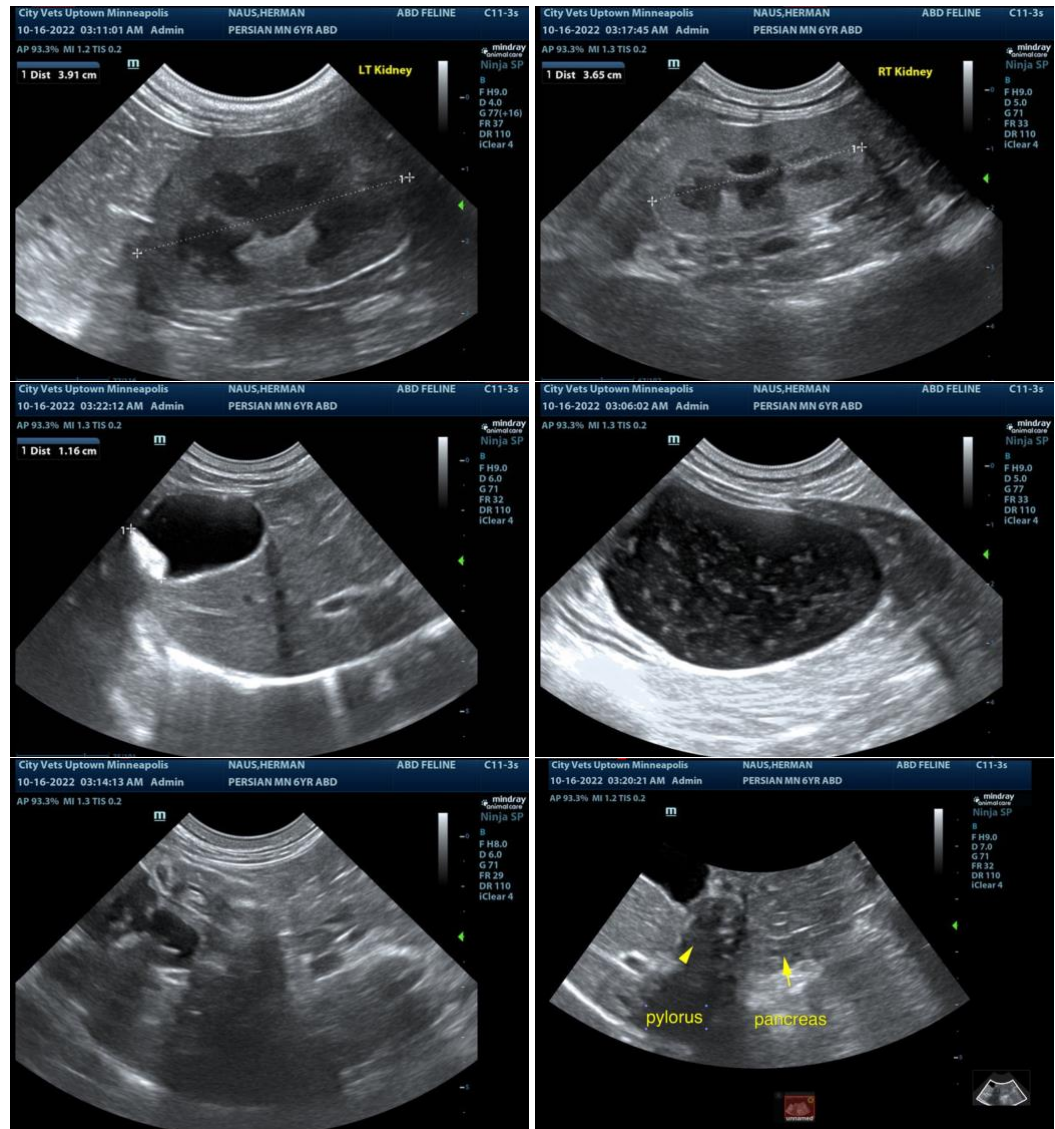
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
info@SonoPath.com