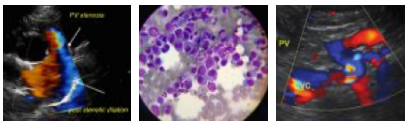
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE

10/19/2021

PATIENT

Precious Bocian

SPECIES

Feline

BREED

Persian

SEX

Female, spayed

AGE

10/9/2008

WEIGHT

4.87 lbs.

INTERPRETED BY

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

HOSPITAL NAME

Banfield Pet Hospital of Towson

REFERRING VET

Dr. Mike

INVOICE

12397

PRESENTING CLINICAL SIGNS

History: BCS 3/9; wt- _4.87 lbs /_2.21 kg; mm-pink/moist; crt<2sec; eent- _conjunctival swelling and edema present last visit resolved; incomplete cataract OD; Nuclear sclerosis OS; 3/4 dental tartar; 2/4 gingivitis; neck lesions, stenotic nares; h/l- no murmur or abn sounds, pulses strong and steady; abd- soft, non-painful on palp; s/c- wound with scab over area caudal thigh, when scab removed granulation tissue visible; pln- wnl;

Continued weight loss despite good appetite and offering as much food as wants.

Current Medications: No current medications.
Lab Results: bw 10/2/21 cbc/chem/electrolytes/t4 normal.
Radiographs: Not provided by the veterinarian.
Date of Previous IntraPet Ultrasound: No previous IntraPet scans.
Sedation: Gabapentin administered prior to scan.
Stat Report: STAT report not requested by the veterinarian.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

The left kidney is normal in size (3.26 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

The right kidney is normal size (2.82 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

Adrenal Glands

The left adrenal gland is normal in size (0.37 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.51 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen. A 1.65 x 0.64 cm hypoechoic nodule is observed near the caudal aspect. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is normal in thickness. A small to moderate amount of echogenic debris, some of which is adherent and some of which is suspended is observed within the lumen. The cystic and common bile ducts are normal with no evidence of dilation. A small amount of echogenic debris is also seen within the cystic duct. The duodenal papilla is upper limits of normal size (0.52 cm in width). There is no evidence of obstruction.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall is mildly thickened (up to 0.29 cm) with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio with a 1:1 ratio in most segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.

Pancreas

The right limb of the pancreas is prominent with minimal deviation from the normal peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is visible but not overtly dilated (0.16 cm in diameter).

Free Abdomen

There is no evidence of free fluid. The abdominal lymph nodes are normal/not visible.

Other

A brief echocardiogram reveals no evidence of pericardial effusion.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Bowel pattern consistent with severe inflammatory bowel disease or emerging lymphoma.
- The pancreatic changes are suggestive of chronic pancreatitis. However, correlation with clinical findings is recommended.

Secondary Findings:

- The hypoechoic hepatic nodule trends toward the benign (i.e., a focus of lymphoid hyperplasia, inflammation, other) with a lower possibility of emerging neoplasia.
- Bilateral nephropathy with dystrophic mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for occult neoplasia as a possible cause for weight loss.
- A more advanced GI workup should also be considered, including the following:
    1. GI panel (i.e., serum cobalamin, folate, TLI and PLI)
    2. A fecal evaluation for ova/Giardia
    3. Limited antigen diet trial
    4. +/- endoscopic or surgical gastrointestinal biopsies


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:47:25 AM Admin
BANTOWpbfelpersfs2008
Liver LT
Dist 0.65 cm
Dist 0.64 cm
mindray


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:48:02 AM Admin
BANTOWpbfelpersfs2008
Liver
mindray


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:48:08 AM Admin
BANTOWpbfelpersfs2008
Liver
DUO PAP
Dist 0.52 cm
mindray


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:48:30 AM Admin
BANTOWpbfelpersfs2008
Liver
mindray


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:49:02 AM Admin
BANTOWpbfelpersfs2008
Pancreas
Dist 1.07 cm
mindray


IntraPet Imaging APIILLC
bocian,precious
IntraPet abd...
C11-3s
10-19-2021 08:49:40 AM Admin
BANTOWpbfelpersfs2008
Stomach
mindray

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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com