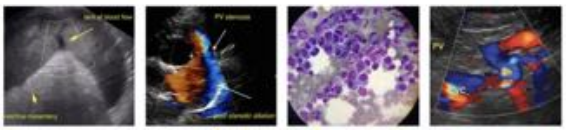
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com



Charleston Mobile Veterinary Services
IMAGING PERFORMED BY
CharlestonMobile.Net 800.403.5408

PATIENT

Scar Martino

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

01/21/2013

WEIGHT

9.4 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Sun Dog Cat Moon

REFERRING VET

Kelsey Pruitt

INVOICE

12642

DATE

4.4.23

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: acute on chronic ataxia, anorexia, extreme lethargy, hiding

Abnormal lab-work values: anemic will have lab work available.
Current Medications: none

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is distended. A small to moderate amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 1-2 cm, are normal.

The left kidney is borderline enlarged (4.43 cm in length) with normal curvilinear peripheral contours. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. Trace pyelectasia is present (0.14 cm in the transverse plane). There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is enlarged (4.65 cm in length) with a slightly irregular shape. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. A cortical infarct is observed at the lateral aspect. There is no evidence of pyelectasia, nephroliths or hydroureter. Renal vasculature is normal. The mesentery surrounding the lateral aspect of the kidney is hyperechoic.

Adrenal Glands

The left adrenal gland is normal size (0.32 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.48 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.80 cm in width at the level of the hilus) with a normal capsular contour. Using hepatopathy high-frequency probe, the parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The portal vein to caudal vena cava ratio is approximately 1: 1.

The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are visible/tortuous but not overtly dilated. The common bile duct measures 0.30 cm in diameter at the distal aspect. The duodenal papilla is normal in size (0.43 cm in width).

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 normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not

identified. The ileocecocolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

Pancreas
The left limb is prominent in size with minimal deviation from the normal peripheral contours. The parenchyma is mildly hypoechoic relative to surrounding omental fat and homogenous in appearance. The pancreatic duct is dilated (up to 0.44 cm in diameter). There is no evidence of peripancreatic effusion.

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

Other
A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

ULTRASONOGRAPHIC FINDINGS

Findings

- Mild bilateral renomegaly. Considerations include interstitial nephritis, emerging neoplasia (i.e., lymphoma), normal variant, other. A right cortical infarct is present. Mild chronic renal changes are also seen. There is evidence of right cranial retroperitonitis.

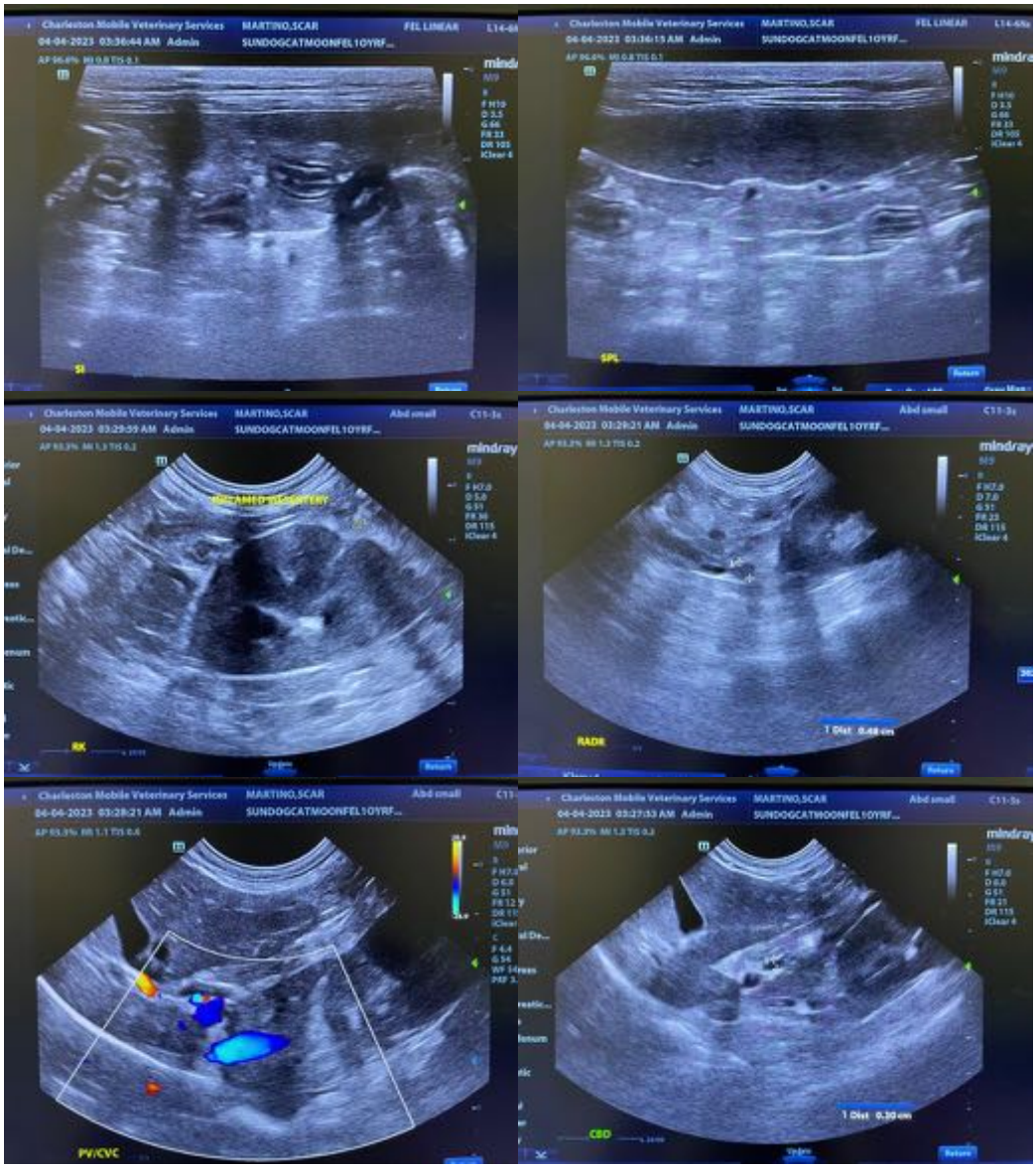
- The pancreatic changes are suggestive of chronic pancreatitis.

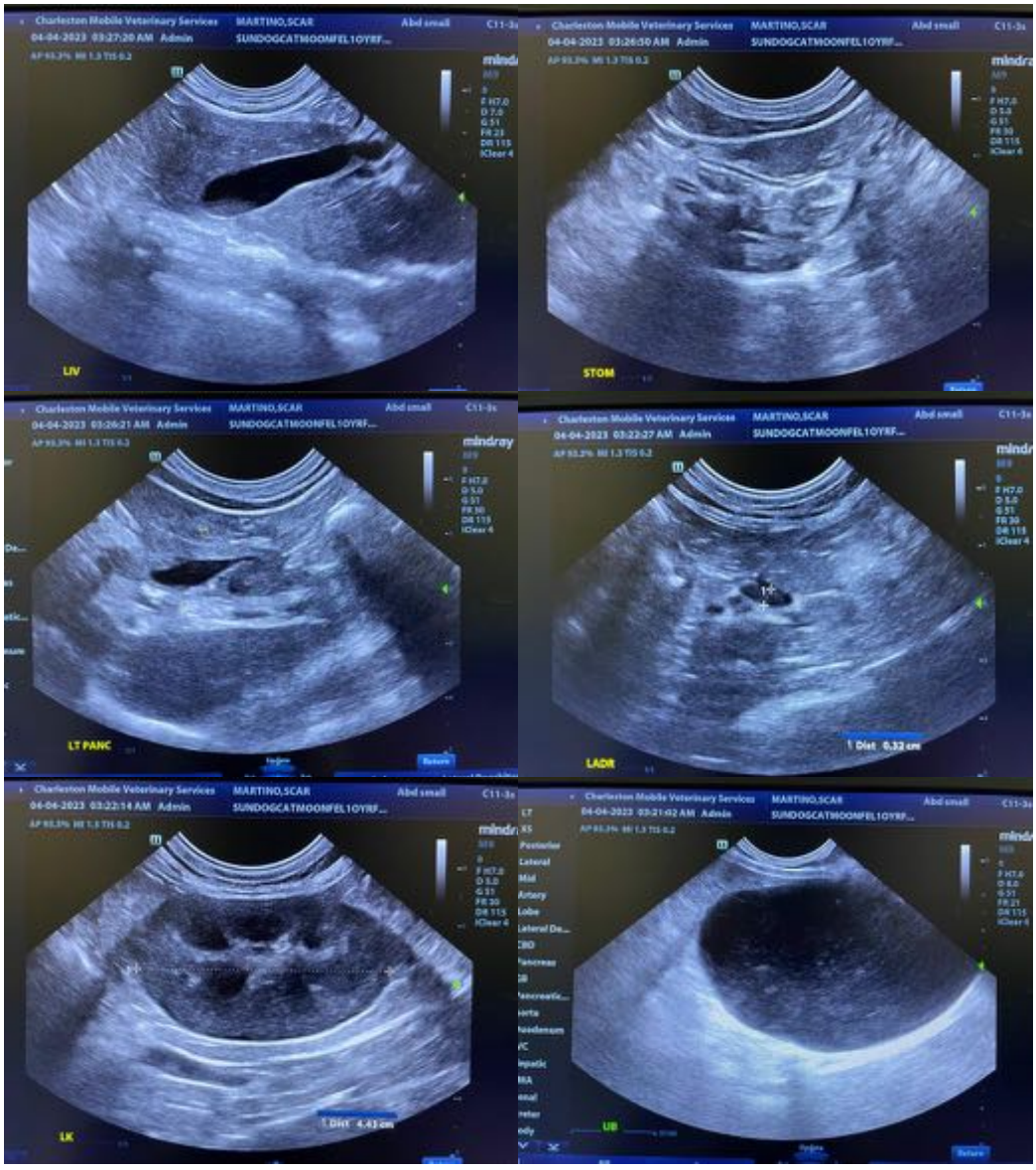
- The urinary bladder debris could be consistent with cells, crystals, exfoliated material, mucous, and/or lipid droplets.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Given the renal changes, consider a urine culture and sensitivity. While awaiting test results, consider empirical treatment for interstitial nephrosis/nephritis (i.e., fluoroquinolone) which has better renal tissue penetration, along with symptomatic care. If the patient does not respond to the above treatments, consider further work-up:

    1. Three-view thoracic radiographs
    2. Echocardiogram to assess for endocarditis
    3. Creatinine kinase to indirectly evaluate for myositis
    4. Renal aspirate
    5. Further testing for infectious disease (i.e., FIP, toxoplasmosis, +/- tick-borne disease)
    6. Orthopedic and neurologic examinations are also recommended to assess for nonmetabolic for the patient's clinical signs.


Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:36:44 AM Admin
SUNDOGCATMOONFEL10YRF...
SI
Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:36:15 AM Admin
SUNDOGCATMOONFEL10YRF...
SPL
Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:29:59 AM Admin
SUNDOGCATMOONFEL10YRF...
RK
Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:29:21 AM Admin
SUNDOGCATMOONFEL10YRF...
RADR
1 Dist 0.48 cm
Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:29:21 AM Admin
SUNDOGCATMOONFEL10YRF...
PV/CVC
Charleston Mobile Veterinary Services
MARTINO,SCAR
04-04-2023 03:27:53 AM Admin
SUNDOGCATMOONFEL10YRF...
CBD
1 Dist 0.30 cm



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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com