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Clinical Sonography & Telecytology
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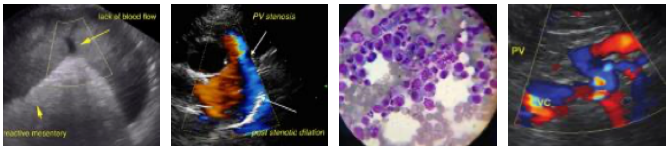

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1-800-838-4268 info@sonopath.com

PATIENT
Peanut Gardner

SPECIES
Feline

BREED
Domestic shorthair

SEX
Male, neutered

AGE
10 Yrs.

WEIGHT
5 kg.

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

IMAGING PERFORMED BY
Erin Wicks

HOSPITAL NAME
Shores Veterinary Emergency Center

REFERRING VET
Dr. Moser

INVOICE
15090

DATE
6/27/23

PRESENTING CLINICAL SIGNS

History: Presented at our hospital for AUS. Has been losing weight (2lbs) after a brief change in food in April. Also has been recently eating small pieces of plastic bags. Took to rdvm, did bloodwork and rads, found a mass type structure, unsure if obstruction or mass, ibd/etc. Did repeat rads and structure appeared smaller and like it was moving. Rec AUS. Vomited bile twice last Wednesday and Thursday. Previous Health Concerns: 2 bad teeth Current Medications: Baytril and Cerenia but finished both. Appetite/When did they eat last: eating well, not eating dry food (bad teeth), ate sm amt this morning Abnormal PE/Chem/CBC/UA Results: Rdvm bloodwork: 6/23/23 Retic 88.2; all else wnl including TT4 Rdvm rad notes: gas filled bowels, something in bowels?

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small amount of suspended echogenic debris is observed within the . No cystic calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney is normal size (4.78 cm in length); normal shape and architecture with smooth peripheral margins. The cortex is hyperechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. Mild pyelectasia is present (0.20 cm in the transverse plane). There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (4.99 cm in length); normal shape and architecture with smooth peripheral margins. The cortex is hyperechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size (0.36 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.35 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.71 cm in width at the level of the hilus) 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 isoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gallbladder 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 normal.

Gastrointestinal

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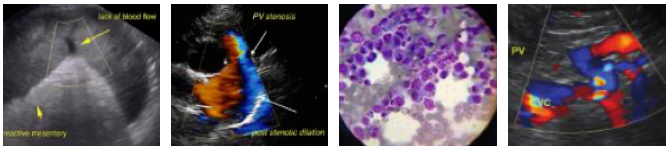

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The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. One bowel loop in the cranial to mid-abdominal region is moderately fluid distended and appears hypomotile. Most of the small intestinal segments are gas distended. Adjacent to the ileocecocolic junction, there is a several cm segment of bowel containing shadowing material. It is unclear whether this shadowing is in the distal ileum or the ascending colon. The wall in this region is mildly thickened (up to 0.36 cm) with suspected retention of the normal layering pattern. At the ileocecocolic junction, the wall is prominent to mildly thickened with a prominent muscularis layer. The distal colonic lumen contains shadowing fecal material.

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

Free Abdomen

There is no obvious evidence of free fluid. A few prominent lymph nodes are observed at the ileocecocolic junction, the largest measuring 1.15 cm in its longest dimension. Surrounding mesentery is hyperechoic.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The location of the shadowing material within the bowel lumen may be distal ileum or proximal ascending colon. The shadowing material may represent foreign material or barium (if previously administered). The associated bowel wall thickening is suspected to represent an inflammatory process with potential for emerging neoplasia.

Secondary Findings:

- Bilateral chronic renal changes with mild left pyelectasia.
- The prominent abdominal lymph nodes are most consistent with reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If barium was not previously administered, consider a barium enema to determine if there is foreign material is present in the ascending colon. If results are inconclusive, abdominal exploratory to evaluate for an intestinal foreign body/obstruction may be warranted. If pursued, GI biopsies should also be obtained to assess for underlying bowel pathology.

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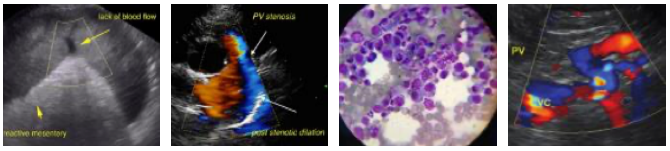

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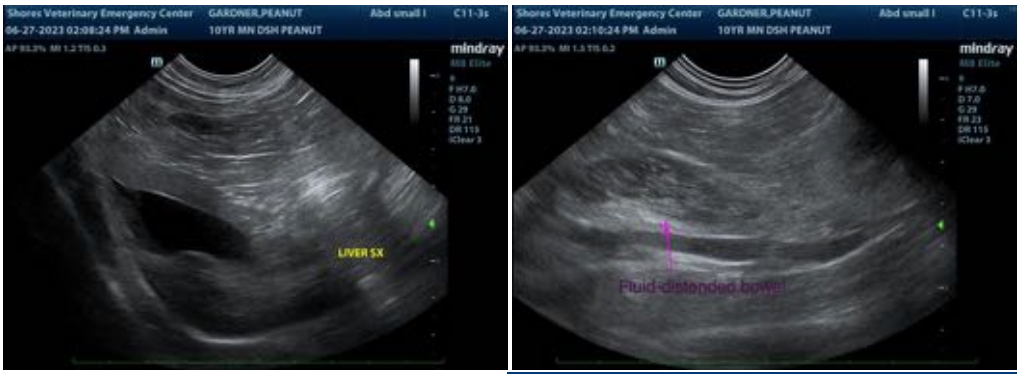

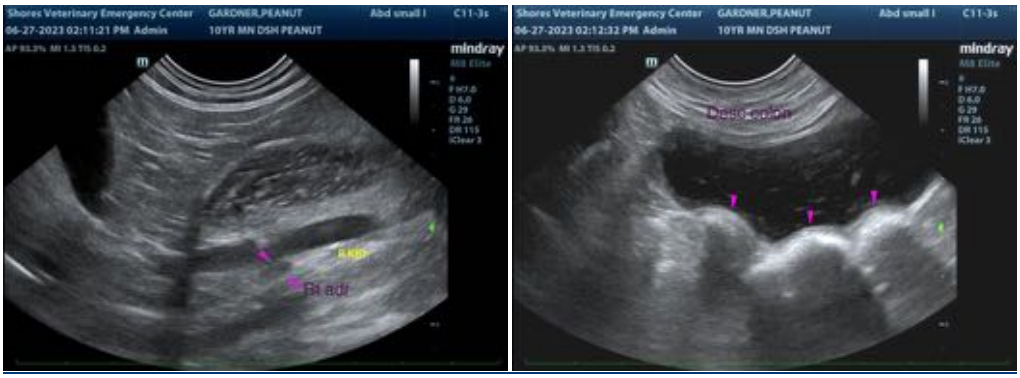

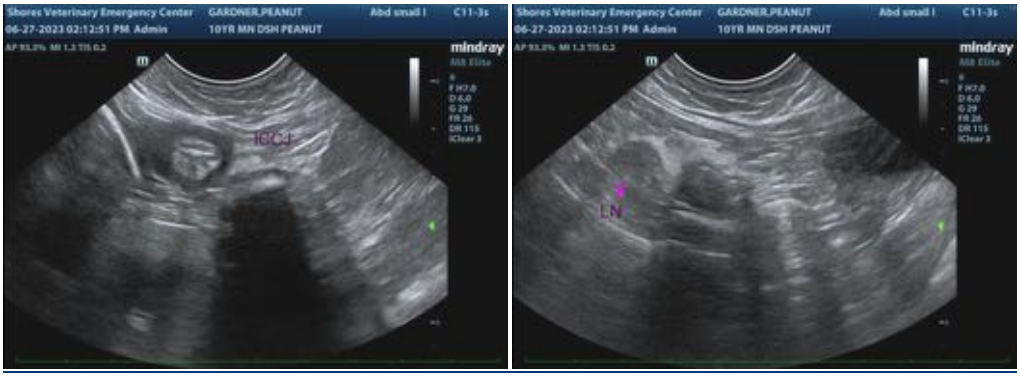

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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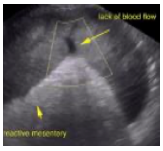
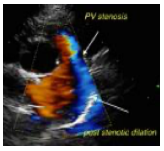
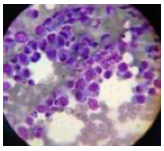
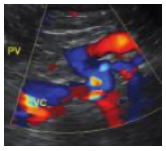

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