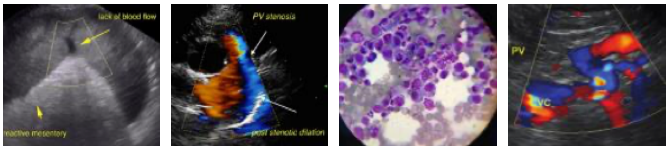
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT
Burnie Kreider

SPECIES
Feline

BREED
Domestic shorthair

SEX
Male, neutered

AGE
18 Yrs.

WEIGHT
9.2 lbs.

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

IMAGING PERFORMED BY
Dr. Jack Reese

HOSPITAL NAME
Willow Run VC

REFERRING VET
Dr. Jack Reese

INVOICE
11908

DATE
8/18/21

PRESENTING CLINICAL SIGNS

History: Weight loss and inappetence over last 2 months. 2 lb weight loss from May to August of this year. O reports that appetite has decreased slightly over that time. Known renal insufficiency
Abnormal PE/Chem/CBC/UA Results: SDMA 15 TP 4.7 Glob 1.8 Poor body condition

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 with anechoic urine. 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 (3.94 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. Mild pyelectasia is present (0.30 cm in the longitudinal plane). There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (4.07 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal 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 (0.97 cm length; 0.49 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.86 cm length; 0.32 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

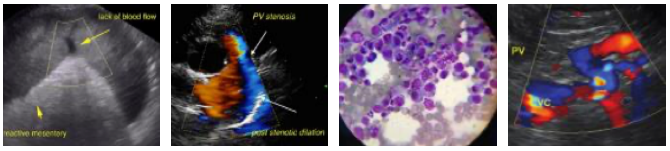
The spleen is normal in size (0.63 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively prominent in size with normal curvilinear peripheral contours. The parenchyma is hyperechoic 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 gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

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 thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.



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

PATIENT
Burnie Kreider

SPECIES
Feline

BREED
Domestic shorthair

SEX
Male, neutered

AGE
18 Yrs.

WEIGHT
9.2 lbs.

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

IMAGING PERFORMED BY
Dr. Jack Reese

HOSPITAL NAME
Willow Run VC

REFERRING VET
Dr. Jack Reese

INVOICE
11908

DATE
8/18/21

Pancreas

The right limb of the pancreas is prominent in size with slightly irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is visible but not overtly dilated (0.20 cm in diameter). The mesentery effacing the serosal surface is mildly hyperechoic.

Free Abdomen

There is no evidence of free fluid. At least one prominent lymph node is observed at the ileocecal colic junction.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The pancreatic changes are suggestive of acute or chronic, active pancreatitis.
- The prominent mid-abdominal lymph node is likely reactive.
- Hepatic changes are non-specific and could be consistent with hepatic lipidosis, inflammatory/infectious disease, infiltrative neoplasia, or other hepatopathy.

Secondary Findings:

- Minor bilateral age-related renal changes with left dystrophic mineralization and pyelectasia.

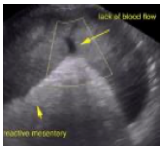
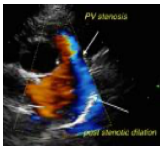
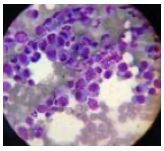
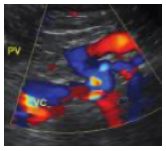
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Regarding the renal changes, consider a urine culture and sensitivity +/- UPC (if proteinuria is present).
- Regarding the patient's clinical signs, the following diagnostics/therapeutics can be considered:
  1. Three-view thoracic radiographs to assess for occult neoplasia in the chest.
  2. Serum cobalamin, folate, PLI and TLI
  3. A fecal evaluation for ova/Giardia
  4. Supportive care for pancreatitis.
  5. +/- endoscopic or surgical gastrointestinal biopsies

SonoPath

Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

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

PATIENT

Burnie Kreider

SPECIES

Feline

BREED

Domestic shorthair

SEX

Male, neutered

AGE

18 Yrs.

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

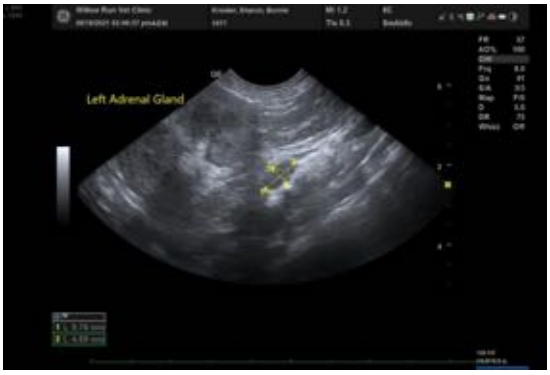
Dr. Jack Reese

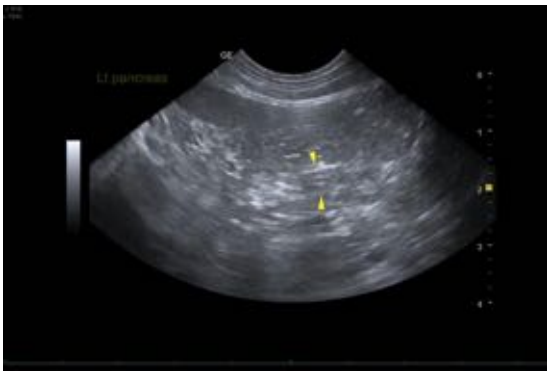
INVOICE

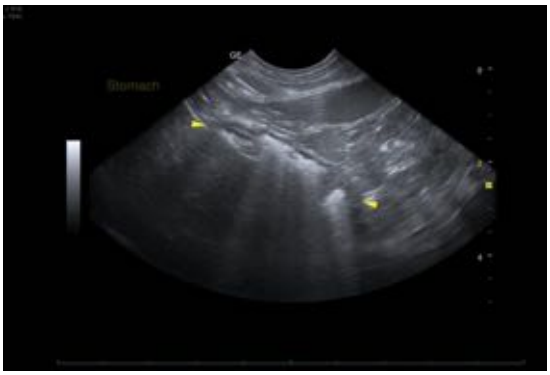
11908

DATE

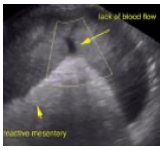
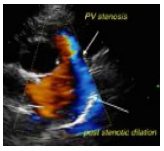
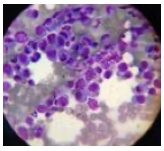
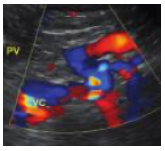
8/18/21







SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

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

PATIENT

Burnie Kreider

SPECIES

Feline

BREED

Domestic shorthair

SEX

Male, neutered

AGE

18 Yrs.

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

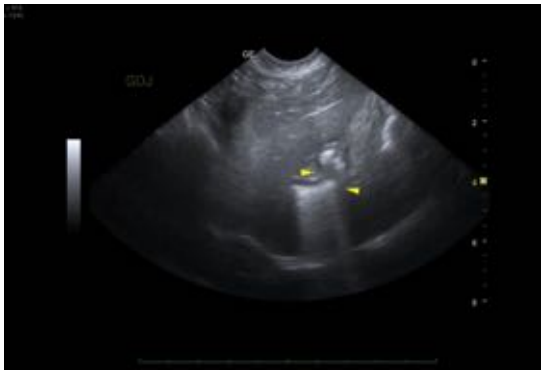
Dr. Jack Reese

INVOICE

11908

DATE

8/18/21



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