



PATIENT

Peanut Torun

PRESENTING CLINICAL SIGNS

History: Presented yesterday for abdominal breathing. Xrays show suspected hernia. They were sent to Sonopath for telemedicine.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Please see attached radiographs

BREED

Scottish
Fold/Munchkin

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.

SEX

Female Intact

The left kidney is normal size (2.33 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE

13 Weeks

The right kidney is normal size (2.85 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

1.4 kgs.

Adrenal Glands

The left adrenal gland is normal size (0.20 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

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

The right adrenal gland is normal size (0.20 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Crystal Hill

Spleen

The spleen is normal in size (0.33 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.

HOSPITAL NAME

Collegeway AH

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. A portion of the liver as well as a small amount of falciform fat is herniated into the thoracic cavity. 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.

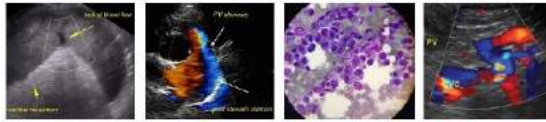
REFERRING VET

Gastrointestinal

The gastric lumen is distended with ingesta. 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 colonic wall is normal. No obstructive disease is noted.

INVOICE
11920kk

DATE
9/29/21



PATIENT *Pancreas*

Peanut Torun 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.

SPECIES *Free Abdomen*

Feline Trace free fluid is observed. A few prominent mesenteric lymph nodes are seen.

Other

BREED A brief echocardiogram reveals no evidence of pericardial effusion. There is questionable trace pleural effusion.

Scottish Fold/Munchkin

ULTRASONOGRAPHIC FINDINGS

SEX

- Based on the clinical history, radiographs, and sonographic findings, peritoneal-pericardial, diaphragmatic hernia with partial herniation of the liver and falciform fat into the thoracic cavity is suspected.

Female Intact

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

13 Weeks

- Consultation with a board-certified veterinary surgeon is recommended to discuss correction of the hernia.

WEIGHT

1.4 kgs.

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Female Intact

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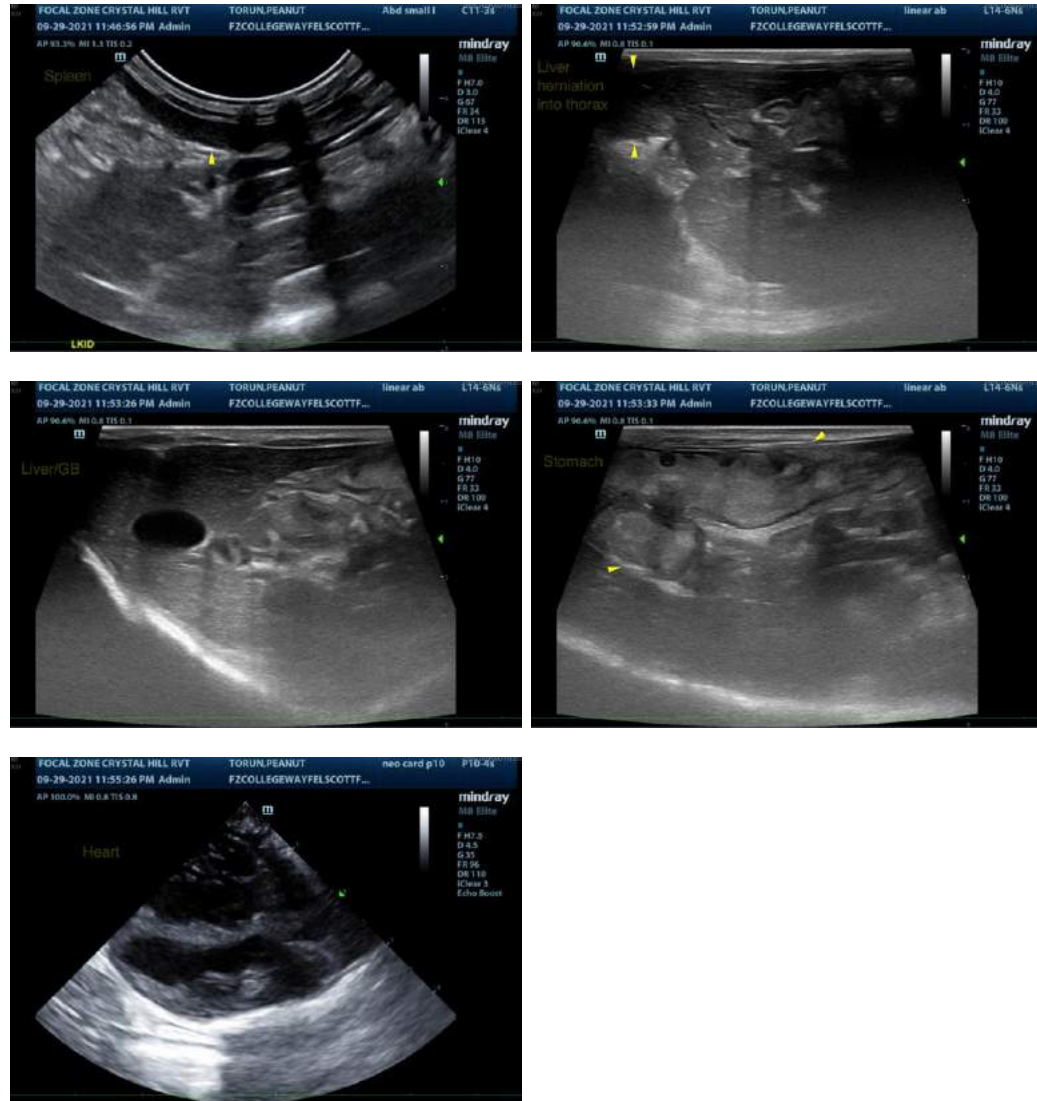
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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