



PATIENT PRESENTING CLINICAL SIGNS

Marm Vendetti Valerie stated that marm has been diagnosed with Renal disease and has been doing well until this past week. Valerie stated that marm has always had a hard time drinking and last week didn't want to drink as much so they were trying to get marm to drink more and realized marm was becoming more lethargic. Valerie stated that the last few days marm hasn't been eating or drinking and hasn't been acting herself. Valerie mentioned marm has vomited twice this morning a thick yellowish green bile.

SPECIES Feline Valerie also mentioned that sometimes marm has stuff in her nose that they have to pull out. we also did an ultrasound in 10-7-2020.

BREED Abnormal PE/Chem/CBC/UA Results: PE: Is a little dehydrated and lethargic. But seems to be good other wise. NO RECENT LABS

DMH ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX Urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

Spayed Female

AGE

Bilaterally, the kidneys are mildly swollen with the left kidney measuring 3.88 cm and the right kidney measuring 4.16 cm with thickened cortices. Minor loss of corticomedullary distinction is noted. There is no evidence of pyelectasia, mineral or infarcts observed.

3 Years 6 Months

Adrenal Glands

Right adrenal gland is normal in size (0.92 cm long x 0.60 cm thick cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

WEIGHT

9.22 Pounds

Left adrenal gland is normal in size (0.69 cm long x 0.54 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Spleen

Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

HOSPITAL NAME

Elizabeth AH

Liver

Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

REFERRING VET

Dr. Kim Allyn

Gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

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The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is mildly fluid distended with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

DATE

1/13/22



PATIENT Marm Vendetti
 The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

SPECIES Feline
 The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Pancreas
 See other.

BREED DMH
Free Abdomen
 There is no evidence of peritoneal effusion.

Other

SEX Spayed Female
 Just medial to the spleen, there is a focal hypo- to anechoic structure 2.0 cm in diameter, surrounded by slightly hyperreactive mesentery.

ULTRASONOGRAPHIC FINDINGS

- AGE** 3 Years 6 Months
- Chronic kidney disease – can be seen with glomerular or interstitial nephritis, FIP, amyloidosis, etc. Infiltrative neoplasia such as lymphoma is possible, yet considered less likely. Normal fat deposition causing hyperechoic kidneys cannot be ruled out, but is considered less likely the only change given the reported history of chronic kidney disease.
 - Hypo- to anechoic mass medial to the spleen – Differentials for which include an inflamed/cavitated lymph node versus a pancreatic cyst or mass versus other.
- WEIGHT** 9.22 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

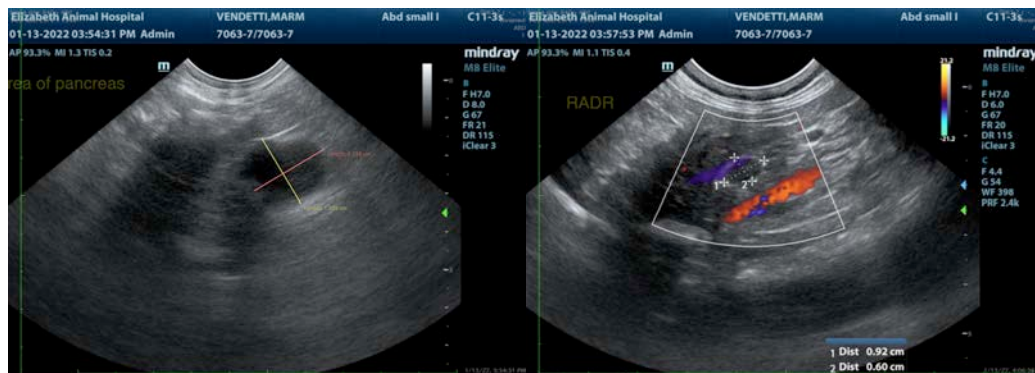
INTERPRETED BY Beth Johnson, DVM DACVIM
 Recommendations include recheck lab work (CBC, serum chemistry panel and urinalysis) followed by a urine culture if indicated based on urinalysis. If urine sediment is quiet, but there is protein present, a UPC is recommended due to the history of reported chronic kidney disease. Blood pressure is also recommended due to that history. A fine needle aspirate of the mass/lymph node is recommended for cytology and culture if patient's coagulation status is appropriate. In the meantime, continued medical management of the kidney disease including possibly an appetite stimulant or feeding tube (if the patient is completely anorexic) is recommended, followed by medical management of the possible rhinitis as described in the history, as upper respiratory infections can often result in anorexia in cats.

HOSPITAL NAME Elizabeth AH

REFERRING VET Dr. Kim Allyn

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PATIENT

Marm Vendetti

SPECIES

Feline

BREED

DMH

SEX

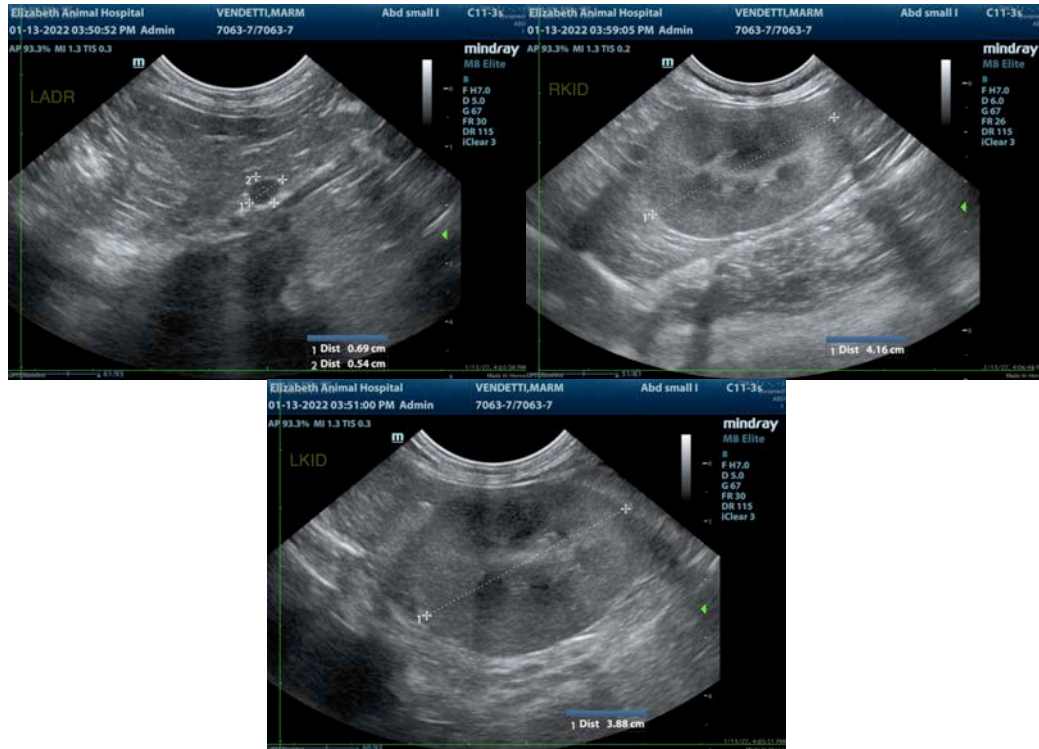
Spayed Female

AGE

3 Years 6 Months

WEIGHT

9.22 Pounds



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.

INTERPRETED BY

Beth Johnson, DVM
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HOSPITAL NAME

Elizabeth AH

REFERRING VET

Dr. Kim Allyn

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