



PATIENT	PRESENTING CLINICAL SIGNS
Emma Shifflett	Mild elevated kidney values. Irregular on palpation.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	Urinary bladder is moderately distended with anechoic contents. It has normal uniform wall thickness (< 0.2 cm). No masses or cystoliths are observed.
Domestic Shorthair	
SEX	Left kidney is normal in size (3.62 cm), shape and echogenicity. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. However, the echogenicity of the cortex is heterogenous characterized by multi-focal, hypoechoic areas. The most distinct is a nodule in the left kidney that distorts the capsule. No mineral is observed.
Spayed Female	
AGE	Right kidney is normal in size (4.0 cm), shape and echogenicity. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. However, the echogenicity of the cortex is heterogenous characterized by multi-focal, hypoechoic areas. No mineral is observed.
11 years	
WEIGHT	Adrenal Glands
8.62 lbs	Left adrenal gland is normal in size (0.96 cm long x 0.26 cm at cranial pole and 0.34 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable.
INTERPRETED BY	Right adrenal gland is normal in size (0.63 cm long x 0.2 cm thick), shape and contour. Corticomedullary structure is unremarkable.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	Spleen
Dr. Buss	Spleen is subjectively enlarged in size with rounded margins but intact capsule. Parenchyma is homogenously coarse/mottled in echotexture and normal to hypoechoic in echogenicity. No focal nodules or masses are observed. Splenic vasculature appears normal.
HOSPITAL NAME	Liver
Kings VH	Liver is subjectively normal in size. Margins are sharp and smooth. It has normal homogenous echotexture and normal echogenicity. No focal lesions are observed. Visible vasculature appears normal. Gallbladder is mildly distended with anechoic contents. The wall is smooth without visible thickening. There is no evidence of common bile duct dilation.
REFERRING VET	
Dr. Buss	
INVOICE	Gastrointestinal
95416	The visible gastric wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm). The stomach is empty.
DATE	
1/19/22	



PATIENT

Emma Shifflett

The small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestines mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease.

SPECIES

Feline

Colon is normal in wall thickness (< 0.2 cm) and layering.

BREED

Domestic Shorthair

Pancreas

Pancreas has normal homogenous echotexture and is normal in echogenicity and smooth margination. There is no evidence of peripancreatic inflammation.

SEX

Spayed Female

Free Abdomen

Lymph nodes are normal with no observed enlargement.

AGE

11 years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

8.62 lbs

Primary Findings

Coarse splenomegaly – can be associated with congestion caused by sedation (if sedated) but can also be associated with diffuse infiltrative disease. Both benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis (leave amyloidosis out if canine) as well as infiltrative neoplastic diseases such as round cell neoplasia should be considered.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Bilaterally heterogenous/nodular renal cortices, the most discrete nodule being appreciated in the left kidney. Differentials include benign chronic renal changes from infarcts versus granulomas, cysts or possibly even metastatic neoplasia. Given the normal size of the kidneys infiltrative neoplasia seems less likely, but is considered possible.

IMAGING PERFORMED BY

Dr. Buss

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Kings VH

Recommendations for this patient include a FNA of the spleen and left renal cortex if the patient's coagulation status is appropriate. Given the reported azotemia other recommendations include a urinalysis and if the sediment is quiet, but protein is present then also a urine protein to creatinine ratio. A blood pressure is also recommended if not already evaluated.

REFERRING VET

Dr. Buss

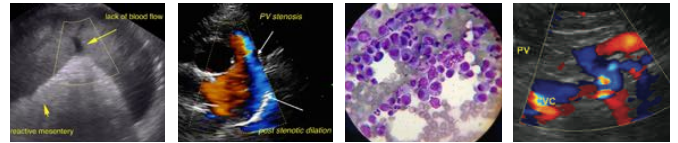
INVOICE

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PATIENT

Emma Shifflett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

11 years

WEIGHT

8.62 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Buss

HOSPITAL NAME

Kings VH

REFERRING VET

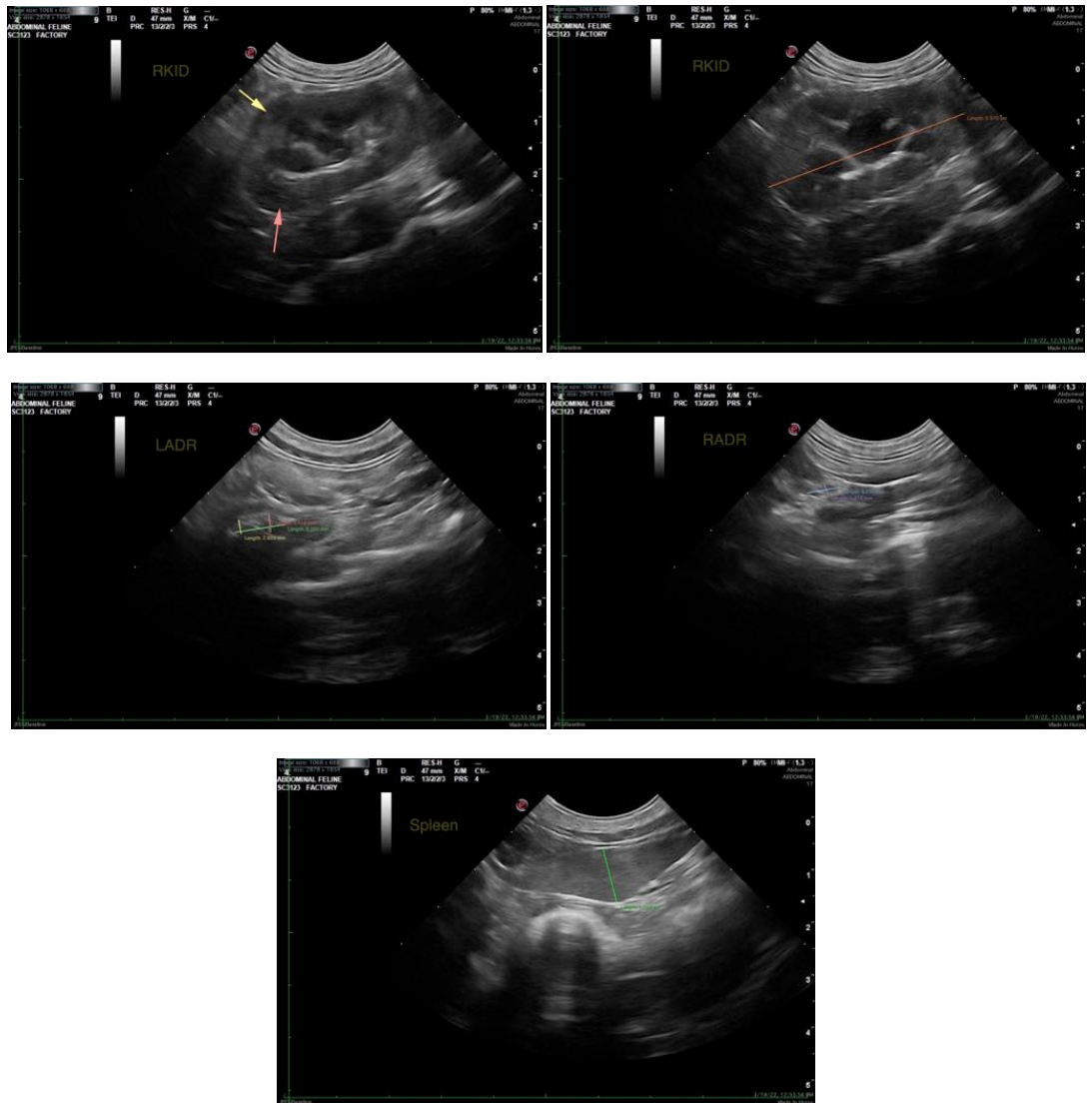
Dr. Buss

INVOICE

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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.

Beth Johnson, DVM DACVIM

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