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|-----------------------------|---|
| PATIENT | PRESENTING CLINICAL SIGNS |
| Shadow Fuchigami | Ultrasound was sent yesterday for anorexia, lethargy (pet is hyperthyroid also) - no major findings other than gastroenteritis. Specialist was concerned about one area of intestines (fb?), cat was treated yesterday with mirtazipine, sq fluids, cerenia injection. No improvement overnight, anorexic, lethargic and hiding today. Pet is painful when ultrasound probe is near duodenum and stomach area. |
| SPECIES | |
| Feline | Abnormal PE/Chem/CBC/UA Results: not repeated yet today. |
| BREED | ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN |
| DSH | Urinary System |
| SEX | Urinary bladder is adequately distended. It has a normal uniform wall thickness. Contents include primarily anechoic fluid with occasional echogenic non-shadowing debris, most consistent with incidental suspended lipid in a cat, possibly combined with exfoliated cells, mucous and/or small blood clots. Both sterile inflammation as well as urinary tract infection can also present with echogenic debris. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface. |
| Neutered Male | The kidneys were not visualized. |
| AGE | Adrenal Glands |
| 17 Years | The adrenal glands were not visualized. |
| WEIGHT | Spleen |
| 10 Pounds | 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). Multifocal well-demarcated hyperechoic homogenous nodules are noted. Splenic vasculature appears normal. |
| INTERPRETED BY | Liver |
| Beth Johnson, DVM DACVIM | The 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. |
| IMAGING PERFORMED BY | Hospital Name |
| Dr. Meghan Myers | The 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. |
| HOSPITAL NAME | Gastrointestinal |
| Hershire AH | The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The stomach is markedly distended with fluid and some echogenic suspended debris/ingesta, foreign material can't be ruled out. |
| REFERRING VET | INVOICE |
| Dr. Meghan Myers | 43984 |
| INVOICE | DATE |
| 1/6/23 | |



PATIENT

Shadow Fuchigami

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

Pancreas

SPECIES

Feline

The pancreas was not visible.

Free Abdomen

BREED

DSH

There is no evidence of free peritoneal effusion noted in these images.

There is no apparent lymphadenopathy noted in these images.

SEX

Neutered Male

- Given the changes from yesterday to today's small bowel dilation and plication, there is progressively increase in concern for a foreign body, likely a linear foreign body. Definitive foreign material is not visualized, so severe gastroenteritis without an obstruction is still possible but considered less likely now.

AGE

17 Years

- Urinary bladder debris
- Hyperechoic splenic nodules** – most consistent with benign myelolipomas. Other differentials such as fibrosis or calcification caused by old hematomas or infarcts, chronic inflammation, granulomatous disease or metastatic disease cannot be ruled out, but are considered less likely.

WEIGHT

10 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the change in appearance of the bowel from yesterday to today, if patient is stable to undergo surgery, an exploratory laparotomy is recommended. If in the unlikely event of a negative exploratory where a foreign body is not discovered, biopsies of the small bowel are recommended to help identify the underlying reason for the reported bowel changes.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Meghan Myers

HOSPITAL NAME

Hershire AH

REFERRING VET

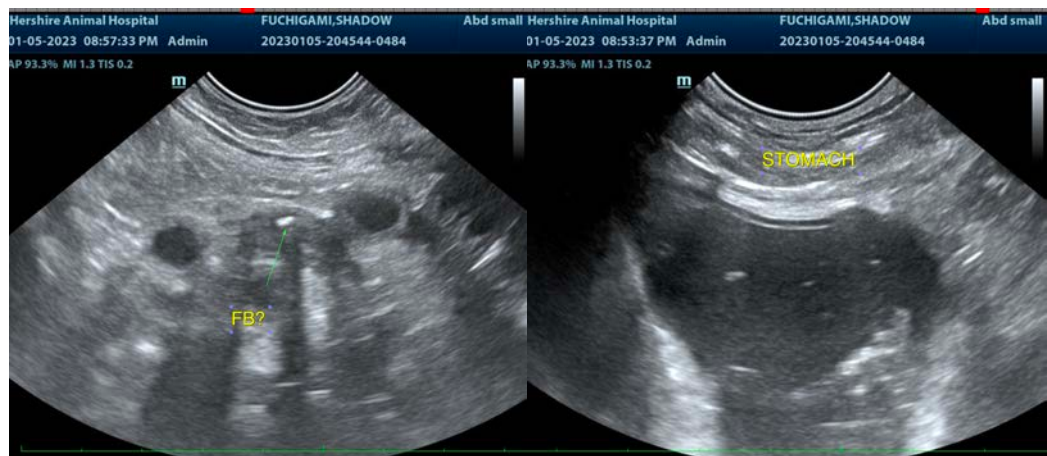
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PATIENT

Shadow Fuchigami

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

17 Years

WEIGHT

10 Pounds

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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.

Beth Johnson, DVM, DACVIM
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