



PATIENT	PRESENTING CLINICAL SIGNS
Mickey Malcolmson	History: Presented for unknown weight loss
SPECIES	Abnormal PE/Chem/CBC/UA Results: labs normal in November, radiograph abnormal. Something resembled tumor. - whole body may need to be U/S **Please see attached.
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	Urinary bladder is adequately 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.
SEX	Left kidney is normal is size (4.23 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
Neutered Male	Right kidney is normal is size (4.18 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
AGE	Adrenal Glands
9 Years	Left adrenal gland is normal in size (0.46 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
WEIGHT	Right adrenal gland is normal in size (0.37 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
7 Pounds	Spleen
INTERPRETED BY	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.
Beth Johnson, DVM DACVIM	Liver
IMAGING PERFORMED BY	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.
Amy Mayhew, LVT	REFERRING VET
HOSPITAL NAME	Gallbladder is moderately distended with anechoic bile as well as very mild suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.
SVS Imaging MI	Gastrointestinal
INVOICE	The visible stomach wall is normal in thickness and layering. The stomach is moderately distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. However, given the reported history of fasting, delayed gastric emptying could be considered. Soft (cloth) fluid absorbing foreign material is considered less likely but cannot be definitively ruled out. If clinical signs are consistent (vomiting, etc.), recommendations include supportive medical care, 24 hours fasting and re-image.
21089	DATE
DATE	2/13/23



PATIENT	The visible small intestines are normal in wall thickness and layering. Hyperechoic mucosal fogging or speckling is noted. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction or foreign material.
Mickey Malcolmson	
SPECIES	The visible colon is normal in wall thickness and layering. Contents are consistent with normal formed feces and gas.
Feline	Pancreas
BREED	Pancreas is prominent (enlarged) in size, hypoechoic to surrounding tissue and has a mildly irregular undulating contour. Parenchyma is coarse with mixed echogenic remodeling noted. Pancreatic duct dilation is noted.
DSH	Free Abdomen
SEX	A very scant amount of anechoic free fluid is noted. The mesenteric lymph nodes are prominent in size with swollen capsular contour. Normal elongated shape (length to width ratio) is maintained. There is no loss of parenchymal detail.
Neutered Male	
AGE	ULTRASONOGRAPHIC FINDINGS
9 Years	Primary Findings
WEIGHT	<ul style="list-style-type: none"> This appears to be a postprandial study; however, the stomach is very full and foreign material cannot be definitively ruled out. Mucosal speckling – Mucosal speckling is often present with inflammatory bowel disease (IBD). It is not specific for type or severity of disease. Mild speckling change can occur as a normal patient variant in the post-prandial state. Chronic active pancreatitis Reactive mesenteric lymph nodes – infiltrative neoplastic disease cannot be ruled out but is considered less likely.
7 Pounds	Secondary Findings
INTERPRETED BY	<ul style="list-style-type: none"> Very mild gallbladder debris – Cholecystic debris is of unknown clinical significance. It can be seen with biliary stasis from fasting or illness, however, it can also be associated with hepatobiliary disease in cats and should be interpreted in combination with clinical signs such as nausea, inappetence, cranial abdominal discomfort and/or laboratory changes such as increased ALP and/or increased Tbili.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Amy Mayhew, LVT	Given the scant amount of anechoic free fluid, a recheck metabolic health screen is recommended, including CBC/chemistry panel, electrolytes and urinalysis and, if indicated based on urinalysis results, urine culture is recommended. If protein is present in an otherwise quiet sediment, protein quantification with a urine protein to creatinine ration is recommended.
HOSPITAL NAME	Additionally, further evaluation of the gastrointestinal tract is recommended via gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory, for further evaluation of GI and pancreatic function.
SVS Imaging MI	
REFERRING VET	
Dr. Amanda Lee	
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The appearance of the gastrointestinal contents is most consistent with normal ingesta, however, if clinically consistent with foreign material, a recheck fasted ultrasound should be considered.

SPECIES

Feline

In the meantime, given the livelihood of gastrointestinal disease contributing to weight loss, the reactive mesenteric lymphadenopathy, etc., empirical deworming with a 5-day course of Panacur is recommended, as well as potentially a diet transition based on trial-and-error response, beginning with a hydrolyzed protein diet, understanding that some patients respond better to one brand of hydrolyzed protein diet vs another, so sometimes several trials are necessary.

BREED

DSH

SEX

Neutered Male

AGE

9 Years

WEIGHT

7 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Amy Mayhew, LVT

HOSPITAL NAME

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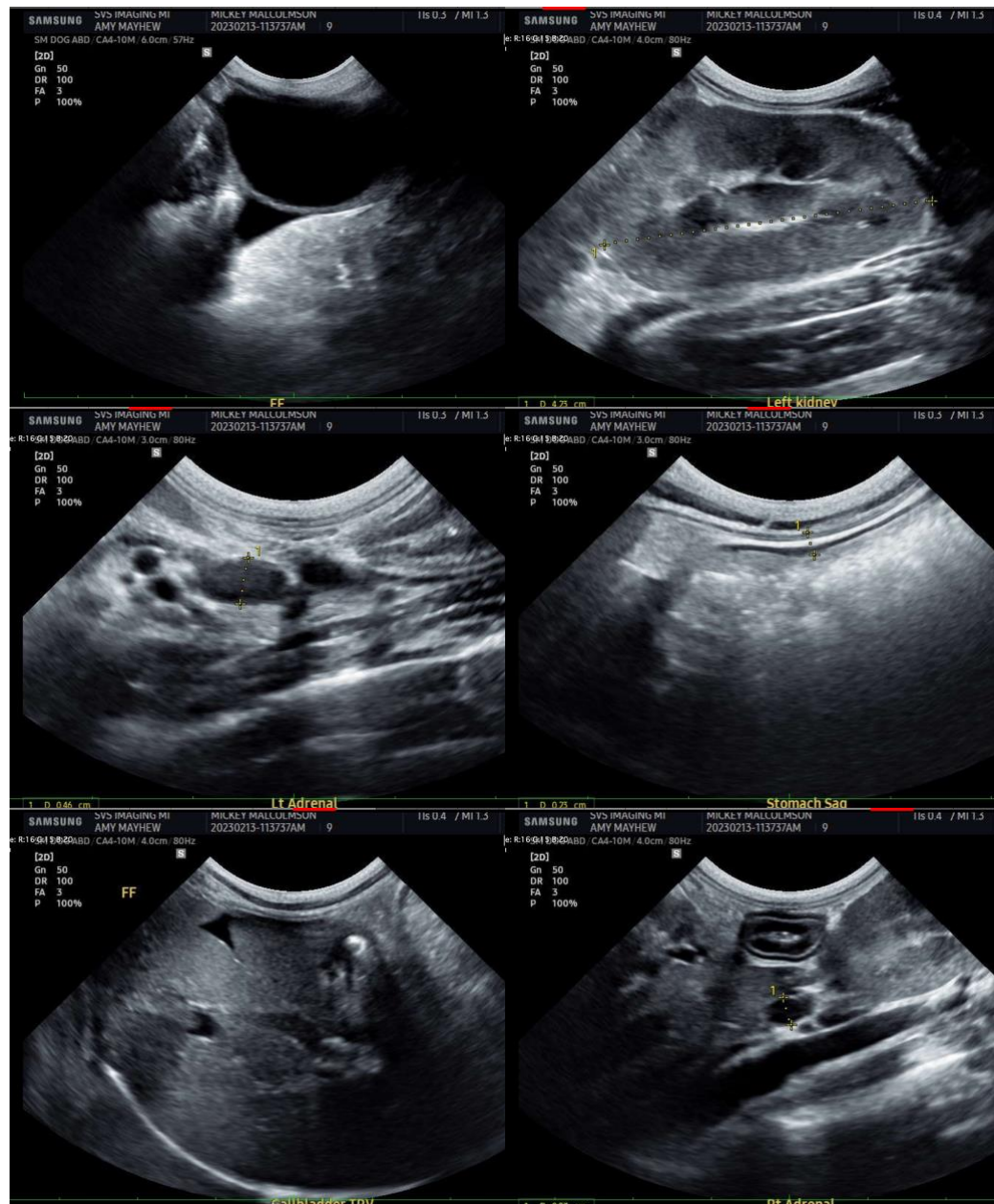
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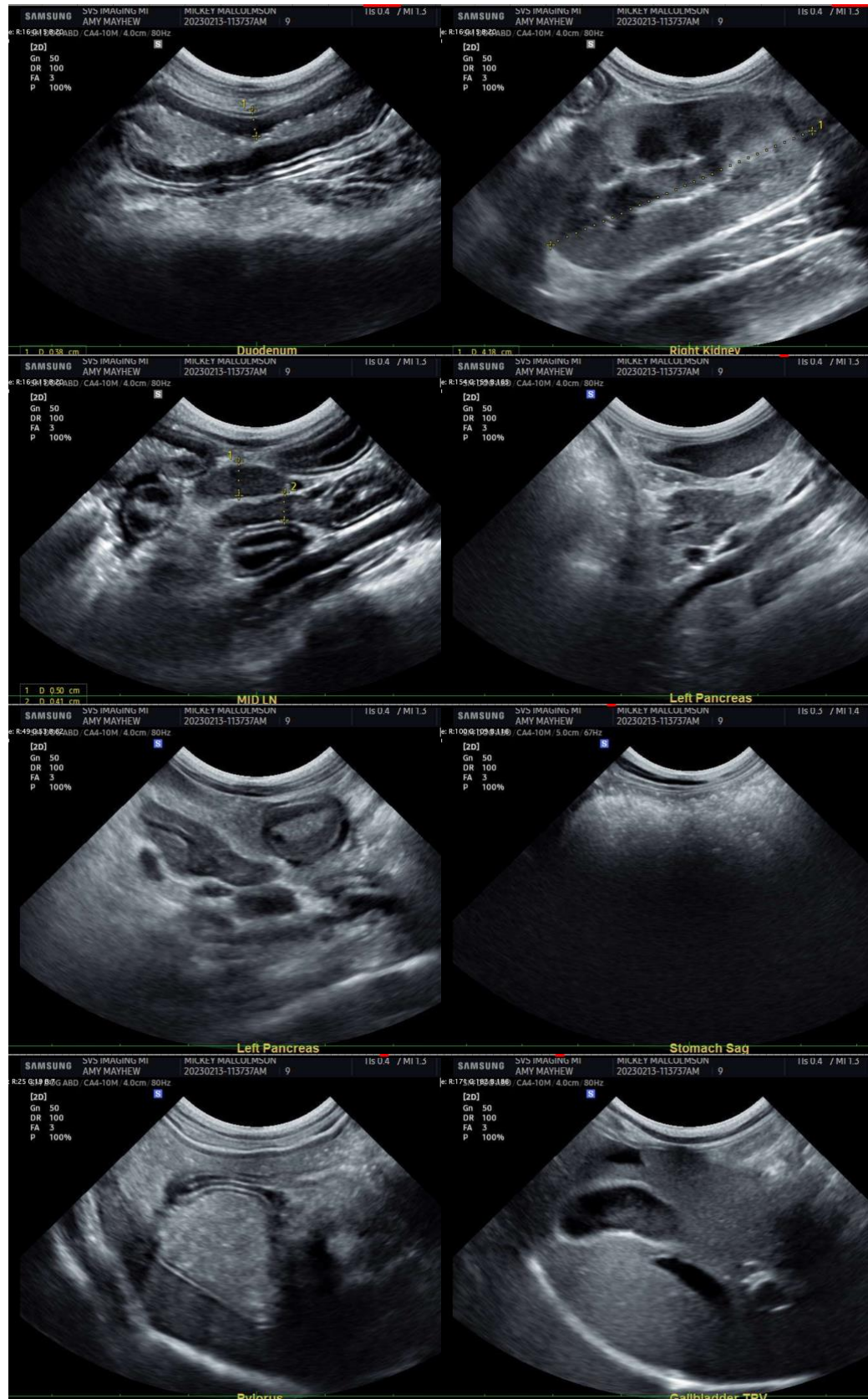
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM DACVIM

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