



PATIENT PRESENTING CLINICAL SIGNS

Milo Mann QAR, trying to hide 7/9 BCS (overweight) 38.2 C rectal normal HR sniffing On the upper right quadrant of the mouth, behind the canine, there is a round, cyst-like pedunculated structure that is relatively firm. The structure does not appear ulcerated. (**has since been removed** Dx as Schwannoma via histopathology**)

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: SDMA: 15 ug/dL Urea (BUN): 5.3 mmol/L Total Protein 58 g/L

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DSH

Urinary System

Urinary bladder is only mildly distended (empty). Visible contents are anechoic. Urinary bladder wall is unable to be fully assessed for pathology without further distension. No visible masses or cystoliths are observed. The trigone and visible pelvic urethra are normal thickness with a smooth mucosal surface. If there are urinary signs and/or concern for urinary bladder pathology, reassessment after complete filling is recommended.

SEX

Neutered Male

The right kidney is normal in size (4.24 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

15 Years

The left kidney is normal in size (4.09 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.

WEIGHT

6 kg

Adrenal Glands

The right adrenal gland is normal in size (0.32 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

The left adrenal gland is normal in size (0.41 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

IMAGING PERFORMED BY

Kelly Reschny

The 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

Yates Vet Hospital

Liver

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. Multifocal intrahepatic biliary mineral is present. Visible vasculature and biliary tree appear normal without distension or congestion.

REFERRING VET

Dr. Cathcart

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.

INVOICE

39925

Gastrointestinal

The stomach is not able to be fully examined in these images (see other).

DATE

7/28/22

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



PATIENT

Milo Mann

per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

SPECIES

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

BREED

DSH

Pancreas

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

SEX

Neutered Male

Free Abdomen

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

AGE

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There is no apparent lymphadenopathy noted in these images.

In the cranial abdomen, there is a distended portion of the gastrointestinal tract with a curvilinear echogenic interface and progressive shadowing that may be normal to overdistended colon. However, a gastric foreign body such as a hairball or similar object cannot be definitively ruled out.

WEIGHT

6 kg

ULTRASONOGRAPHIC FINDINGS

- Intrahepatic biliary mineral – likely an incidental finding of no clinical consequence, but should be interpreted in combination with laboratory changes such as increased liver enzymes and/or clinical signs such as cranial abdominal pain, nausea, vomiting, etc.
- The portion of the gastrointestinal tract in the cranial abdomen may represent normal to mildly overdistended colon. However, a gastric foreign body such as gastric hairball cannot be definitively ruled out.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommendations include abdominal x-rays for further investigation of possible constipation/obstipation, especially if this matches any reported clinical signs of constipation, or, if clinical signs are more consistent with a possible gastric foreign body, such as vomiting, decreased appetite, etc., recheck imaging of the cranial abdomen following a 24-hour fast is recommended for further evaluation and to rule out a gastric foreign body.

IMAGING PERFORMED BY

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Ultimately, the findings in this study may all be normal or incidental patient variant without an obvious cause for this patient's reported malaise present ultrasonographically.

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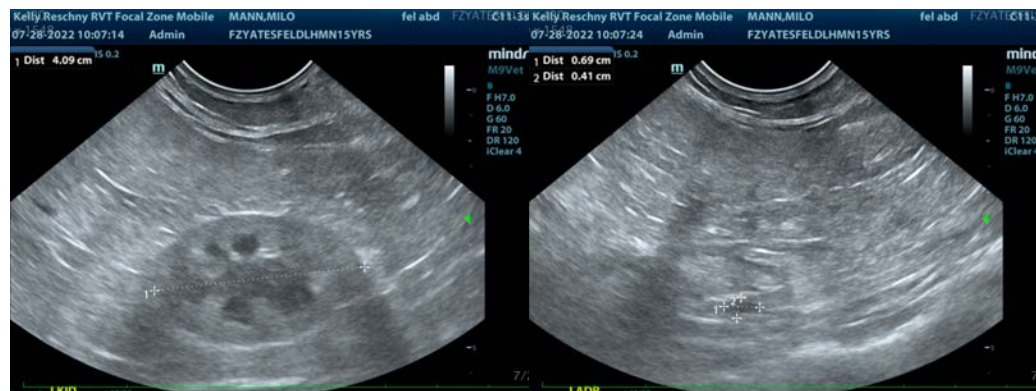
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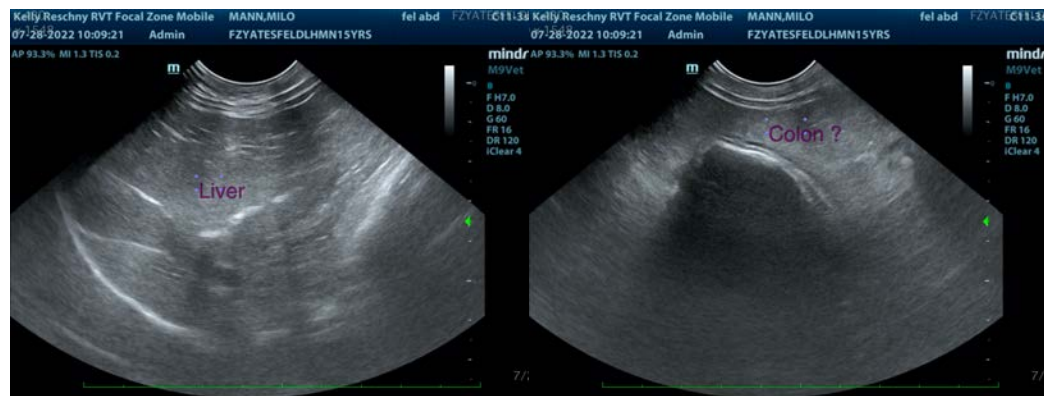
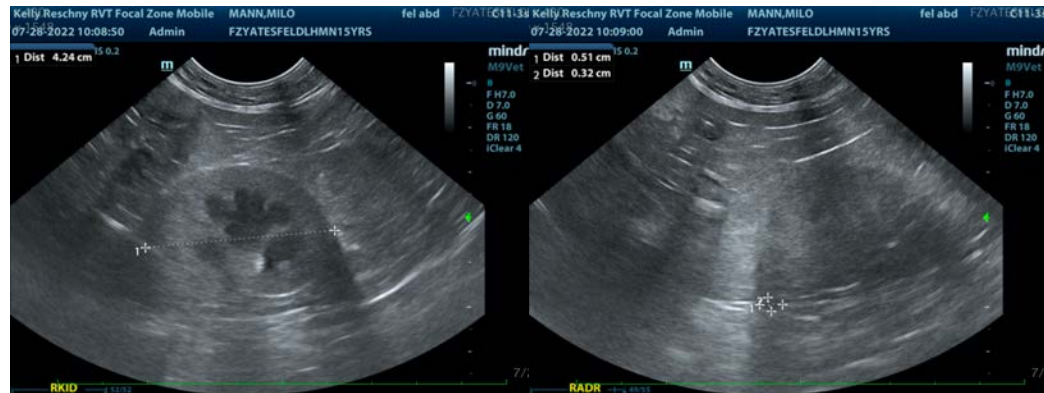
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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