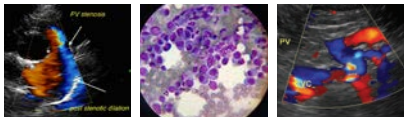
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE

8/16/22

PATIENT

Earl Grey Kraus

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

3/30/19

WEIGHT

7.3 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Stephanie Warga
RDCS, RVT

HOSPITAL NAME

Perry Hall AH

REFERRING VET

Dr. Miller

INVOICE

40524

PRESENTING CLINICAL SIGNS

Patient presents for evaluation of weight loss and increased appetite - PE overall unremarkable, but we did notice one pound of weight loss since last year.

Current Medications: None.
Lab Results: Neutrophilia noted on BW.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The 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.

The right kidney is normal in size (3.31 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.

The left kidney is normal in size (3.39 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.

Adrenal Glands

The right adrenal gland is normal in size (0.39 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (0.43 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

Spleen is largely normal in appearance (shape, echotexture and echogenicity); however, it is volume contracted. Hydration status assessment is recommended.

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. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

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.

Gastrointestinal

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

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.

The visible colon is normal in wall thickness (< 0.2 cm) and layering. There is some evidence of diarrhea in the form of granular/echogenic/less shadowing fecal material as well as normal formed fecal material.

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.

Free Abdomen

There is a very scant amount of anechoic free fluid appreciated as well as mesenteric lymphadenopathy and sublumbar lymphadenopathy, both more consistent with reactive lymphadenopathy. However, infiltrative neoplasia cannot be definitively ruled out.

There is no apparent lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- Volume contracted spleen
- Suspect reactive mesenteric and sublumbar lymphadenopathy. Infiltrative neoplasia can't be ruled out, but is considered less likely.

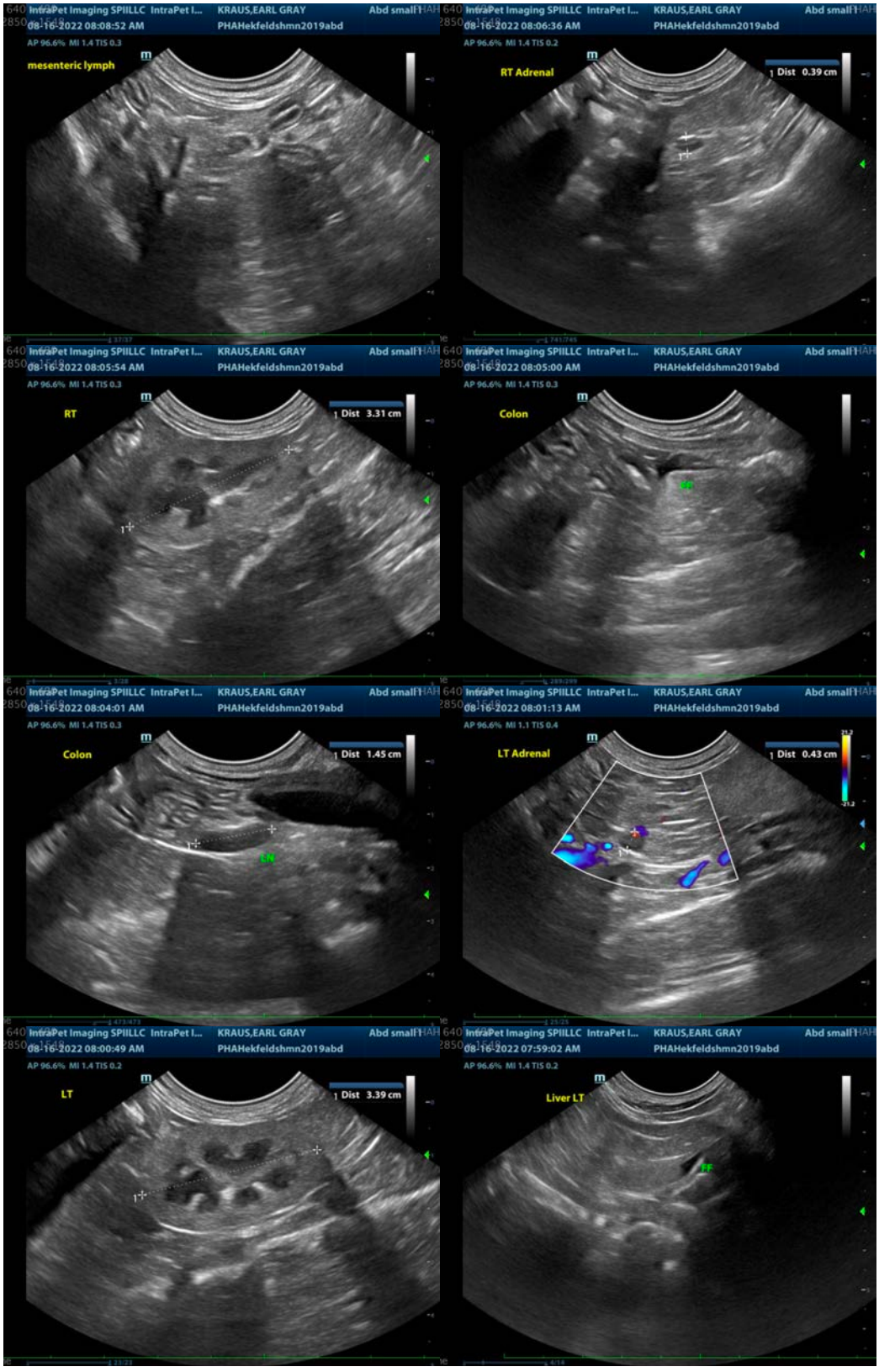
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend assessing caloric intake to ensure that the amount is adequate and that a diet hasn't inadvertently been changed that is less calorically dense and/or another pet in the house is eating this patient's food, etc. If the patient's caloric intake is appropriate, then given the weight loss, gastrointestinal disease is suspected, especially with the reactive lymphadenopathy appreciated in these images. Therefore, recommendations include:

A gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory is recommended for further evaluation of GI and pancreatic function.

Fecal exam and a fecal enteropathogen PCR panel to Texas A&M GI Laboratory could be considered for further evaluation of possible infectious disease.

In the meantime, empirical deworming with a 5-day course of Panacur is recommended, and if tolerated, a diet transition to a novel or hydrolyzed protein diet could be considered.


IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
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AP 96.6% MI 1.4 TIS 0.3
mesenteric lymph
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 08:06:36 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.4 TIS 0.2
RT Adrenal
Dist 0.39 cm
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 08:05:54 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.4 TIS 0.3
RT
Dist 3.31 cm
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 08:05:00 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.4 TIS 0.3
Colon
FF
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
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AP 96.6% MI 1.4 TIS 0.3
Colon
Dist 1.45 cm
LN
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 08:01:13 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.1 TIS 0.4
LT Adrenal
Dist 0.43 cm
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 08:00:49 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.4 TIS 0.2
LT
Dist 3.39 cm
IntraPet Imaging SPIILLC IntraPet I... KRAUS,EARL GRAY Abd small1
08-16-2022 07:59:02 AM PHAHekfeldshmn2019abd
AP 96.6% MI 1.4 TIS 0.2
Liver LT
FF

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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