



PATIENT PRESENTING CLINICAL SIGNS

Missy Becker

Chronic history of intermittent vomiting. Historically vomiting several times per week. No significant weight loss, otherwise acting normally at home. Owner started dietary trial of hydrolyzed food in November 2022 - slight improvement, but P still vomiting on regular basis. Bloodwork unremarkable, recommend abdominal U/S as next step.

SPECIES

Feline

BREED

DSH

Abnormal PE/Chem/CBC/UA Results: Bloodwork in November 2022 - unremarkable Texas A&M GI Panel - pending

SEX

Spayed Female

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.

AGE

4 Years

The right kidney is normal in size (3.29 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

9.9 Pounds

The left kidney is normal in size (3.34 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.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Adrenal Glands

The right adrenal gland is normal in size (0.33 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

IMAGING PERFORMED BY

Jack Reese

The left adrenal gland is normal in size (0.30 cm), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

HOSPITAL NAME

Willow Run VC

Spleen

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.

REFERRING VET

Dr. Gwenna Brubaker

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.

INVOICE

44750

DATE

8/17/23

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.



PATIENT

Gastrointestinal

Missy Becker

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.

SPECIES

Feline

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.

BREED

DSH

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

SEX

Spayed Female

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.

AGE

4 Years

Free Abdomen

WEIGHT

9.9 Pounds

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

There is no apparent lymphadenopathy noted in these images.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

ULTRASONOGRAPHIC FINDINGS

- Unremarkable/normal abdomen without an ultrasonographically visible explanation for this patient's reported vomiting.

IMAGING PERFORMED BY

Jack Reese

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A relatively unremarkable abdomen does not rule out mild or emerging maldigestive or malabsorptive disease. Therefore, as is reportedly already pending, 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.

HOSPITAL NAME

Willow Run VC

Given that the hydrolyzed protein diet partially helped, underlying gastrointestinal disease is likely. Therefore, ultimately biopsies may still be indicated. However, some patients respond better to one version or brand of hydrolyzed or novel protein diet over another, so transition if tolerated to a different version could potentially be tried as well.

REFERRING VET

Dr. Gwenna Brubaker

In addition, empirical deworming with a 5-day course of Panacur is recommended.

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AGE

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WEIGHT

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IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

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REFERRING VET

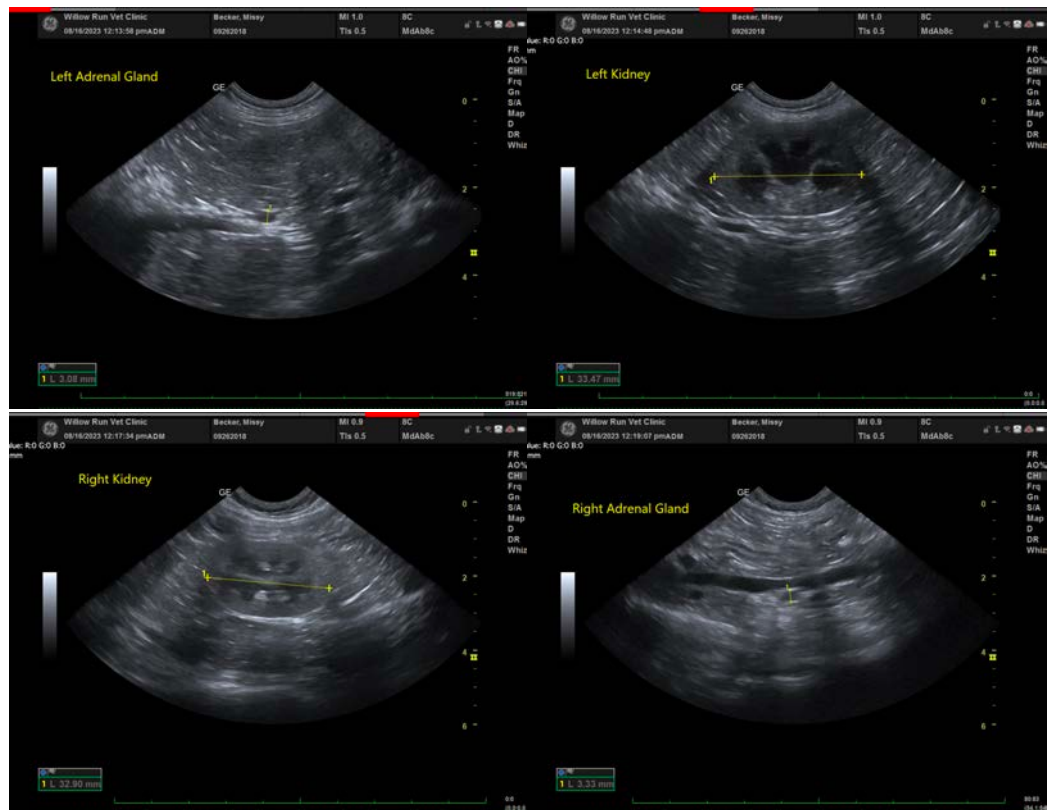
Dr. Gwenna Brubaker

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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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