



PATIENT PRESENTING CLINICAL SIGNS

Gloria Westenfelder

5 days history of vomiting, anorexia including water. Food/water comes up within 1 hour of eating. Some issues with vomiting in past but much less severe. Not known for eating foreign objects.

SPECIES

Underweight by 1lb. Lethargic, pruritic, alopecia (history of allergic dermatitis). Has been on Sulcrate.

Feline

Abnormal PE/Chem/CBC/UA Results: WBCs high 20.1, Platelets 131(200-500) Neuts 11.86(2.5-8.5) Eosin 4.82 high, Albumin 40(high)

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Spayed Female

Urinary System

The urinary bladder mucosa, trigone, and visible urethra are normal in thickness and there is no evidence of mucosal irregularities. The bladder lumen is moderately distended with anechoic urine and bladder thickness is considered normal for volume of urine. A small amount of echogenic debris is present that was more dependent but still suspended within the urine, this can be consistent with lipid. No masses, inflammatory changes or calculi are observed.

AGE

5 Years

WEIGHT

9.4 Pounds

The left kidney is small in size with mildly irregular contour with an undulating surface, consistent with prior infarcts, and measures 3.23 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

The right kidney is normal in size, with mildly irregular contour with an undulating surface, consistent with prior infarcts, and measures 3.78. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is normal in size (0.26 cm thick). The left adrenal gland has normal shape and it is normal in appearance and echogenicity.

IMAGING PERFORMED BY

Crystal Hill

The right adrenal gland is normal in size (0.37 cm thick). The right adrenal gland has normal shape and it is normal in appearance and echogenicity.

HOSPITAL NAME

Mountain AH

Spleen

The splenic echotexture is homogeneous with parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule is smooth with no irregularities. The splenic vasculature is normal without signs of congestion or thrombosis.

REFERRING VET

Dr. Woodward

Liver

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The liver is subjectively normal in size with normal contours, structure, with smooth peripheral margins. The echogenicity appears normal with normal portal markings. No overt evidence of inflammatory, infiltrative or regenerative pathology is evident. The visible portions of the vasculature and biliary tract appear normal. No pathological hepatic lymphadenopathy observed.

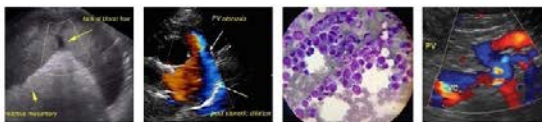
DATE

2/17/23

The gallbladder lumen is distended. The wall is a normal thickness and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not visible.

Gastrointestinal

The gastric lumen is empty. The stomach wall is of normal wall thickness (0.22 cm) with some variability due to rugal folds. There is normal gastric wall layering. There are no masses or focal lesions observed



PATIENT

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and the pyloric outflow tract appears patent. There is a gastric lymph node that is very slightly prominent, measuring 0.20 cm width x 0.25 cm in length. It is surrounded by slightly hyperechoic fat.

SPECIES

Feline

The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The duodenum measures normal with distinct wall layering. There were a few loops of jejunum that measured very mildly thick or at the high end of normal (0.24-0.26 cm). The remainder of the small intestines also measures normal with normal wall layering. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. No focal lesions observed.

BREED

DSH

Sections of colon are visualized with a large amount of completely formed fecal material and gas shadowing distally. The colon measures normal. There is no observed focal or generalized colon wall thickening or loss of layering.

SEX

Spayed Female

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

AGE

5 Years

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. The omentum is of normal uniform echogenicity.

WEIGHT

9.4 Pounds

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DACVIM (SAIM)

PRIMARY FINDINGS

- Reactive gastric lymph node
- Few very mildly thickened loops of jejunum

IMAGING PERFORMED BY

Crystal Hill

SECONDARY FINDINGS

- Bladder debris
- Chronic degenerative changes

HOSPITAL NAME

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The prominent gastric lymph node was very subtle and likely reactive, and the stomach itself was normal and not obviously inflamed. While there were a few loops of jejunum that measured at the high end of normal for thickness or were a few mm over normal, this was only true of a few loops of jejunum, while other measured very normal. This can be seen with mild acute or chronic gastroenteritis. Consider ongoing treatment for acute vomiting and anorexia with antiemetics and appetite stimulation. Then consider a diet trial with something hypoallergenic or a novel protein diet, given the more chronic history of vomiting, low weight, and eosinophilia. If the chronic vomiting continues and the patient remains underweight, then consider a workup for chronic enteropathy, such as GI panel and intestinal biopsies.

REFERRING VET

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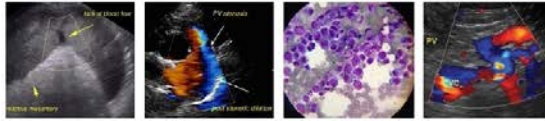
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There was debris within the bladder, consider urinalysis to evaluate for proteinuria or urinary tract infection.

The changes to the kidneys suggest chronic degenerative change, continue to monitor for emerging renal impairment.



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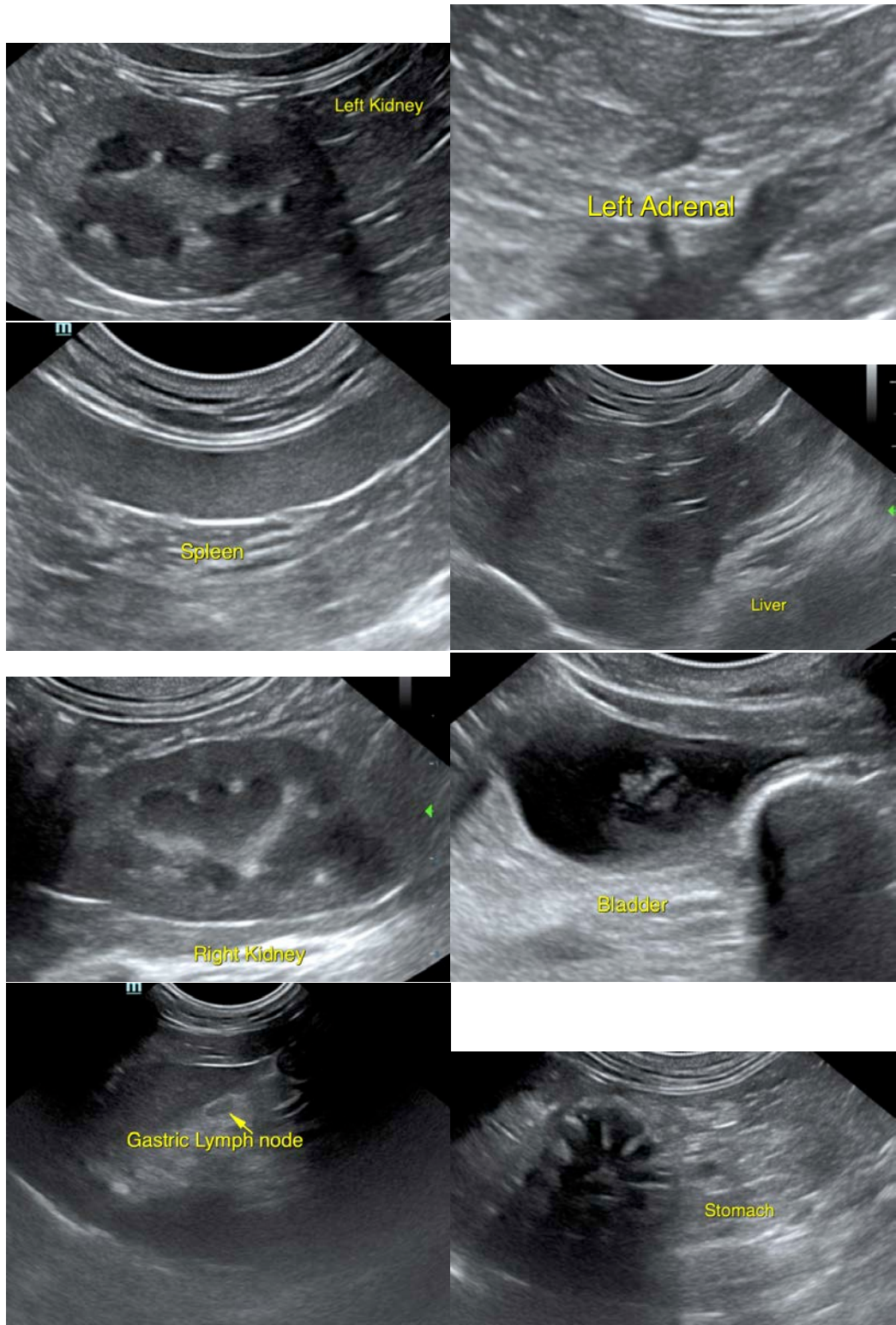
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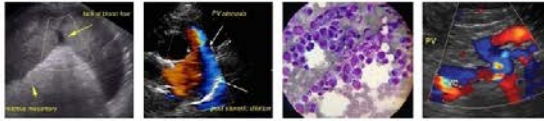
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Feline

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.

BREED

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info@SonoPath.com

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