

PATIENT PRESENTING CLINICAL SIGNS

Mini Villeneuve weight loss, occ bloody emesis, intermittent bloody stool, reduced appetite meds: cerenia, sulcrate, famotidine
Abnormal PE/Chem/CBC/UA Results: please see attached BW

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

DSH

The urinary bladder is adequately filled. The wall is smooth and regular. The entrance to the trigone does not show any abnormalities. A trivial to small amount of free floating sediment is present, most likely composed of mucus, crystalline material and exfoliated cells. The mild amount of debris is likely clinically insignificant given the lack of inflammatory changes to bladder wall.

SEX

Spayed Female

The left kidney is decreased in size (3.29 cm; 3.80-4.40 cm)). The capsule is smooth. However, the cortex is mildly hyperechoic and a mild loss of the normal definition of the cortico-medullary junction is present. Accumulation of fat is noted in the pelvis. Mineralizations of the diverticulae are present without evidence of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

AGE

12 Years

The right kidney measures 3.25 cm (decreased in size). The findings are similar to the left kidney.

Adrenal Glands

WEIGHT

2.7 kg

The left adrenal gland measures 0.23 cm. No abnormalities are noted with the gland's shape, overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

The right adrenal gland measures 0.35 cm. No abnormalities are noted with the gland's shape, overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

Spleen

IMAGING PERFORMED BY

Kelly Reschny

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

Liver

HOSPITAL NAME

Stoney Ridge AH

Mild hepatomegaly is present, in addition to mild diffuse hyperechogenicity. Its borders are smooth and sharp. No abnormalities are observed with the hepatic vessels. Hepatic lipidosis secondary to hyporexia is suspected, however, cholangitis/cholangiohepatitis cannot be excluded.

REFERRING VET

Dr. Brooks

The gall bladder wall is within normal limits in thickness and echogenicity. There is no evidence of echogenic material (sludge) within the GB or edema surrounding it. There are no obvious signs of dilation or tortuosity of the cystic or common bile ducts.

Gastrointestinal

INVOICE

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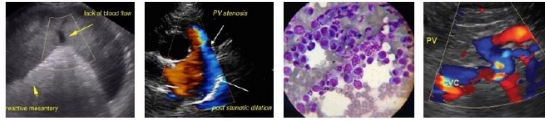
Gas and liquid are present in the stomach. The normal architecture of the wall layers is preserved, however, the submucosa and the muscularis are mildly thickened and fogging of the mucosa and the muscularis are observed. Peristalsis is difficult to evaluate. The mesentery surrounding the stomach is mildly to moderately hyperechoic.

DATE

4/8/22



PATIENT	The small intestinal wall thickness is within normal limits except for the submucosa, which is thickened. Although the definition of the wall layers is preserved, fogging of the mucosa and the muscularis are noted. Mildly dilated loops of bowel, with ingesta and fluid, are present. The mesentery surrounding the small intestines is hyperechoic.
Mini Villeneuve	
SPECIES	The colonic wall is not thickened and mural detail is considered normal. There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction. Gas is present in the transverse colon. Formed stool and gas is present in the colon.
Feline	
BREED	<i>Pancreas</i>
DSH	No overt abnormalities are observed within the visualized portion of the right limb. There is no evidence of hyperechogenicity of the surrounding mesenteric fat, i.e., there are no signs of active pancreatitis.
SEX	No overt abnormalities are observed with the left limb. The surrounding mesentery is not hyperechoic, i.e., there are no signs of active pancreatitis.
Spayed Female	<i>Other</i>
AGE	A hepatic lymph node is enlarged, measuring 9.1 mm in diameter and 5.6 mm in length. It is mildly hypoechoic and the surrounding mesentery is hyperechoic. Reactive hyperplasia is the most likely cause, however, neoplasia in its early stages cannot be excluded. No other enlarged lymph nodes are observed.
12 Years	
WEIGHT	Abdominal effusion is not visualized.
2.7 kg	
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	<ul style="list-style-type: none"> The diffuse thickening and mucosal fogging of the stomach and intestinal tract may occur due to inflammation secondary to inflammatory bowel disease, as well as secondary gastritis as a result of the chronic vomiting. However, infiltrative disease, such as lymphoma, mast cell tumor, or other neoplasm, cannot be excluded. The mild hepatomegaly and diffuse hyperechogenicity of the liver, in conjunction with Mini's history, are suggestive of hepatic lipidosis secondary to hyporexia, yet cholangitis/cholangiohepatitis remains possible. Very mild degenerative changes of both kidneys, which are suggestive of age related degeneration.
IMAGING PERFORMED BY	
Kelly Reschny	
HOSPITAL NAME	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Stoney Ridge AH	Deworming with a broad spectrum product is recommended.
REFERRING VET	A hypoallergenic diet, whether a novel protein or hydrolyzed diet, is recommended. Psyllium should be supplemented if a hydrolyzed diet is administered, as the latter are low in fiber, and diarrhea can get worse in some patients.
Dr. Brooks	
INVOICE	A clay based symbiotic, such as EnteroAid by Grey Wolf Animal Health is suggested in case Mini is suffering from dysbiosis.
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DATE	Endoscopy and biopsies of the upper and lower GI tract.
4/8/22	



PATIENT

Mini Villeneuve

If further diagnostics are not pursued, empirical treatment for inflammatory bowel disease with corticosteroids may be considered, in conjunction with a hypoallergenic or hydrolyzed diet.

*Analgesia for visceral pain, such as buprenorphine, is recommended.

SPECIES

Feline

Omeprazole may be more effective than famotidine. However, it can cause nausea, vomiting, cramps, and diarrhea in some patients. A dose of 0.7-1.0 mg/kg every 12 hours is suggested.

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

2.7 kg

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Kelly Reschny

HOSPITAL NAME

Stoney Ridge AH

REFERRING VET

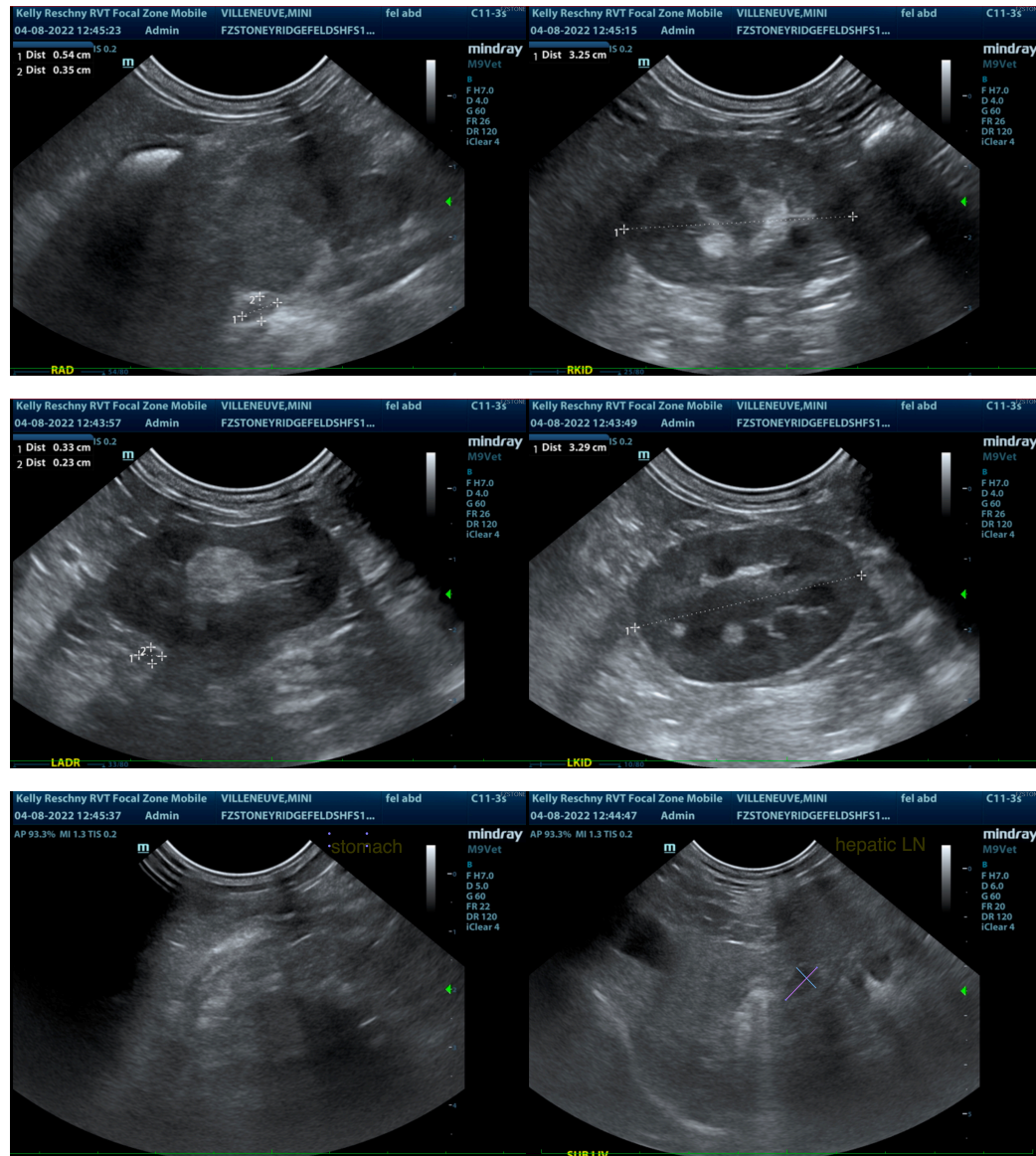
Dr. Brooks

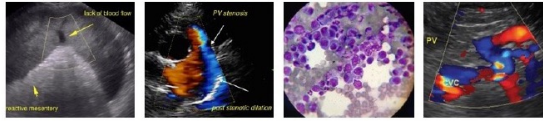
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PATIENT

Mini Villeneuve

SPECIES

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DSH

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Spayed Female

AGE

12 Years

WEIGHT

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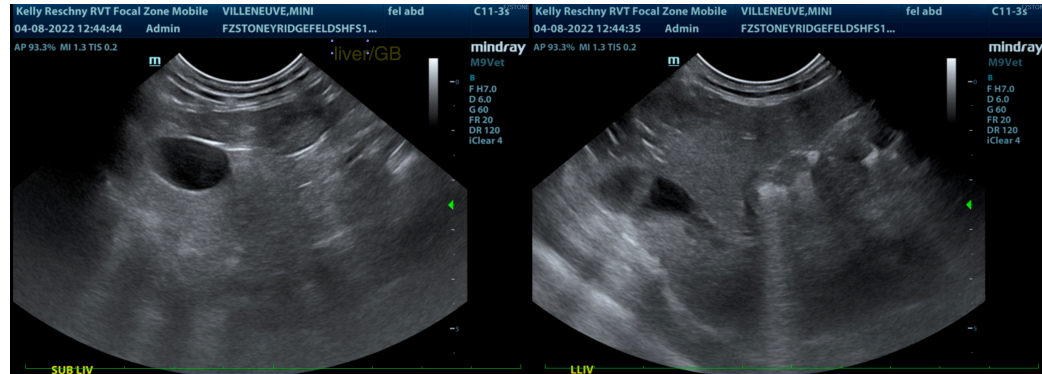
Dr. Brooks

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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.

Lisa Carioto, DVM, DVSc, Diplomate ACVIM

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