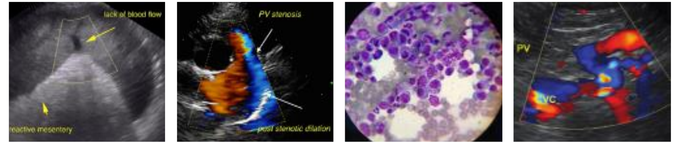


SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Miley Stuart

SPECIES

Feline

BREED

Turkish Van

SEX

FS

AGE

13 years 2 months

WEIGHT

4.15 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Donna Markland, DVM

HOSPITAL NAME
Island Mobile Paws Veterinary Services

REFERRING VET
Central Island Veterinary Emergency Hospital

INVOICE

15786

DATE

1/10/23

PRESENTING CLINICAL SIGNS

Presented to emergency for 48 hr anorexia and decreased drinking on January 8th. Miley had started drinking on her own on the morning of the 8th. Miley had vomited at least once in the past week, but clients were out of town so unsure if more. No known toxic exposure, although poinsettias are in the house. Other medical history is I131 treatment for hyperthyroidism in April, 2022. PE was unremarkable with the exception of fleas noted. BCS=5/9 and patient was hydrated. Sedated radiographs were unremarkable. CBC showed neutropenia, lymphopenia, thrombocytopenia (with clumping), and mild anemia. Chem showed very mild hypophosphatemia. Miley was sent home with mirtazapine and AUS was done on January 9th.

Abnormal PE/Chem/CBC/UA Results: CBC: HCT=27.6 (30.3-52.3) Neuts=1.11 (2.3-10.3) Lymphs=0.55 (0.92-6.88) Platelets=4, (but clumping noted with macrothrombocyotopenia per record) Chem: Phos= 0.98 (1.0-2.4) T4=17 (10-60) FeLV/FIV= neg/neg

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.7 cm in length. The right kidney measured 3.7 cm in length.

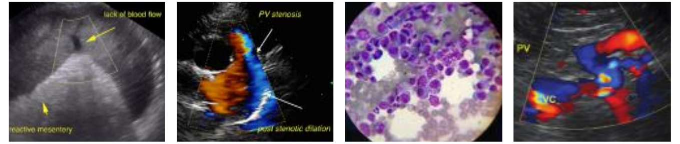
Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.34 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.36 cm width.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.86 cm width at the level of the hilus.

Liver/ Gallbladder



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Miley Stuart

SPECIES

Feline

BREED

Turkish Van

SEX

FS

AGE

13 years 2 months

WEIGHT

4.15 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Donna Markland, DVM

HOSPITAL NAME
Island Mobile Paws Veterinary Services

REFERRING VET
Central Island Veterinary Emergency Hospital

INVOICE

15786

DATE

1/10/23

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The visualized gastric walls were sonographically normal. The lumen of the stomach contained moderate, mild hyperechoic ingesta exhibiting subtle progressive distal acoustic shadowing. No evidence of mechanical pyloric outflow obstruction was noted. The gastric body wall width measured 0.24 cm.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The duodenum wall measured 0.22 cm width. The jejunum wall measured 0.21 cm width. No overt pathology was noted in the area of the ileocolic junction.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

Free Abdomen

No omental masses, evidence of signifanct lymphadenopathy, or evidence of peritoneal effusion were noted.

ULTRASONOGRAPHIC FINDINGS

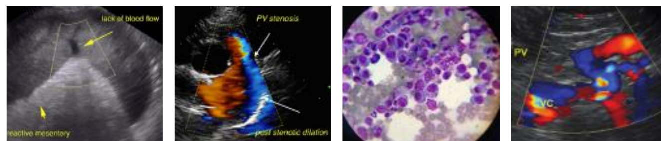
- Mild chronic renal changes
- Overtly normal gastrointestinal tract with moderate gastric ingesta

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The presence of gastric ingesta is nonspecific and may indicate post-prandial presentation if the patient is currently eating. Correlation with most recent meal ingestion is recommended. If documented NPO prior to the ultrasound, the presence of gastric ingesta may indicate some degree of gastric hypomotility or metabolic stasis without evidence of mechanical pyloric outflow obstruction. The sonographic appearance of the ingesta was most suggestive of food, although the possibility of intermixed hairball density cannot be excluded if evidence of previous hairballs.

Sonographic or radiographic monitoring for evidence of gastric emptying over the next 12-24 hours may be considered if clinically indicated. Spec fPL or a GI panel to include PLI/TLI/Cobalamin/Folate to assess for occult disease as a contributing factor or if evidence of weight loss may be considered.

A definitive cause of the mild anemia was not obvious. CBC pathology review is suggested.



SonoPath.com™

1-800-838-4268 info@sonopath.com

PATIENT

Miley Stuart

SPECIES

Feline

BREED

Turkish Van

SEX

FS

AGE

13 years 2 months

WEIGHT

4.15 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Donna Markland, DVM

HOSPITAL NAME

Island Mobile Paws Veterinary Services

REFERRING VET

Central Island Veterinary Emergency Hospital

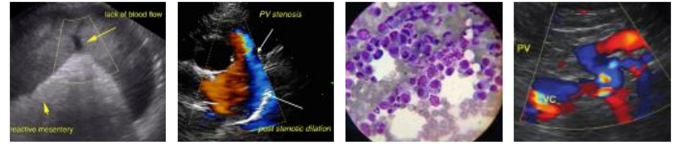
INVOICE

15786

DATE

1/10/23

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Miley Stuart

SPECIES

Feline

BREED

Turkish Van

SEX

FS

AGE

13 years 2 months

WEIGHT

4.15 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Donna Markland, DVM

HOSPITAL NAME

Island Mobile Paws Veterinary Services

REFERRING VET

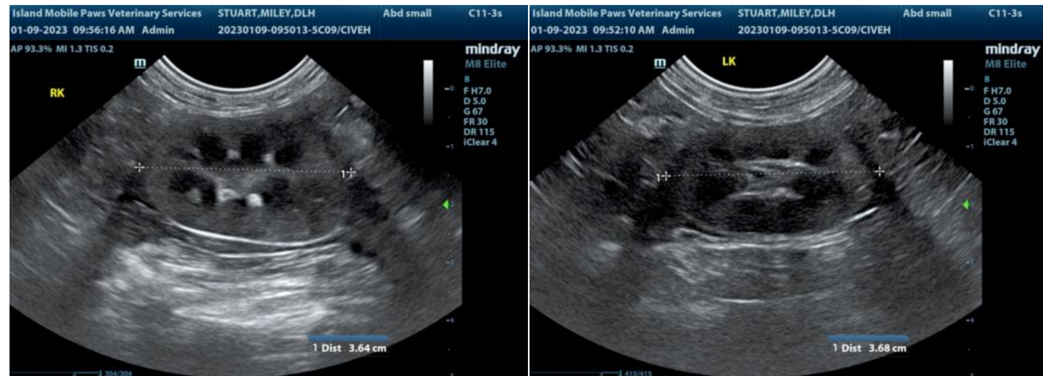
Central Island Veterinary Emergency Hospital

INVOICE

15786

DATE

1/10/23



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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com