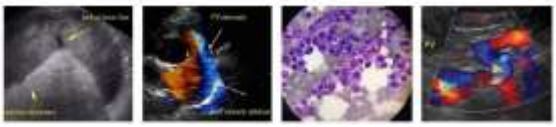


PATIENT

Minka Kovacevich

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

15 years

WEIGHT

9.8 lbs.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Halton Peel AH

REFERRING VET

Dr. Walters

INVOICE

13050

DATE

1/13/22

PRESENTING CLINICAL SIGNS

recheck murmur, last scanned 2020(report attached), some constipation, general ADR
Abnormal PE/Chem/CBC/UA Results: SDMA 16 (0-16)

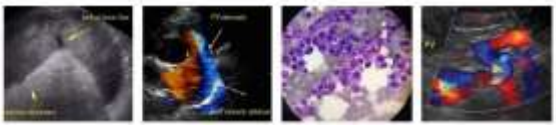
ULTRASONOGRAPHIC EXAMINATION OF Heart & THE ABDOMEN

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	------	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT		149	0.56	1.56	0.53	44.2	78.9
FELINE CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Sisson)	LA 2D 4-chamber long axis AS to FW (Sisson) (cm)		LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)
NORMAL PARAMETER	<1.5	0.88-1.79	0.7-1.7		<1.6	<1.3	40-60
PATIENT	1.0	1.1	1.3		1.0	0.94	NM

Adapted from June Boon,Veterinary Echocardiography,1998
Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal thicknesses with mild alinear contour consistent with mild myocardial remodeling and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions and angles of the myocardium. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinetics. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted or extra cardiac pathology in the visible planes. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.



PATIENT

Minka Kovacevich

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

15 years

WEIGHT

9.8 lbs.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Halton Peel AH

REFERRING VET

Dr. Walters

INVOICE

13050

DATE

1/13/22

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild, nondependent, particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the left kidney. 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 was mildly subnormal in size compared to the left exhibiting asymmetrical contour with moderate loss of corticomedullary border demarcation. The right kidney measured 3.1 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 0.25 cm width. No overt pathology was noted in the area of the right adrenal gland.

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 1.0 cm width.

Liver/ Gallbladder

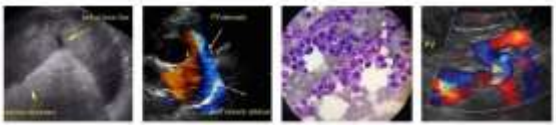
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin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

Gastrointestinal

The gastric fundus and body exhibited intact, sonographically unremarkable wall layering. The gastric body wall width measured 0.25 cm. Subtle prominent antrum and pyloric wall layering owing to minor subjective prominent antrum and pyloric mucosa was present. Minor retained anechoic fluid was present in the antrum and pylorus. The pylorus wall width measured 0.30 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 width measured 0.25 cm. The jejunum wall width measured 0.25 cm.

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



PATIENT

Minka Kovacevich

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

15 years

WEIGHT

9.8 lbs.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Halton Peel AH

REFERRING VET

Dr. Walters

INVOICE

13050

DATE

1/13/22

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, lymphadenopathy or peritoneal effusion was noted.

ULTRASONOGRAPHIC FINDINGS

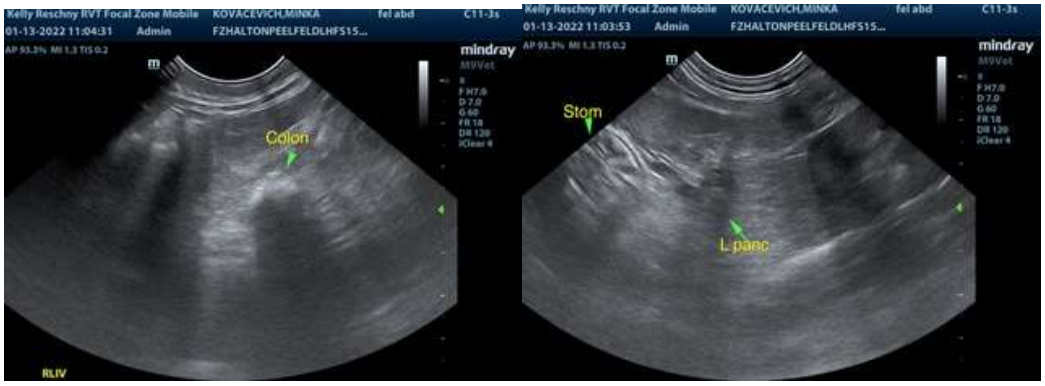
Primary Findings

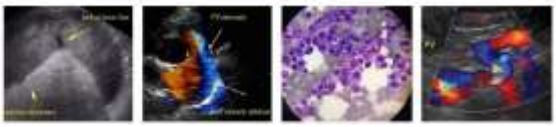
- Overtly normal cardiac structure and function for age with minor static myocardial remodeling
- Mild to moderate chronic renal changes - more prominent in the right kidney
- Mild retained pyloric fluid with sonographically unremarkable small bowel / colon
- Mild urinary bladder sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended. Further baseline renal staging with UPC could be considered if no evidence of significant Inflammatory cells. Potential for mild pyloric gastritis / stasis is possible If evidence of Inappetence or vomiting is noted. Gastroprotectant protocol could be considered if these clinical signs are present.

Overall, no overt evidence of significant cardiac or abdominal visceral pathology as an obvious cause of the patient's clinical signs. Likely, persistent mild physiologic benign flow murmur is suspected without evidence of systolic dysfunction, left or right heart chamber enlargement, or other cardiomyopathies. No indication for cardiac medications was evident.





PATIENT

Minka Kovacevich

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

15 years

WEIGHT

9.8 lbs.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Halton Peel AH

REFERRING VET

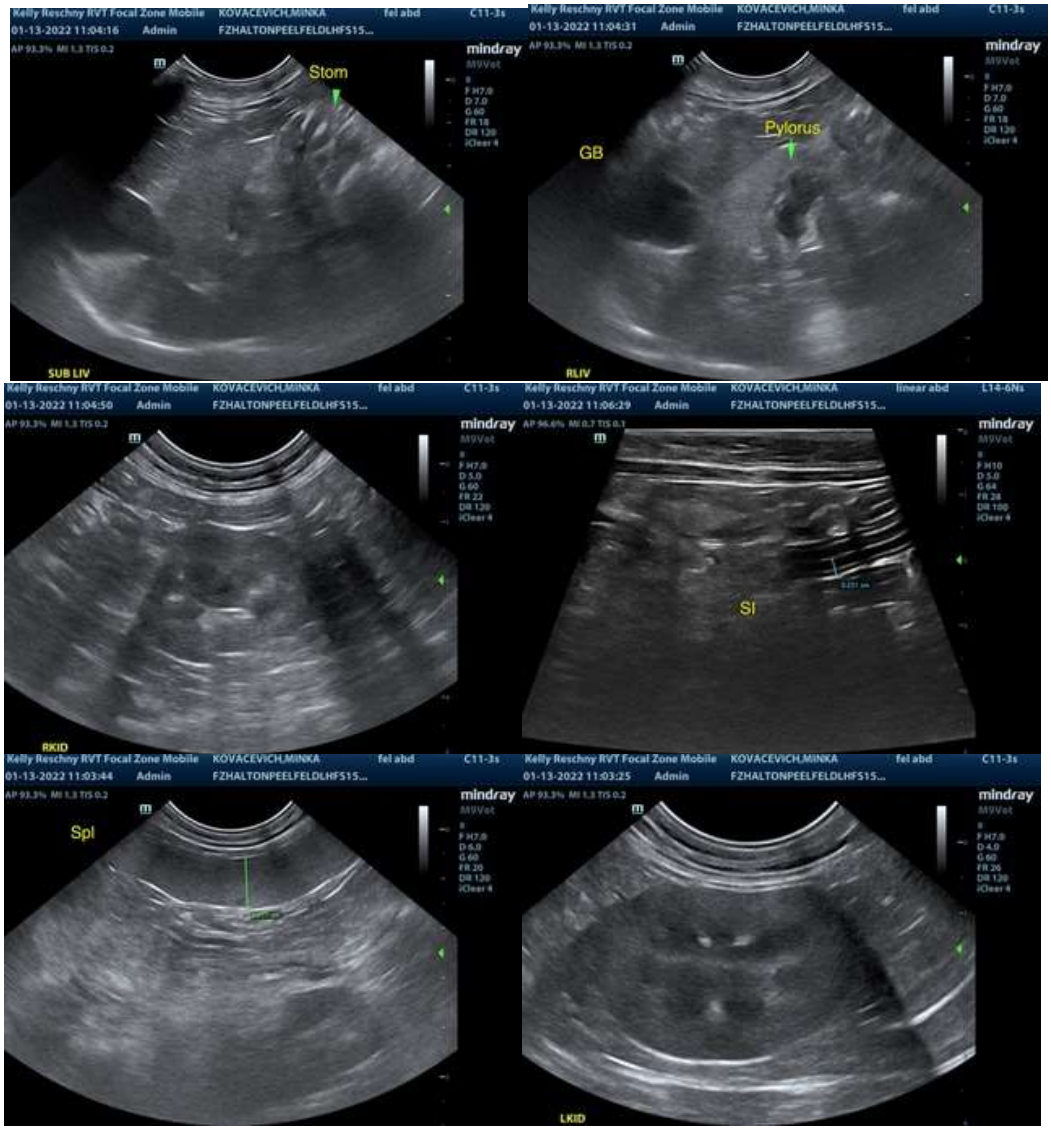
Dr. Walters

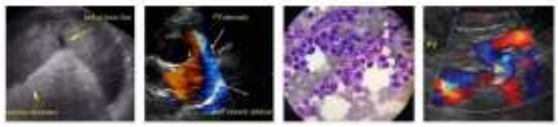
INVOICE

13050

DATE

1/13/22





PATIENT

Minka Kovacevich

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

15 years

WEIGHT

9.8 lbs.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Halton Peel AH

REFERRING VET

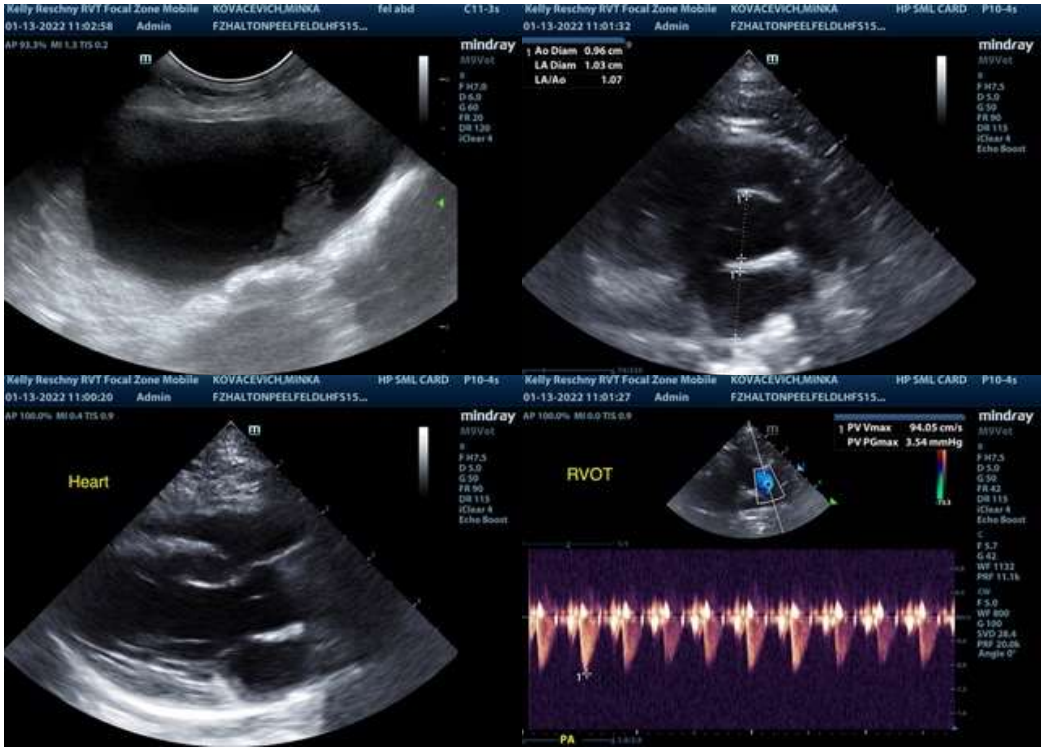
Dr. Walters

INVOICE

13050

DATE

1/13/22



The information and recommendations provided are based on the images presented by the referring veterinarian. 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