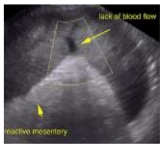
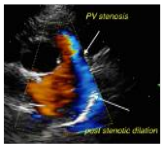
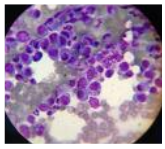
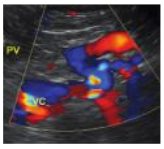
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™





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

PATIENT

Tyler Mundhenk

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15 yrs, 9 mo

WEIGHT

13.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Welch

HOSPITAL NAME

Long Valley AH

REFERRING VET

Dr. Stephanie Welch

INVOICE

15924

DATE

1/24/23

PRESENTING CLINICAL SIGNS

Presented for repeat u/s d/t current ongoing diarrhea for ~ 1 week. Hx intestinal thickening /mesenteric lymph nodes and pancreatitis.

Had u/s performed 1 year ago through sonopath-Eating well, good energy, maintaining weight.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 or pyelectasia was present. The left kidney measured 3.8 cm in length. The right kidney measured 3.4 cm in length. Pinpoint dystrophic left kidney medullary mineral was noted with regional increased right kidney medullary echogenicity with potential for fibrosis.

Adrenal Glands

No overt pathology was noted in the area of the left or right adrenal glands.

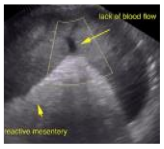
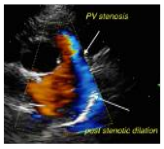
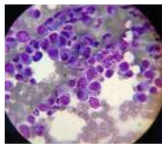
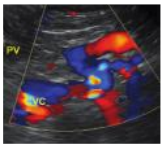
Spleen

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.

Liver/ Gallbladder

The liver exhibited subjective borderline to mild enlargement. Normal parenchyma echogenicity with a moderate coarse echotexture and subjective mild parenchymal remodeling. A solitary, nondisruptive, nonhomogeneous, microcystic nodule was present in the ventral caudal liver measuring 1.4 cm diameter. The nodule did not distort the hepatic capsule. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild, nonorganized, echogenic, gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammation or evidence of post hepatic obstruction was noted. The cystic and common bile ducts were normal.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

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

PATIENT

Tyler Mundhenk

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15 yrs, 9 mo

WEIGHT

13.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Welch

HOSPITAL NAME

Long Valley AH

REFERRING VET

Dr. Stephanie Welch

INVOICE

15924

DATE

1/24/23

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.25 cm.

The small intestine presented intact wall layering with subjective propensity for segmental to generalized mildly prominent mucosa. No evidence of loss of intestinal wall layering, mechanical / metabolic obstruction, or intestinal masses.

Intact colon wall layering was visualized with no evidence of colonic distention containing semi-formed to soft fecal matter, consistent with the patient's history.

Pancreas

Mildly prominent left pancreatic limb extending into the area of the pancreas base exhibiting mild capsule asymmetry was present. Mildly hypoechoic nonhomogeneous left pancreatic limb parenchyma was noted exhibiting minor pancreatic duct dilation. Subtle evidence of peri pancreatic hyperechoic omentum was noted.

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

- Borderline / mild hepatomegaly exhibiting minor parenchymal remodeling
- Solitary nondisruptive liver nodule - likely biliary adenoma, granuloma, or similar, neoplastic criteria considered unlikely
- Minor gallbladder debris
- Left pancreatic limb mild chronic active pancreatitis pattern
- Mild chronic renal changes
- Intact mildly prominent small intestinal walls

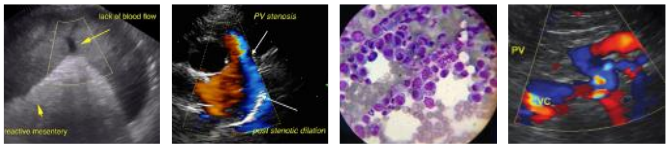
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic inflammatory bowel disease, chronic active pancreatitis, chronic Triad Disease, dietary intolerance / food allergy, dysbiosis, occult parasitism and less likely infiltrative intestinal neoplasia are all potentials. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended.

Sonographic monitoring of the liver nodule for evidence of progression would be reasonable.

Empirically, a canned hydrolyzed diet trial with likely long-term dietary therapy, high colony count probiotic (Proviable), empirical deworming if clinically indicated, cobalamin supplementation, +/- IBD protocol, and assessment of clinical may prove beneficial.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Tyler Mundhenk

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15 yrs, 9 mo

WEIGHT

13.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Welch

HOSPITAL NAME

Long Valley AH

REFERRING VET

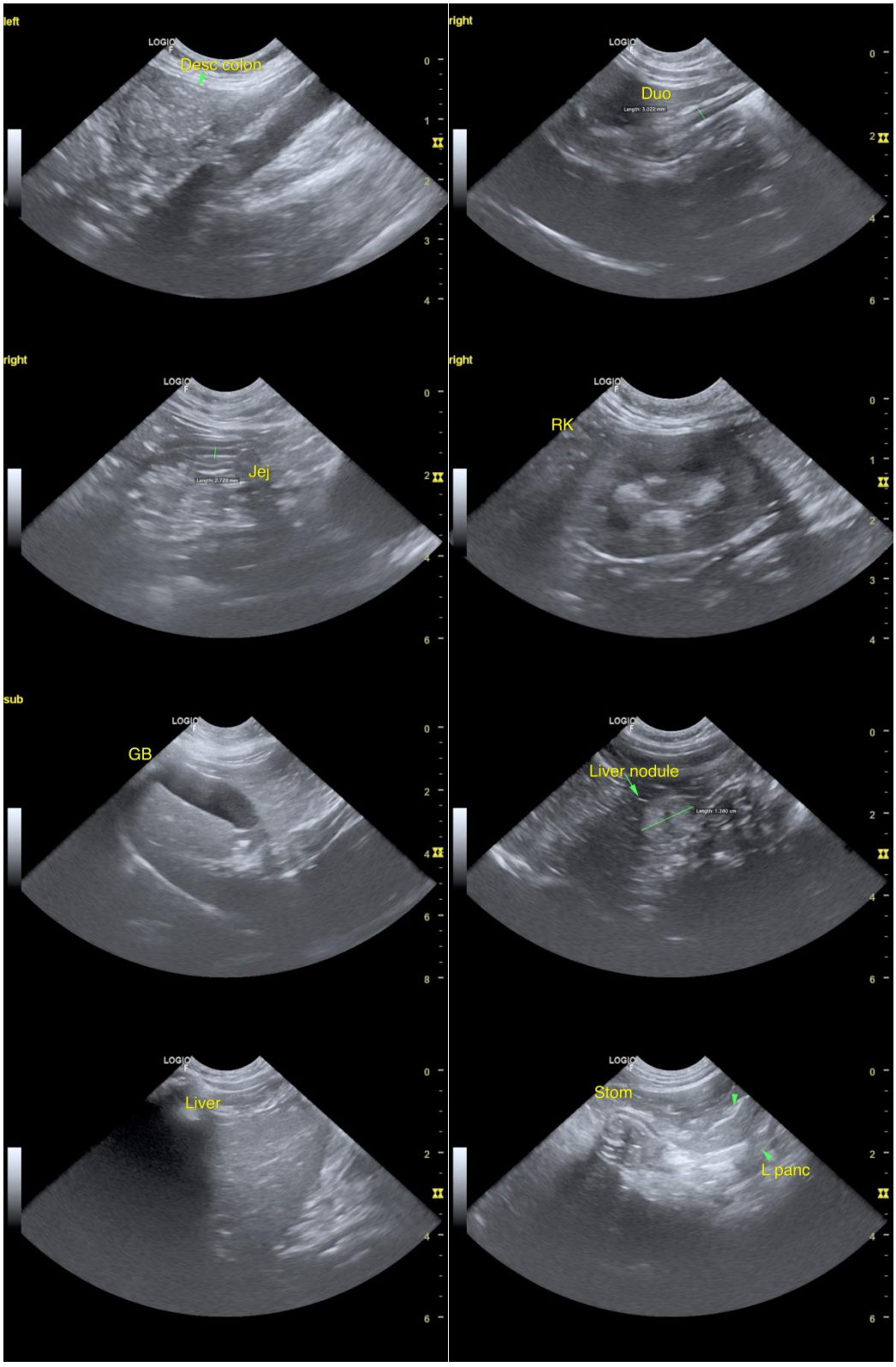
Dr. Stephanie Welch

INVOICE

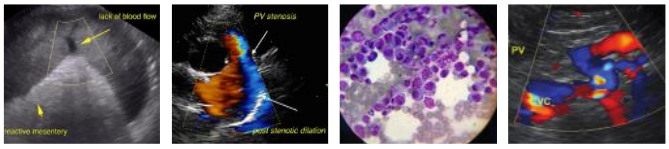
15924

DATE

1/24/23



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Tyler Mundhenk

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

15 yrs, 9 mo

WEIGHT

13.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Welch

HOSPITAL NAME

Long Valley AH

REFERRING VET

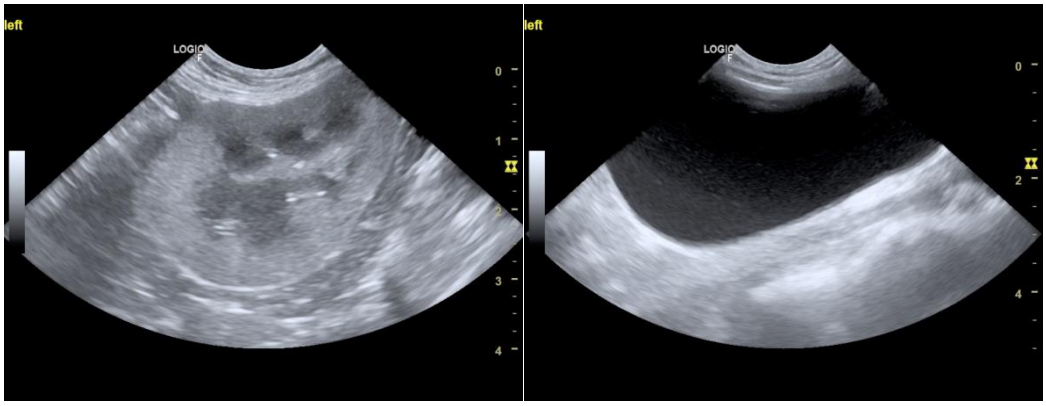
Dr. Stephanie Welch

INVOICE

15924

DATE

1/24/23



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