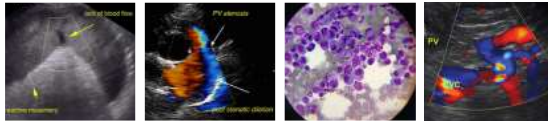




PATIENT	PRESENTING CLINICAL SIGNS
Midnight Schmidt	P has a history of mildly elevated ALT/ALKP detectable on last few labwork checks in 2020. Also in 2020, P went in for radioactive iodine treatment for hyperthyroidism and has been stable since then. P has a history of periodic vomiting and picky eating throughout his life. P presented 10/6/21 for hematuria and licking rear end a lot. P is not taking any medication except a "New Cat Senior Vitamin" and uses Cheristan for flea control. Abnormal PE findings: - Slight generalized cachexia at BCS of 5 - HR 190 with soft grade II/VI parasternal systolic murmur - UTO temp (P has limited patience with restraint) - Flea dirt on exam
SPECIES	
Feline	
BREED	
DSH	Abnormal PE/Chem/CBC/UA Results: Senior panel - CBC was WNLs, Comprehensive Plus - BUN slightly elevated at 34.1 with normal creat 1.7, low Mg 1.7, liver values all mildly elevated (ALT 150, AST 58, ALKP normal at 58, T-bili high-normal at 0.5, CHOL high at 253). Lytes/T4/SDMA WNLs. Hematuria slight on UA - USG 1.018, pH 6.0, pro/gluc/ket/ubg neg, bil neg, bld 3+. WBC <1/HPF, RBC 22/HPF, no bacteria/casts/crystals seen on manual or sedivue. Urine culture pending with IDEXX.
SEX	
Neutered Male	
AGE	
15 years	
WEIGHT	
9.2 lbs.	
INTERPRETED BY	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	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 to moderate loss of corticomodullary symmetry and definition expected for the age of the patient. Focal areas of nonobstructive medullary mineral were present in both kidneys. No evidence of pyelectasia was present. The left kidney measured 3.8 cm in length. The right kidney measured 3.4 cm in length.
Jenna Walsh, CVT	Adrenal Glands The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 cm width.
HOSPITAL NAME	Spleen
The Veterinary Hospital	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
REFERRING VET	
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INVOICE	
12376	
DATE	
10/18/21	



PATIENT	thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.
Midnight Schmidt	
SPECIES	Liver/ Gallbladder
Feline	The liver exhibited subjective mild generalized enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with minor gallbladder debris. No evidence of peripheral inflammation was noted. The cystic and common bile ducts were normal.
BREED	Gastrointestinal
DSH	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 0.26 cm.
SEX	
Neutered Male	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 jejunum wall width measured 0.22 - 0.25 cm. The duodenum wall width measured 0.27 cm. The ileocolic wall width measured 0.36 cm.
AGE	
15 years	
WEIGHT	
9.2 lbs.	
INTERPRETED BY	Normal visible colon wall layers were present with apparent formed feces in lumen.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Pancreas
	The left pancreatic limb was normal in size and contour with heterogeneous to subtly hypoechoic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
IMAGING PERFORMED BY	Free Abdomen
Jenna Walsh, CVT	No overt lymphadenopathy or peritoneal effusion was present.
HOSPITAL NAME	ULTRASONOGRAPHIC FINDINGS
The Veterinary Hospital	Primary Findings
REFERRING VET	<ul style="list-style-type: none">Mild urinary bladder sedimentBilateral chronic renal changes with nonobstructive medullary mineralLow-grade hepatopathy - subjectively benignMild gallbladder debrisMildly prominent, heterogeneous to subtly hypoechoic left pancreas
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PATIENT

Midnight Schmidt

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

15 years

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

The Veterinary
Hospital

REFERRING VET

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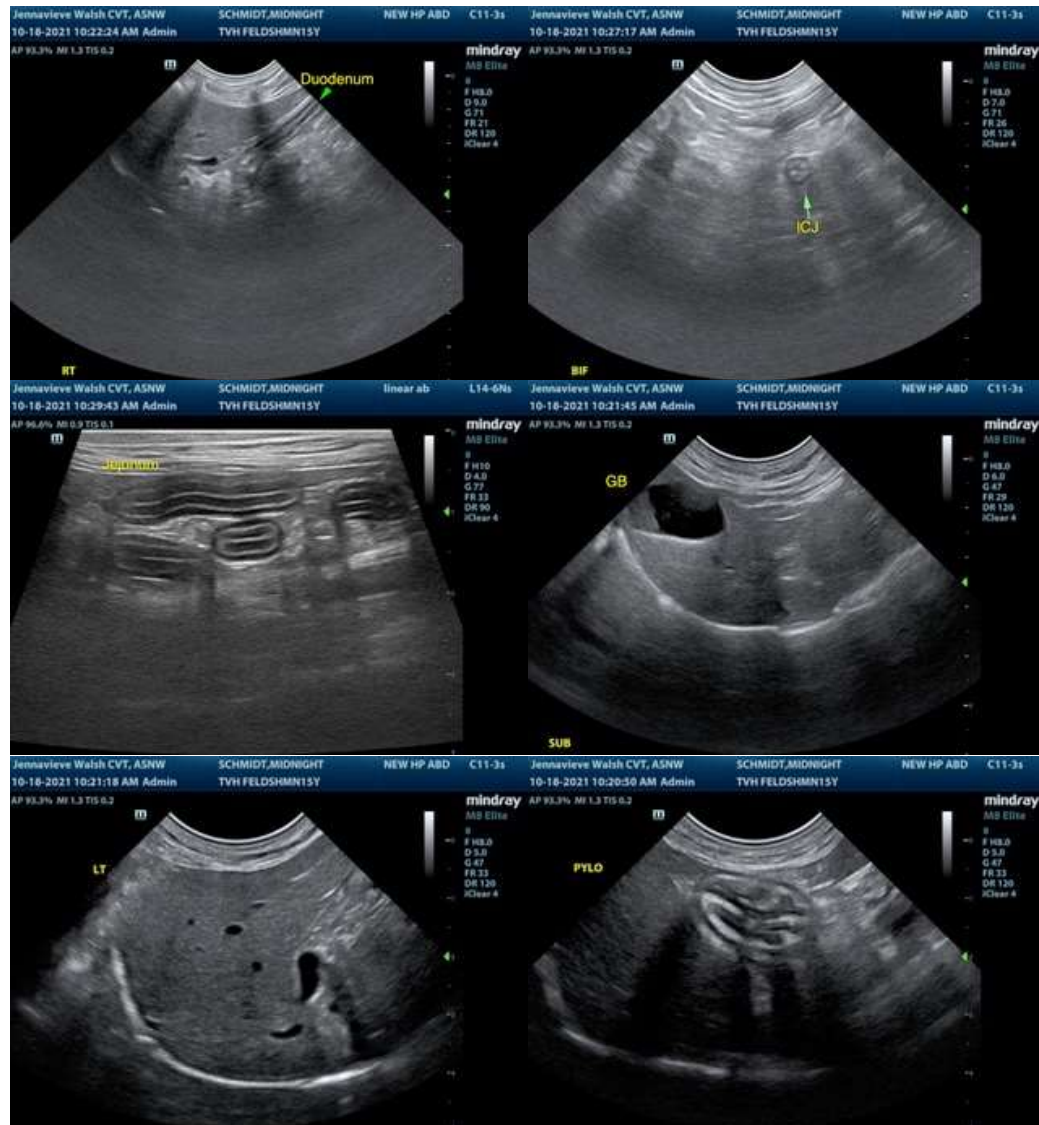
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

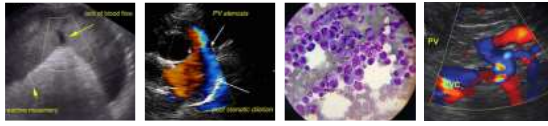
Pending urine culture, baseline urine protein: creatinine ratio may be considered, even if no evidence of proteinuria for further renal staging.

Low-grade chronic pancreatitis would be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation or elevated Spec fPL.

The presence of minor gallbladder debris may be incidental or secondary to fasting, yet may suggest some degree of hepatobiliary inflammation or nonclinical cholestasis.

Given the patient's decreased body condition, a GI panel to include PLI/TLI/Cobalamin/Folate is recommended. As-needed gastrointestinal support is suggested.





PATIENT

Midnight Schmidt

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

15 years

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

The Veterinary
Hospital

REFERRING VET

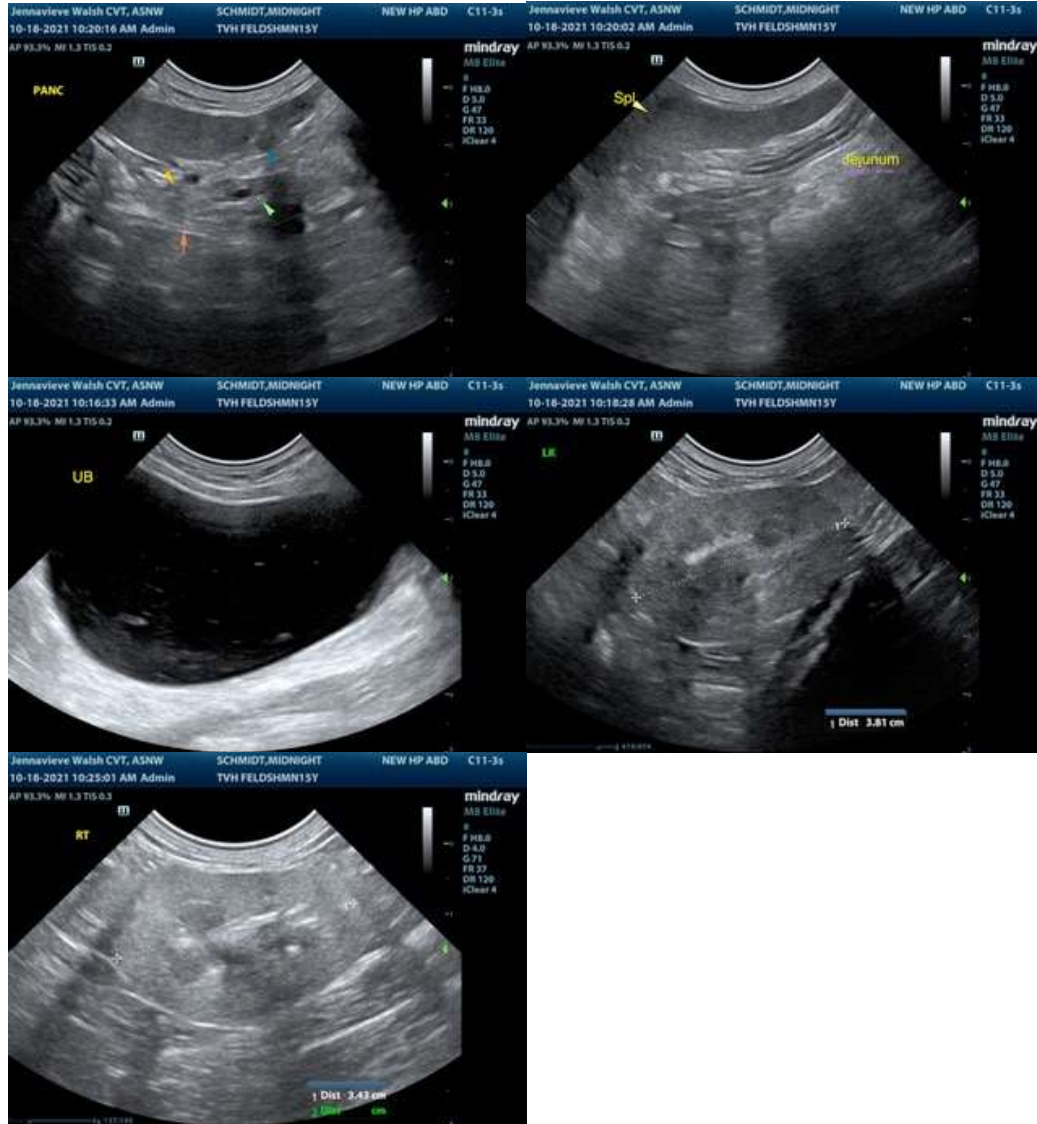
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DATE

10/18/21



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