



**PATIENT PRESENTING CLINICAL SIGNS**

Meme Garcia Presented due to inappropriate urination, pu/pd, significant weight loss, and vomiting 3-4x per week. Duration: approx. 1 month Exam was unremarkable.  
Abnormal PE/Chem/CBC/UA Results: mild hypercalcemia

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Siamese X

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 were noted.

**SEX**

Spayed Female

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Caudal cortical infarct present exhibited by focal increased cortex echogenicity. The kidneys measured 3.6 cm each.

**AGE**

15 Years

**WEIGHT**

7.8 Pounds

The area of the aortic trifurcation was free of pathology. No evidence of sublumbar or medial iliac lymphadenopathy.

**Adrenal Glands**

**INTERPRETED BY**

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

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm in width. The right adrenal gland measured 0.41 cm in width. No evidence of adrenal tumors or overt hyperplasia.

**Spleen**

**IMAGING PERFORMED BY**

Jenna Walsh

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease. The spleen measured 0.95 cm in width. No evidence of splenic neoplastic criteria.

**HOSPITAL NAME**

West Salem AC

**Liver**

**REFERRING VET**

Dr. Sirianni

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. No evidence of masses or nodules. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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**DATE**

10/19/21

**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. Gastric body wall measured 0.25 cm.



**PATIENT** 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. Duodenum wall measured 0.24 cm. Jejunum wall measured 0.21 cm. Ileocolic wall measured 0.31 cm.  
Meme Garcia

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

Feline **Pancreas**

**BREED** 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 was evident.  
Siamese X

**SEX** **Free Abdomen**

Spayed Female Intermittent, mildly prominent to enlarged jejunocolic nodes were present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). Potential for focal cystic lymph node noted medial to the spleen. Example of colic lymph node measured 1.0 cm x 0.37 cm.

**AGE**

15 Years No effusion. The omentum was of uniform echogenicity.

**WEIGHT** Rapid view of the heart revealed no overt evidence of structural or functional cardiomyopathy.

7.8 Pounds

#### ULTRASONOGRAPHIC FINDINGS

#### INTERPRETED BY

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

- Bilateral chronic renal changes with right kidney cortical infarct
- Mild age related hepatosplenic changes – no overt evidence of hepatosplenic neoplastic criteria.
- Sonographically unremarkable gastrointestinal tract
- Intermittent, subjectively reactive/benign jejunocolic lymph nodes

#### IMAGING PERFORMED BY

Jenna Walsh

#### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

#### HOSPITAL NAME

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Overall, largely geriatric abdomen without evidence of significant visceral pathology as an obvious cause of the patient's significant weight loss or mild hypercalcemia. Potential for structurally insignificant gastroenteropathy cannot be definitively excluded. Further assessment may include full urinary workup including urine culture and sensitivity and baseline urine protein/creatinine ratio on sterile urine sample, GI panel to include PLI, TLI, cobalamin and folate, and 3-view chest radiographs to assess for or rule out occult thoracic or esophageal pathology.

#### REFERRING VET

Dr. Sirianni

For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

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One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

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**PATIENT**

Meme Garcia

**SPECIES**

Feline

**BREED**

Siamese X

**SEX**

Spayed Female

**AGE**

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**WEIGHT**

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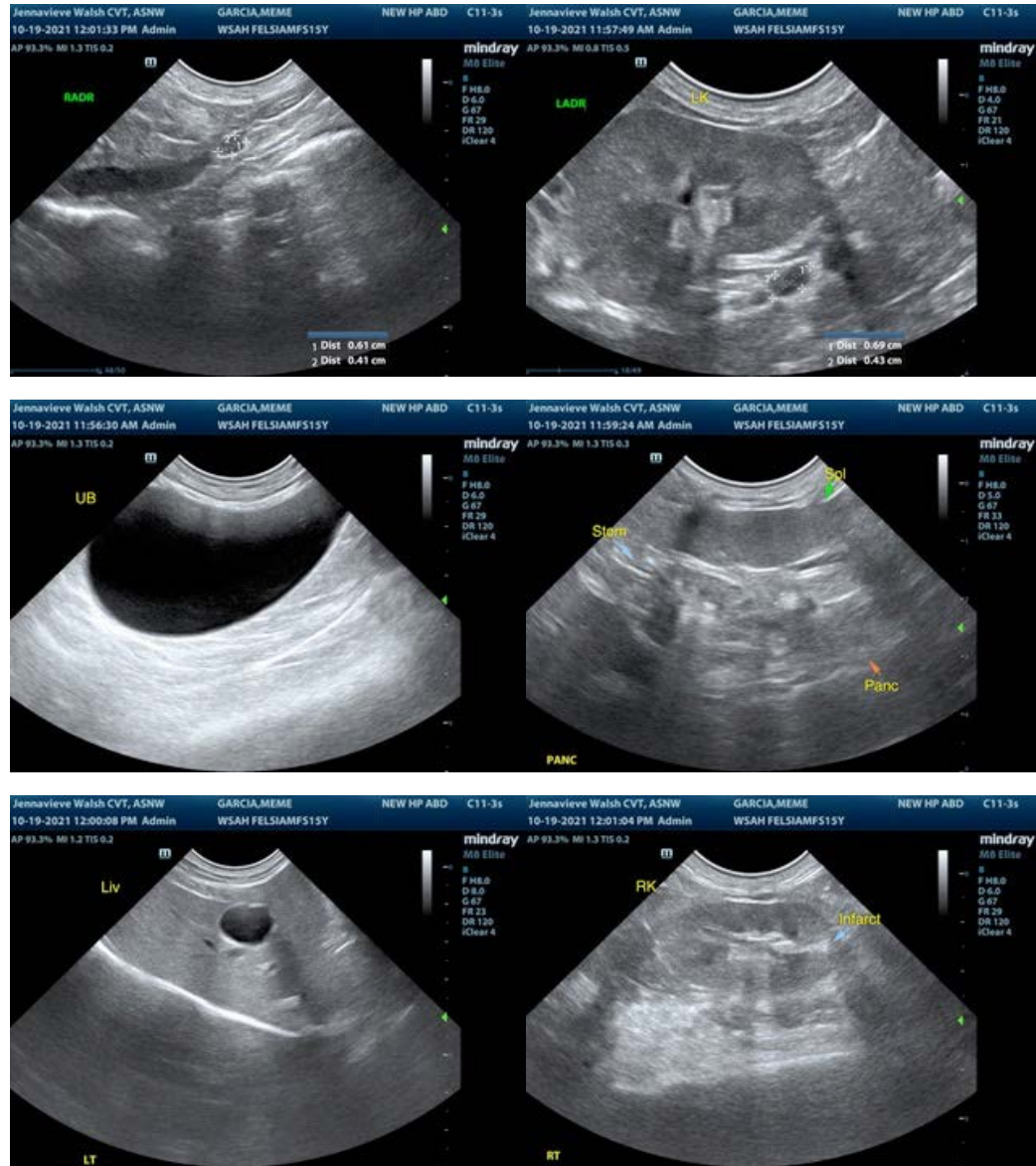
Dr. Sirianni

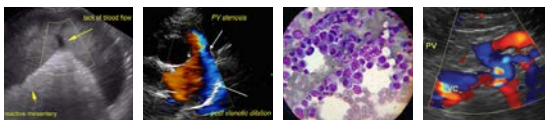
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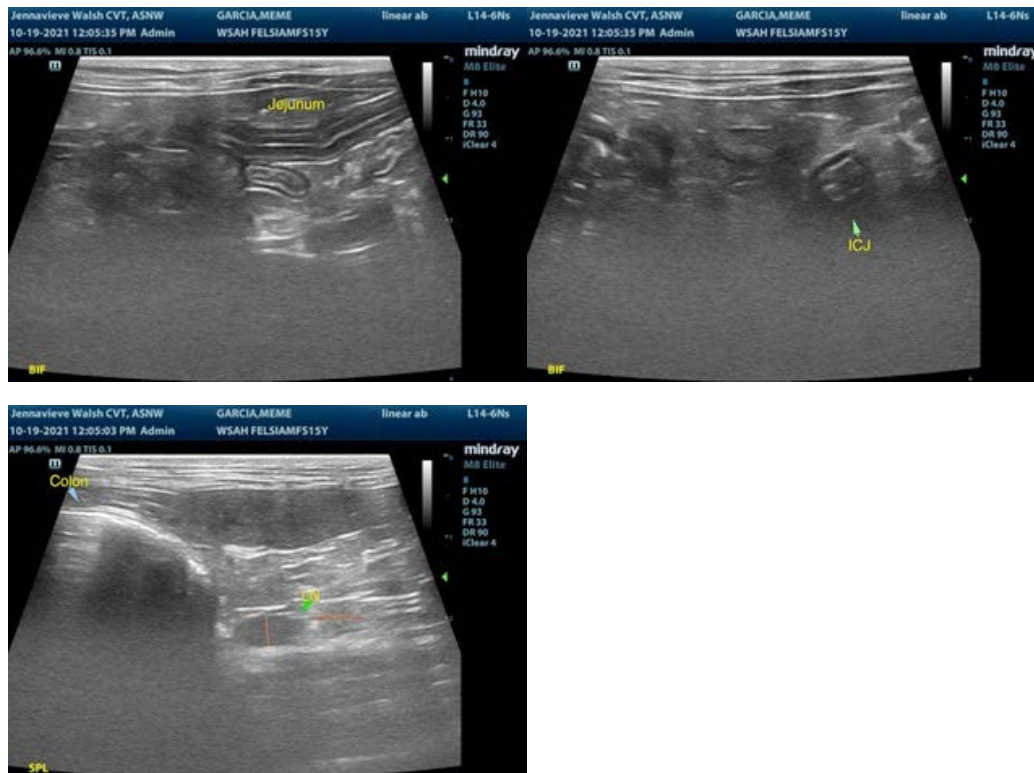
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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