



**PATIENT PRESENTING CLINICAL SIGNS**

Kiki Sullivan Vomiting - open etiology early kidney disease regenerative anemia

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Mild anemia HCT = 28.8%. leukocytosis with neutrophilia = 23.56 K/uL and monocytosis = 1.22 K/uL. inflammation vs stress leukogram. Elevated SDMA = 21 ug/dL, BUN and Creatinine WNL. AST mildly elevated. Early kidney disease.

Feline

**BREED** Current Medications Cerenia, 16mg, 1/4 tab as needed

**DSH ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SEX** *Urinary System*

MN The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

**AGE** 15yr 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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.5 cm in length. The right kidney measured 4.0 cm in length.

**WEIGHT** 10.89lb

**INTERPRETED BY** The area of the aortic trifurcation was free of pathology.

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) *Adrenal Glands*  
No overt pathology was present in the area of the bilateral adrenal glands.

*Spleen*

**IMAGING PERFORMED BY** Sara Hansen  
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 0.87 cm in width at the level of the hilus.

**HOSPITAL NAME** *Liver*

The Ark Veterinary Clinic  
The liver presented borderline to mildly enlarged in size. 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 primarily anechoic luminal content. The cystic and common bile ducts were normal.

**REFERRING VET** Dr. Hilberg

**INVOICE** 11927ag  
*Gastrointestinal*

**DATE** 10/19/2022  
Regional moderate to severe gastric wall thickening and loss of gastric wall layer detail was present. The thickened gastric walls exhibited decreased echogenicity and an asymmetrical luminal surface. Mild



**PATIENT**

Kiki Sullivan

retained anechoic fluid was present in the gastric lumen without evidence of foreign material. Gastric wall width measured up to 2.6 cm.

**SPECIES**

Feline

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.

**BREED**

DSH

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

**SEX**

MN

**Pancreas**

The pancreas was not definitively visualized owing to regional omental artifact and nodular mesentery.

**Free Abdomen**

Regional perigastric non-uniform to hypoechoic nodular mesentery and likely perigastric mesenteric lymphadenopathy. Mild volume peritoneal free fluid exhibiting mild echogenic changes was present.

**AGE**

15yr

**ULTRASONOGRAPHIC FINDINGS**

- Gastric mass
- Regional perigastric nodular mesentery and likely perigastric lymphadenopathy
- Mild volume peritoneal free fluid
- Bilateral moderate chronic renal changes

**WEIGHT**

10.89lb

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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

Although sampling is required for further assessment, the gastric mass is consistent with neoplastic criteria with primary concern for gastric lymphoma. Evidence of regional perigastric omental seeding to potential lymphomatosis and associated peritoneal free fluid potentially owing to lymphatic obstruction was present.

**IMAGING  
PERFORMED BY**

Sara Hansen

Unfortunately, this case appears to be non-surgical. Gastric mass FNA cytology could be considered with potential for oncology consult and chemotherapeutic intervention. An unfavorable prognosis is indicated.

**HOSPITAL NAME**

The Ark Veterinary  
Clinic

**REFERRING VET**

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**SPECIES**

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**IMAGING PERFORMED BY**

Sara Hansen

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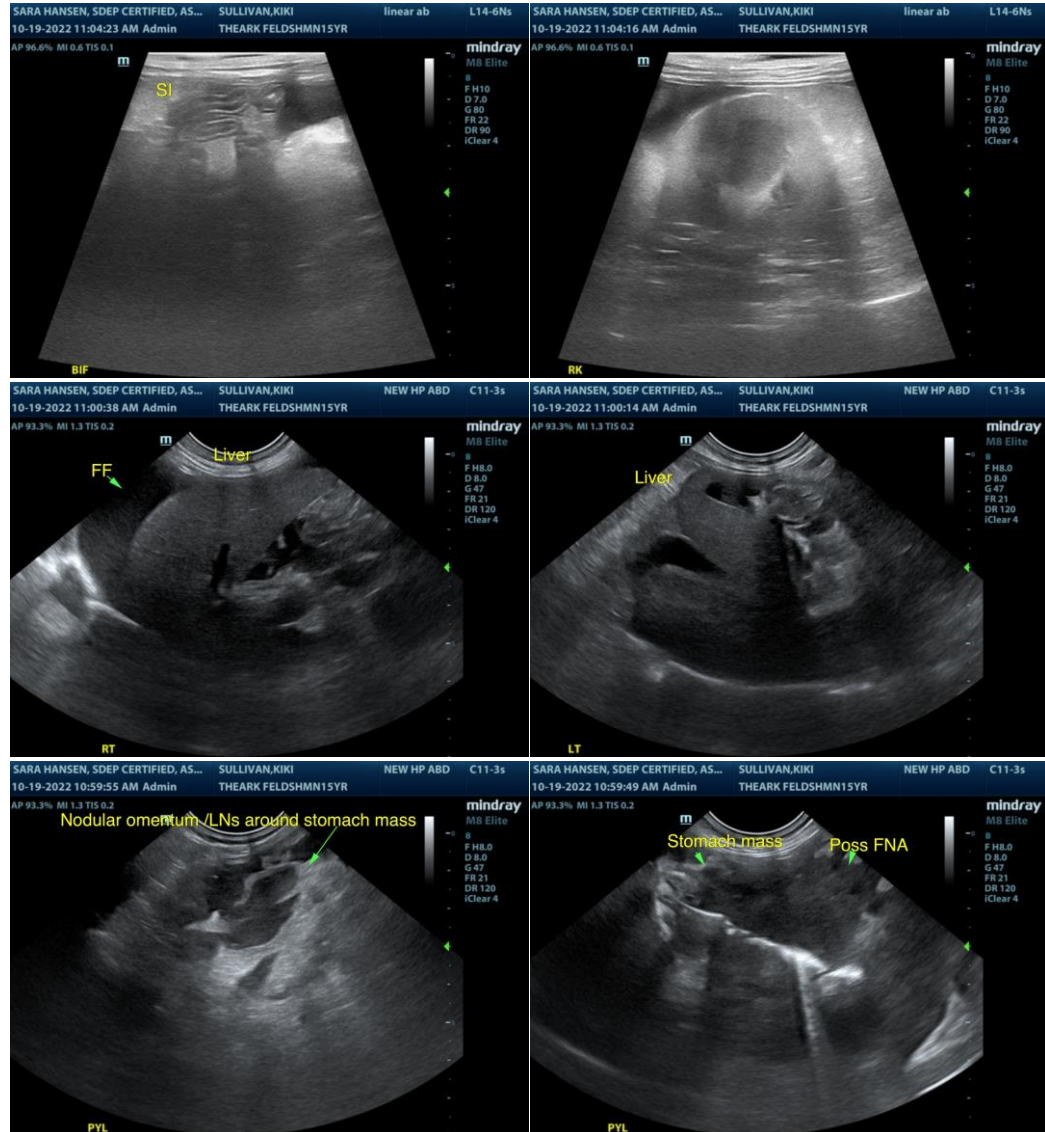
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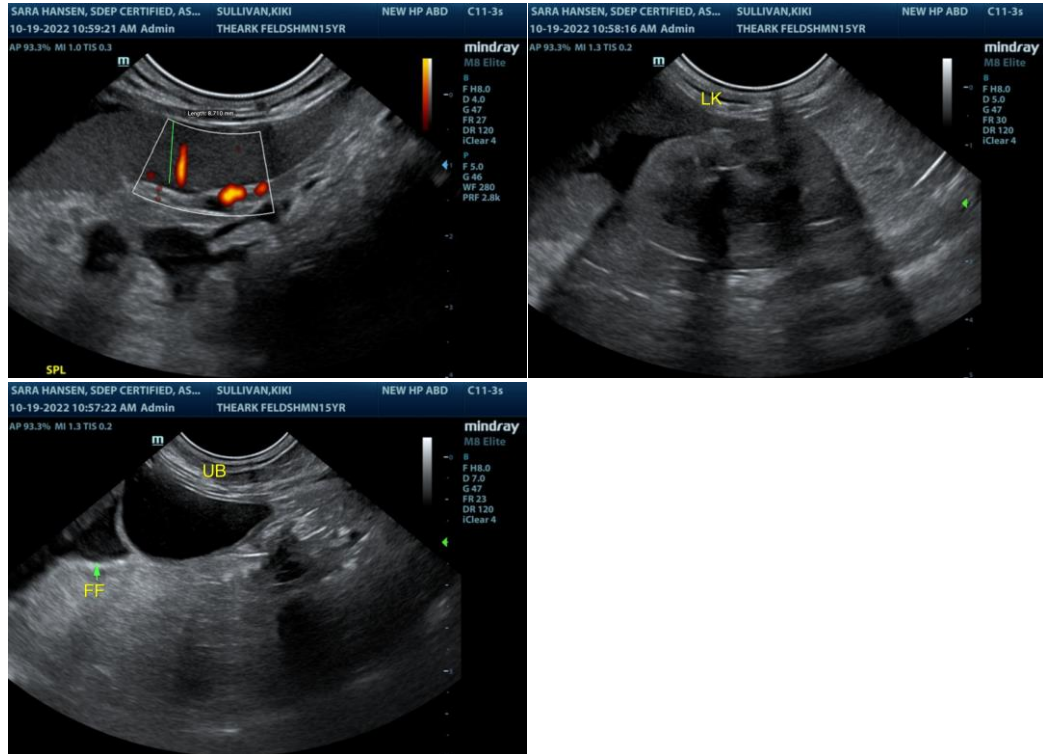
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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