



PATIENT PRESENTING CLINICAL SIGNS

Mabel Juron Elevated liver enzymes noted on pre-operative blood work. Bile acids normal. Repeat blood work, persistent elevation ALT (203). Normal appetite. No vomiting or diarrhea.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

BREED 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.

DSH

SEX Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 3.7 cm in length. The right kidney measured 3.4 cm in length.

FI

AGE The area of the aortic trifurcation was free of pathology.

7mo

Adrenal Glands

WEIGHT The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.28 cm width. No overt pathology in the area of the right adrenal gland.

6.6lb

Spleen

INTERPRETED BY

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

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 0.81 cm in width at the level of the hilus.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Liver

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.

HOSPITAL NAME

Falmouth Animal Hospital

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The proximal common bile duct was mildly dilated and tortuous without overt post hepatic obstruction. The common bile duct measured 0.25 cm diameter.

REFERRING VET

Dr. Sakmar

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.

INVOICE

11772ag

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.

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

DATE

10/03/2022

Pancreas



PATIENT Mabel Juron
 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.

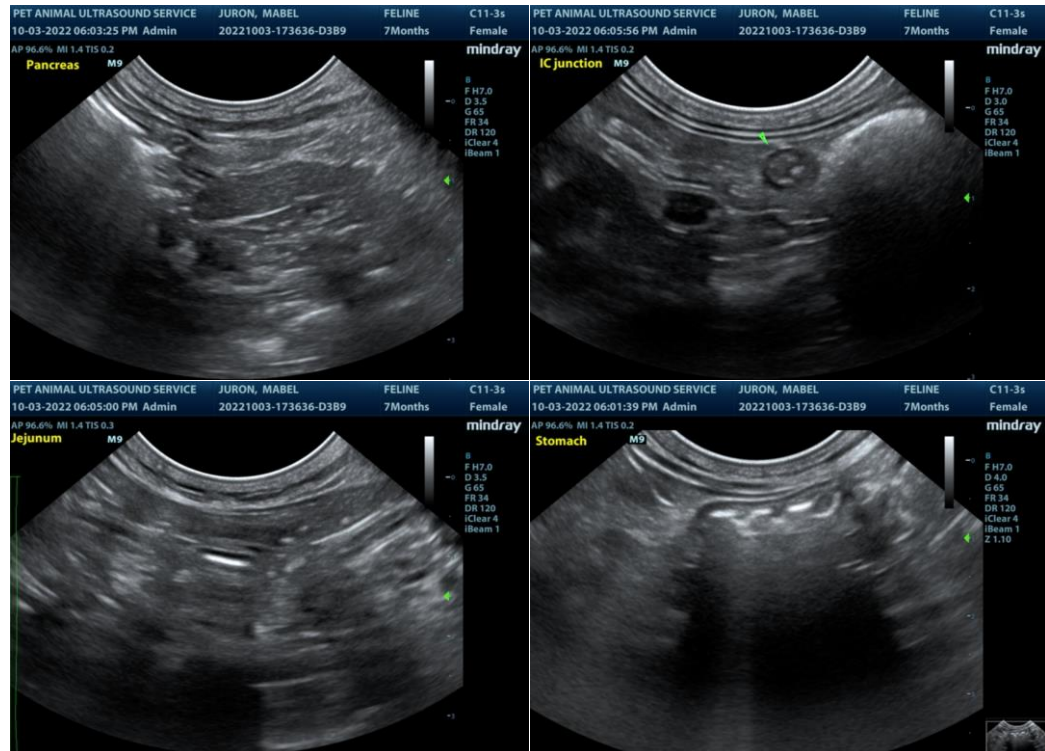
SPECIES Feline
Free Abdomen
 No peritoneal effusion was present.

BREED DSH
 Focal, mildly prominent to enlarged colic lymph nodes were present. The lymph nodes was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). Not consistent with inflammatory/neoplastic criteria, potentially indicative of mild immunologic immaturity.

SEX FI
 • Low grade hepatopathy-suspect low grade inflammatory hepatic parenchymal disease or hepatobiliary inflammation

AGE 7mo
 No evidence of a portosystemic shunt in conjunction with normal hepatic vascular volume and normal bile acids. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology is warranted for further assessment and identification of inflammatory cell type. No anesthetic contraindications assuming normal hepatic function. If normal clotting status, hepatic biopsies at the time of OVH may be considered.

WEIGHT 6.6lb



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

IMAGING PERFORMED BY
 Pamela Harrigan, RDCS

HOSPITAL NAME
 Falmouth Animal Hospital

REFERRING VET
 Dr. Sakmar

INVOICE
 11772ag

DATE
 10/03/2022



PATIENT
 Mabel Juron

SPECIES
 Feline

BREED
 DSH

SEX
 FI

AGE
 7mo

WEIGHT
 6.6lb

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

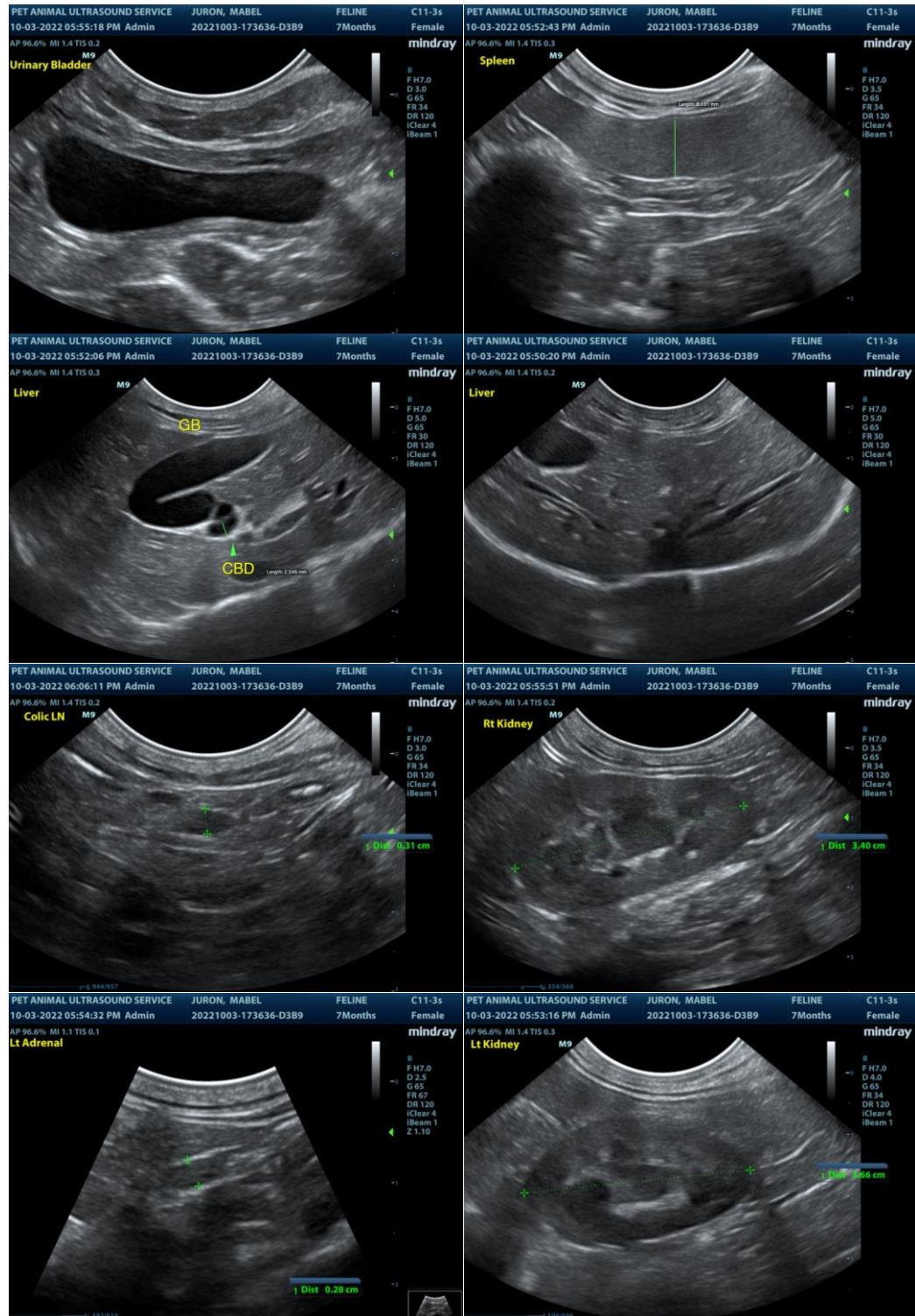
IMAGING PERFORMED BY
 Pamela Harrigan, RDCS

HOSPITAL NAME
 Falmouth Animal Hospital

REFERRING VET
 Dr. Sakmar

INVOICE
 11772ag

DATE
 10/03/2022



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



PATIENT

can be of any further assistance please contact me.

Mabel Juron

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SPECIES

Feline

BREED

DSH

SEX

FI

AGE

7mo

WEIGHT

6.6lb

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Pamela Harrigan, RDCS

HOSPITAL NAME

Falmouth Animal
Hospital

REFERRING VET

Dr. Sakmar

INVOICE

11772ag

DATE

10/03/2022