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| PATIENT | PRESENTING CLINICAL SIGNS |
| Rigel Cowing | concern for ascites Hx intussusception in May chronic diarrhea anorexia for past 3 days R/O sepsis FIP Abnormal PE/Chem/CBC/UA Results: WBC 21 K Neu 17.1 Glu 200 BUN 95 Phos 8.6 Na 144 Cl 109 no RBC seen |
| SPECIES | ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN |
| Feline | Urinary System |
| BREED | The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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. |
| DLH | |
| SEX | The right kidney was subnormal in size compared to the left kidney with asymmetrical margination. The right kidney measured 3.3 cm in width. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. |
| Neutered Male | |
| AGE | The left kidney measured 4.3 cm and presented primarily maintained 1:3 cortex/medulla ratio with subtle cortical hypertrophy and increased cortex echogenicity. Potential for minor emerging medullary mineral in the left kidney. |
| 3 Years | |
| WEIGHT | The area of the aortic trifurcation was free of pathology. |
| 5.6 | Adrenal Glands |
| INTERPRETED BY | No overt pathology in the area of the left and right adrenal glands. |
| R. McKenzie Daniel, DVM, DABVP (Canine and Feline) | Spleen |
| IMAGING PERFORMED BY | 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. |
| Jenn | Liver |
| HOSPITAL NAME | 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. The gallbladder exhibited mild overall distention, yet partially divided into two compartments. Anechoic content present. The cystic biliary duct was mildly dilated, containing anechoic fluid. The common bile duct was normal. |
| Rockaway AH | Gastrointestinal |
| REFERRING VET | 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. |
| Dr. Ascot | The small intestine presented intact wall layering with primarily maintained 1:3 muscularis/mucosa ratio without loss of intestinal wall layering, masses, or recurrent intussusception. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Duodenum wall measured 0.22 cm. Jejunum wall measured 0.20 cm. Ileocolic wall measured 0.30 cm. |
| INVOICE | Normal visible colon wall layers were present with formed to shadowing fecal matter present. |
| 26130 | |
| DATE | |
| 10/7/21 | |



PATIENT

Pancreas

Rigel Cowing

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 overt lymphadenopathy or peritoneal effusion was present. No intraabdominal masses.

BREED

DLH

ULTRASONOGRAPHIC FINDINGS

SEX

Neutered Male

- Bilateral interstitial nephrosis renal pattern, more prominent in right kidney with mild subnormal right kidney size compared to the left kidney.
- Partially bilobed gallbladder – normal variant in a cat.
- Sonographically unremarkable gastrointestinal tract with formed feces present in the colon

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

3 Years

No overt evidence of significant gastrointestinal structural pathology. However, given the patient's chronic diarrhea and anorexia, dietary intolerance/food hypersensitivity, occult parasitism if the patient is indoor outdoor, or structurally insignificant inflammatory gastroenteropathy are possible. Fresh fecal analysis to assess for parasitic ova/giardia +/- diarrhea PCR panel and GI panel to include PLI, TLI, cobalamin and folate warranted. No overt evidence of sepsis or FIP. Correlation with azotemia with full urinalysis to differentiate between prerenal and renal azotemia recommended. Baseline renal staging to include urine culture and sensitivity and UPC recommended.

WEIGHT

5.6

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

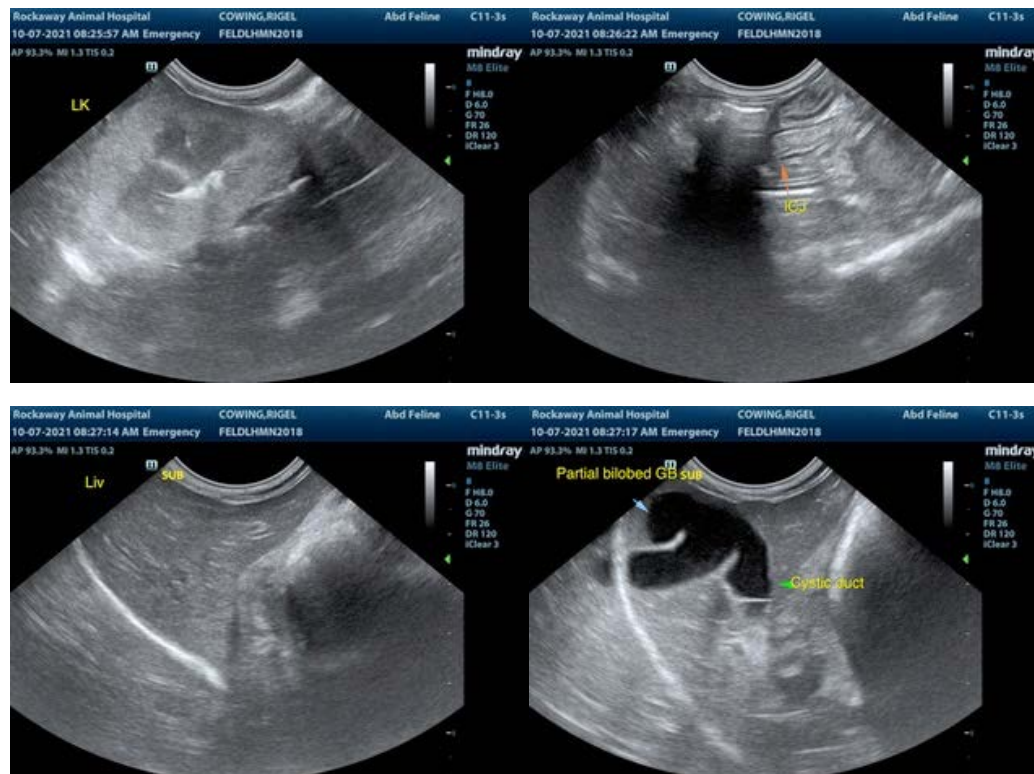
Dr. Ascot

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PATIENT

Rigel Cowing

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

3 Years

WEIGHT

5.6

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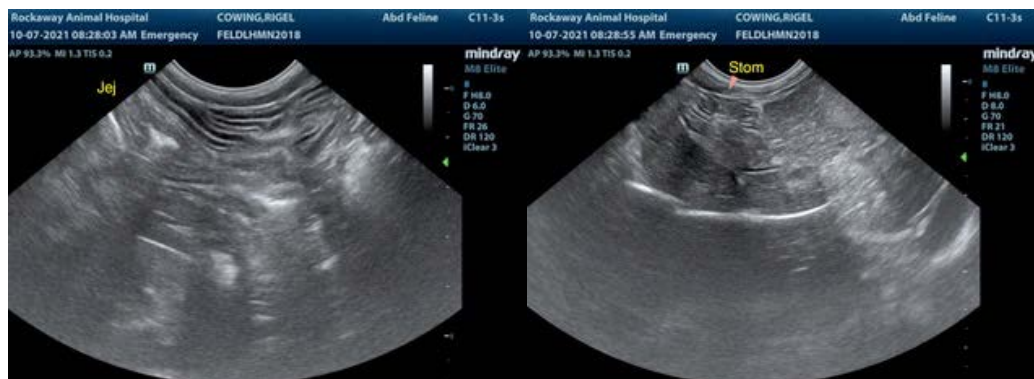
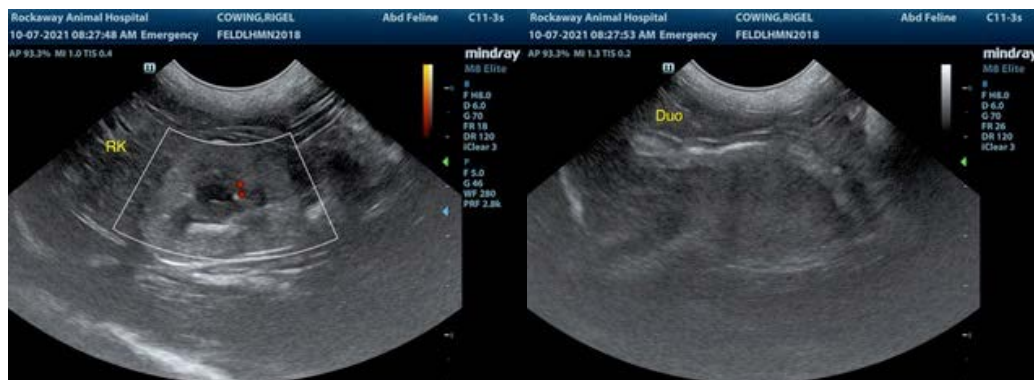
Dr. Ascot

INVOICE

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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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
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