



PATIENT

Monkey Manno

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

8 years

WEIGHT

15 lbs.

PRESENTING CLINICAL SIGNS

Was Dx'd 11/2021 @ Speciality Clinic w/ IBD/Food Intolerance. Initial Tx was Prednisolone & Novel Protein Diet. Was switched to Budesonide in March to decrease Pred side effects. Cat is on 1mg SID. Has done well but lately is more lethargic, vocal (after eating) Recent minor weight loss (~0.8lbs)

Abnormal PE/Chem/CBC/UA Results: Lab Work today including CBC, Chem Panel w/ SDMA and T4: Normal UA: Normal U/S done at PVSED in Nov. 2021: NAA other than: Stomach & SI contained normal layering w/ SI thickness measuring 0.27-0.34cm. Ileum measured 0.38cm. No lymphadenopathy

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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. Minor nondependent, particulate sediment, which may indicate cellular debris / protein, crystalline debris, lipid, or mucus, 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.

INTERPRETED BY

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

No evidence of medial Iliac or sublumbar lymphadenopathy/masses.

Normal size and margination were 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 4.2 cm in length. The right kidney measured 4.5 cm in length.

IMAGING PERFORMED BY

Dr. Sam Doverspike

Adrenal Glands

No overt pathology was noted in the area of the left or right adrenal glands.

HOSPITAL NAME

Franklin Animal
Clinic Inc.

Spleen

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 0.76 cm width at the level of the hilus.

REFERRING VET

Dr. Sam Doverspike

INVOICE

15463

Liver/ Gallbladder

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 was non-distended in size containing minor echogenic luminal gallbladder debris, likely incidental given no evidence of cholestasis, potentially secondary to fasting. The cystic and common bile ducts were normal.

DATE

11/10/22



PATIENT

Monkey Manno

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

8 years

WEIGHT

15 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Sam Doverspike

HOSPITAL NAME

Franklin Animal
Clinic Inc.

REFERRING VET

Dr. Sam Doverspike

INVOICE

15463

DATE

11/10/22

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. The gastric body wall width measured 0.30 cm.

The small intestine presented primarily intact wall layering and maintained a 1:3 muscularis/mucosa ratio. The segmental jejunum exhibited intact yet mildly thickened wall layering with concurrent mild altered muscularis mucosa ratio owing to segmental mild thickened muscularis layer. No evidence of loss of intestinal wall layering or intestinal masses to the level of the ileocolic junction. The ileocolic junction was sonographically normal without evidence of mural pathology. The duodenum wall measured 0.27 cm width. The jejunum wall measured 0.27 cm up to 0.37 cm width in areas of segmental mild thickening. The ileocolic junction wall measured 0.32 cm width.

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

Pancreas

The left pancreatic limb was normal in size and contour with subtle hypochoic parenchyma compared to adjacent omentum.

Free Abdomen

No omental masses, lymphadenopathy, or evidence of peritoneal free fluid were noted.

ULTRASONOGRAPHIC FINDINGS

- Overall intact small bowel walls exhibiting primarily maintained normal muscularis mucosa ratio
- Segmental mildly thickened midabdominal jejunum exhibiting mild altered muscularis / mucosa ratio owing to mildly thickened muscularis layer
- Normal stomach
- Possible low-grade left pancreatitis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, the small bowel presentation is likely consistent with the previous diagnosis of chronic IBD / food intolerance. The possibility for emerging segmental jejunal neoplastic infiltrative enteropathy with round cells such as lymphoma cannot technically be excluded without full-thickness intestinal biopsies. Potential for low-grade pancreatitis often seen concurrently with inflammatory bowel disease in cats may be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation.

Given the patient's mild weight loss, a GI panel to include PLI/TLI/Cobalamin/Folate +/- three-view chest radiographs to rule out occult thoracic pathology may be considered. Sonographic reassessment of the small bowel walls in 6-8 weeks is likely ideal.



PATIENT

Monkey Manno

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

8 years

WEIGHT

15 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Sam Doverspike

HOSPITAL NAME

Franklin Animal
Clinic Inc.

REFERRING VET

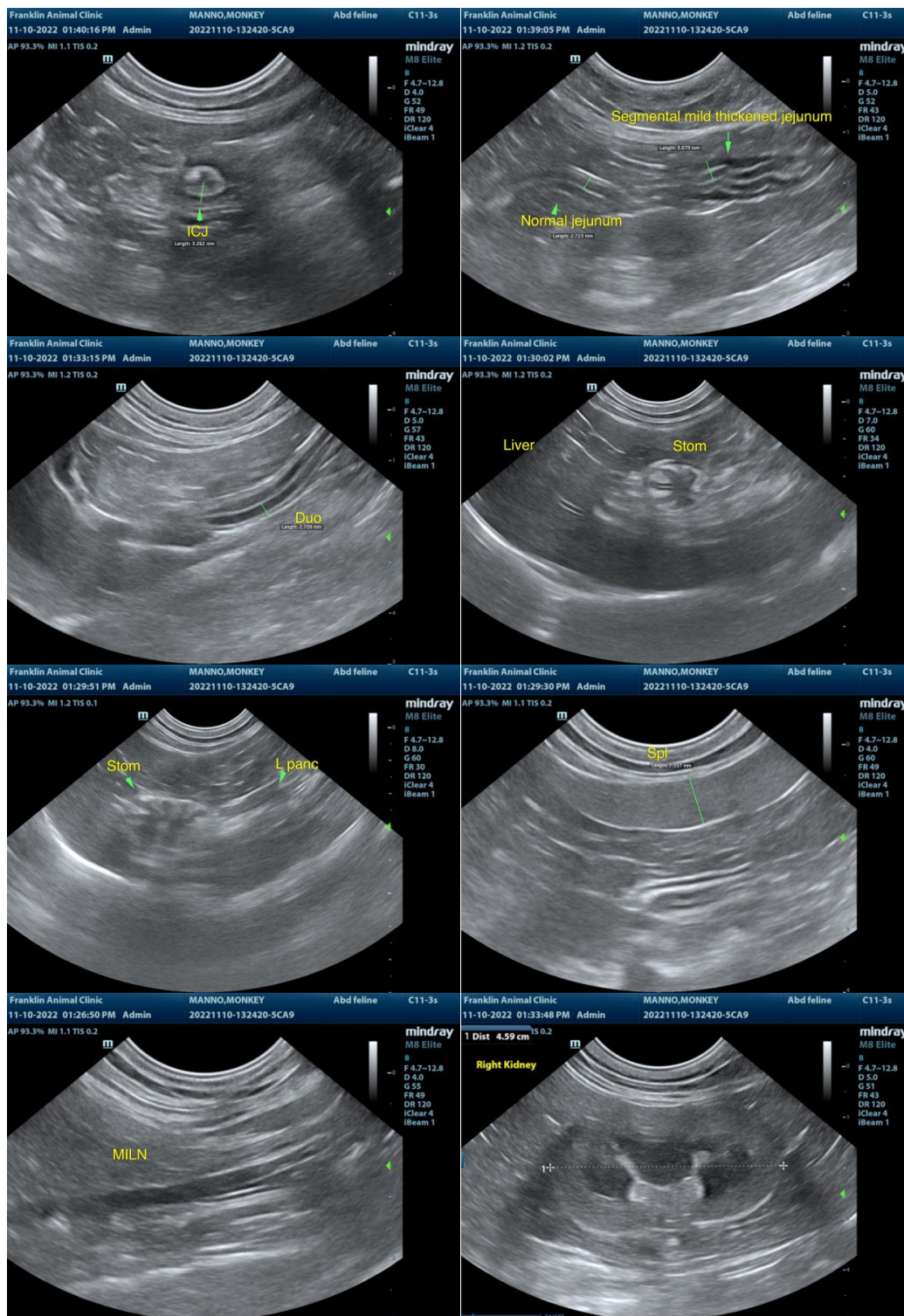
Dr. Sam Doverspike

INVOICE

15463

DATE

11/10/22





PATIENT

Monkey Manno

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

8 years

WEIGHT

15 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Sam Doverspike

HOSPITAL NAME

Franklin Animal
Clinic Inc.

REFERRING VET

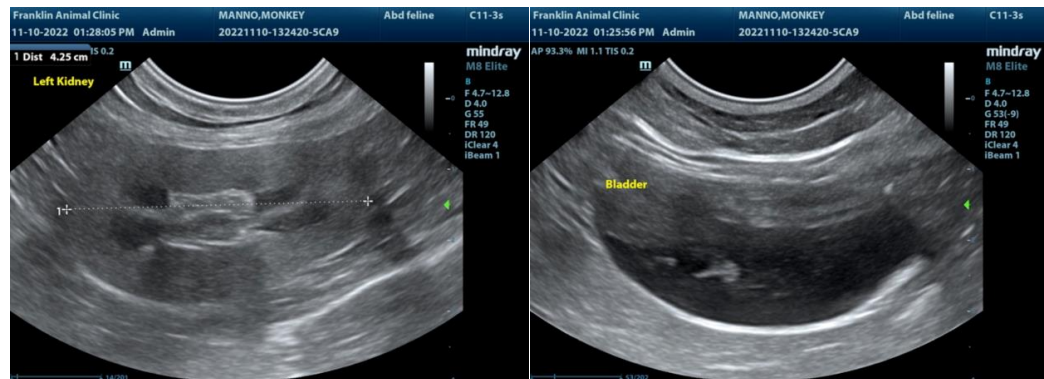
Dr. Sam Doverspike

INVOICE

15463

DATE

11/10/22



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