



**PATIENT PRESENTING CLINICAL SIGNS**

Finister Rex History: Lethargy, PU/PD, decreased appetite, intermittent vomiting, 2.3# weight loss 3/6 murmur  
Medication: Aventi, Clavamox, Cerenia

**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.

Domestic Shorthair

**SEX** Aortic trifurcation was normal.

Neutered Male Both kidneys were within normal limits for renal size for felines. The left kidney measured 4.3 cm in length. The right kidney measured 4.4 cm in length. Both kidneys exhibited mild asymmetrical renal margination, subjective mild generalized cortical hypertrophy with non-uniform cortex echotexture, mild loss of corticomedullary border demarcation with subtle evidence of reduced medullary volume and without evidence of pyelectasia. No overt evidence of retroperitoneal inflammation or effusion associated with either the left or right kidney. No overt evidence of neoplastic or granulomatous (FIP) criteria.

**AGE** 7 years

**WEIGHT** 8 Pounds

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.35 cm. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.39 cm.

**INTERPRETED BY**

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

**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 0.63 cm width.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Stanglein VC

**Liver**

The liver presented normal in size. The hepatic parenchyma revealed mild diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Increased portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. Mild echogenic to congealed yet non-organized gallbladder debris was noted. The gallbladder was otherwise normal without evidence of inflammatory criteria or peripheral inflammation. The cystic and common bile ducts were normal.

**REFERRING VET**

Dr. Rothrock

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**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 measured 0.25 cm.

**DATE**

11.15.2021



**PATIENT**

Finister Rex

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. The jejunum wall measured 0.21 cm.

**SPECIES**

Feline

Normal visible colon wall layers were present with apparent formed feces in lumen. The ileocolic wall measured 0.30 cm.

***Pancreas***

**BREED**

Domestic Shorthair

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.

***Free Abdomen***

**SEX**

Neutered Male

No overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

7 years

- Bilateral nephropathy
- Subjective mild hypoechoic liver- non-specific
- Mild gallbladder debris
- Sonographically unremarkable gastrointestinal tract

**WEIGHT**

8 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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DVM, DABVP  
(Canine and Feline)

The appearance of the bilateral kidneys is suggestive of chronic nephropathy as opposed to acute kidney injury or insult. However, potential for acute insult on top of chronic renal changes cannot be definitively excluded. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Assessment for potential toxin exposure with consideration for potential infectious disease (leptospirosis) could also be considered.

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Given the anemia, without overt evidence of additional visceral pathology, chronic nephropathy and chronic renal failure are considered most likely. Screening blood pressure and therapy for chronic renal failure would be appropriate. GI panel, to include PLI, TLI, cobalamin and folate may be considered to assess for or rule out concurrent underlying pancreatic or intestinal disease. Continued (as needed) gastrointestinal support indicated.

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**PATIENT**

Finister Rex

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Neutered Male

**AGE**

7 years

**WEIGHT**

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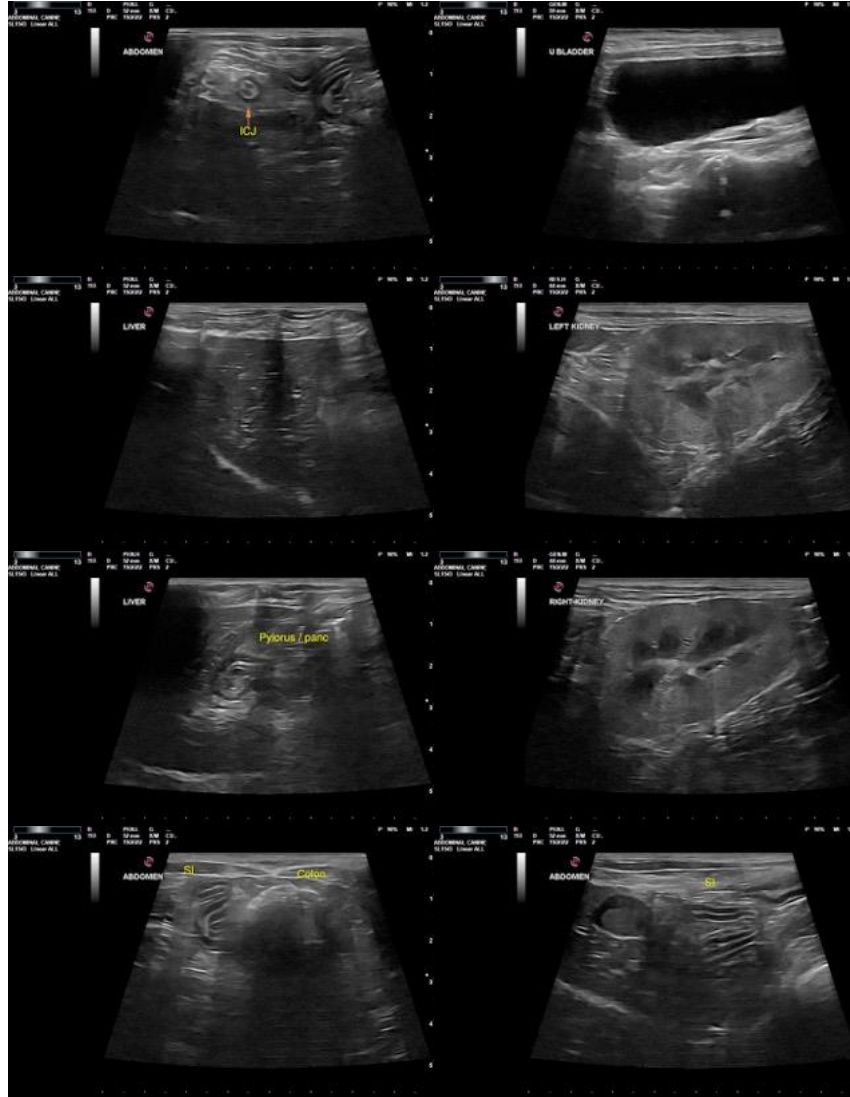
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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