



**PATIENT PRESENTING CLINICAL SIGNS**

Shauncy Rastgar

History: general exam normal, some discomfort on abdominal palpation vomiting after eating off and on since January, diet change decreased incidence to 2-3 x weekly but still vomiting

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: 2/11/2021 chol 213

**BREED**

DSH

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SEX**

Spayed Female

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Minor hyperechoic sand to mild mineral was present. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**AGE**

2 Years

Aortic trifurcation was normal.

**WEIGHT**

11.9 lbs

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. A hyperechoic corticomedullary band, consistent with a medullary rim sign, was present. This is a nonspecific finding seen in both normal and abnormal kidneys. It may be associated interstitial renal disease, hypercalcemia, tubular necrosis, lymphoma, and FIP. However, it is a nonspecific finding. The left kidney measured 3.7 cm in length. The right kidney measured 4.0 cm in length.

**INTERPRETED BY**

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

**Adrenal Glands**

The left adrenal gland was indistinctly visualized with potential for mild subnormal size. The left adrenal gland measured 0.20 cm. This is a non-specific finding and may be a patient variant.

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 cm width.

**Spleen**

**HOSPITAL NAME**

Pawsitive WVC

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 0.8 cm width.

**REFERRING VET**

Dr. Poquette

**Liver**

**INVOICE**

12558

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 with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**DATE**

11/15/21

**Gastrointestinal**



**PATIENT**

Shauncy Rastgar

The stomach presented mildly prominent gastric walls owing to mild subjective prominent gastric mucosa. Intact wall layering was maintained and distinct. The gastric body wall measured 0.35 cm width. Minor retained anechoic fluid was present in the stomach without evidence of retained ingesta or foreign material.

**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. The duodenum wall measured 0.27cm. The jejunum wall measured 0.21 cm.

**BREED**

DSH

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

**SEX**

Spayeds Female

***Pancreas***

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.

**AGE**

2 Years

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**WEIGHT**

11.9 lbs

**ULTRASONOGRAPHIC FINDINGS**

- Mild urinary bladder sand/mineral
- Bilateral non-specific renal medullary rim sign. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.
- Suspect mild gastritis
- Sonographically unremarkable small bowel and pancreas

**INTERPRETED BY**

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(Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

Potential for structurally insignificant inflammatory bowel. Dietary intolerance/food hypersensitivity or parasitism (if the patient is indoor/outdoor) could be considered. Gastric protectant protocol as well as continued dietary therapy with potential for diet rotation (i.e., limited antigen, hydrolyzed or bland diet) may prove beneficial. Likewise, potential for low-grade to chronic pancreatitis may be present, yet ultrasonographically normal. Further assessment may include spec FPL or GI panel to include PLI, TLI cobalamin and folate. Three- view chest radiographs are suggested to rule out occult thoracic or esophageal pathology (if not done).

**HOSPITAL NAME**

Pawsitive WVC

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**AGE**

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**HOSPITAL NAME**

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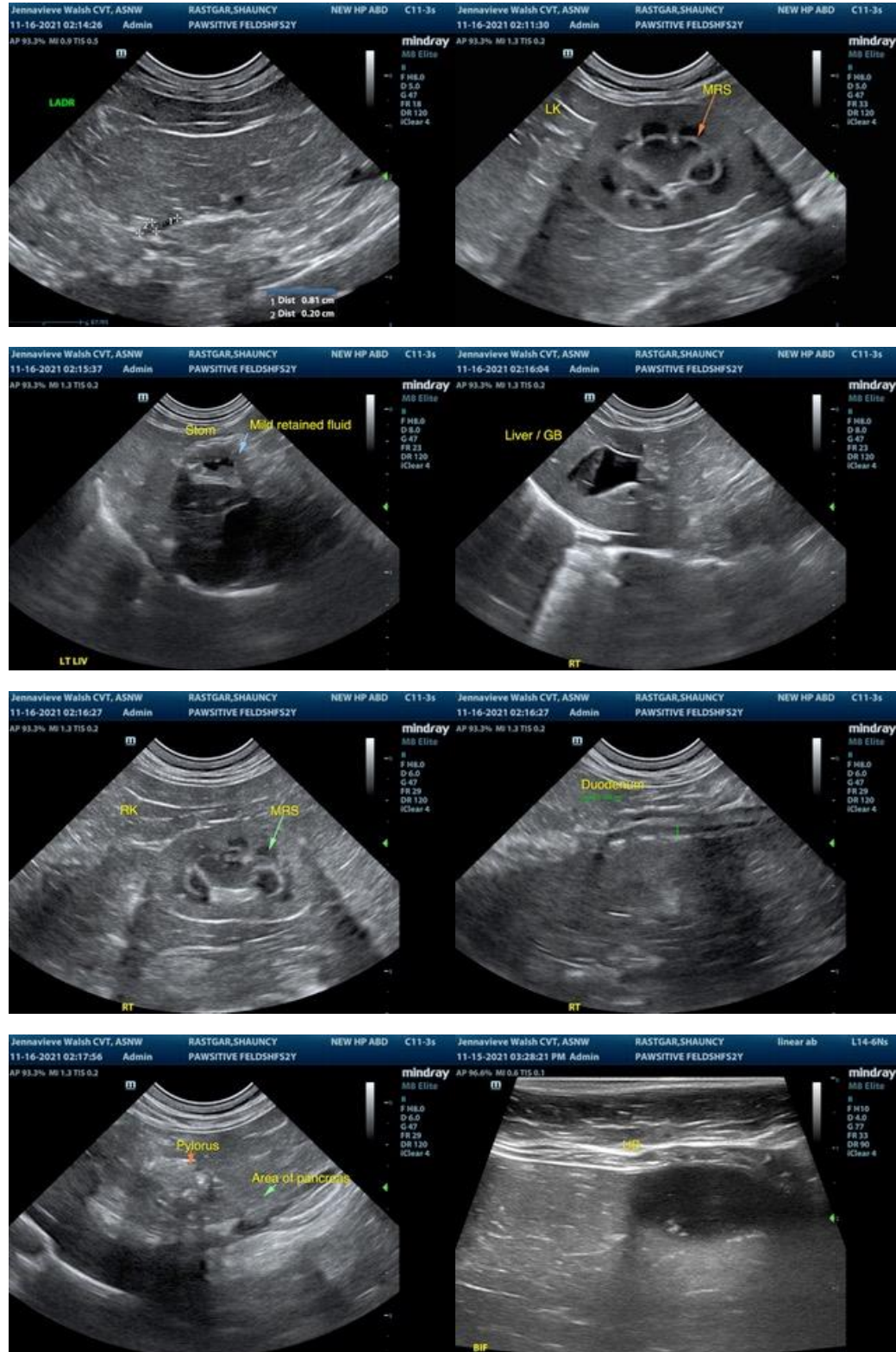
Dr. Poquette

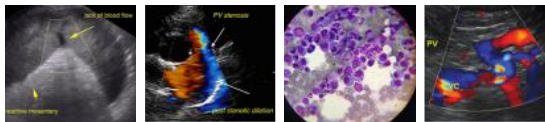
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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