



PATIENT	PRESENTING CLINICAL SIGNS
Cody Gaul	Abdominal pain Current meds: convenia, viralys Abnormal PE/Chem/CBC/UA Results: WBC 20.8 with left shift, Renal tech (+) Urine SG 1.041
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.
DSH	
SEX	The area of the aortic trifurcation was free of pathology.
Neutered Male	The kidneys were normal in size and margination. Both kidneys exhibited mild cortical hypertrophy with subjective subtle increased cortex echogenicity and mild loss of corticomedullary border demarcation. No evidence of pyelectasia or retroperitoneal inflammation. The left kidney measured 4.3 cm. The right kidney measured 4.3 cm.
AGE	Adrenal Glands
3 Years	The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.38 cm in width. The left adrenal gland measured 0.43 cm in width.
WEIGHT	Spleen
10 Pounds	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The spleen measured 0.8 cm in width. 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.
INTERPRETED BY	Liver
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Gastrointestinal
Jessica Miller	The stomach presented intact wall layering with a normal wall layer ratio. Minor retained pyloric echogenic fluid and chyme noted. Gastric body wall measured 0.26 cm.
HOSPITAL NAME	REFERRING VET
ACC Landing	Dr. Villari
INVOICE	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. Jejunum wall measured 0.24 cm. Ileocolic wall measured 0.30 cm.
29821	Pancreas
DATE	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.
11/16/21	



PATIENT

Free Abdomen

Cody Gaul

No omental masses, lymphadenopathy or peritoneal effusion.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

- Bilateral non-specific mild renal cortical hypertrophy with mild loss of corticomedullary order differentiation
- Mild retained pyloric fluid/chyme

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no overt evidence of significant visceral pathology as an obvious cause of abdominal pain or elevated white blood cell count. The presentation of the bilateral kidneys is non-specific and may indicate patient variant, although potential for possible non-specific nephritis such as interstitial nephritis or other cannot be excluded. Baseline urine protein/creatinine ratio could be considered with continued monitoring of renal parameters.

SEX

Neutered Male

The mild retained pyloric fluid/chyme likewise is non-specific without evidence of gastric or gastrointestinal mural pathology. Potential for mild gastric stasis or hypomotility may be possible if concurrent inappetence or potential vomiting has been noted. Possibility of low-grade to chronic pancreatitis may be present, yet ultrasonographically normal. Correlation with spec fPL could be considered.

AGE

3 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

ACC Landing

REFERRING VET

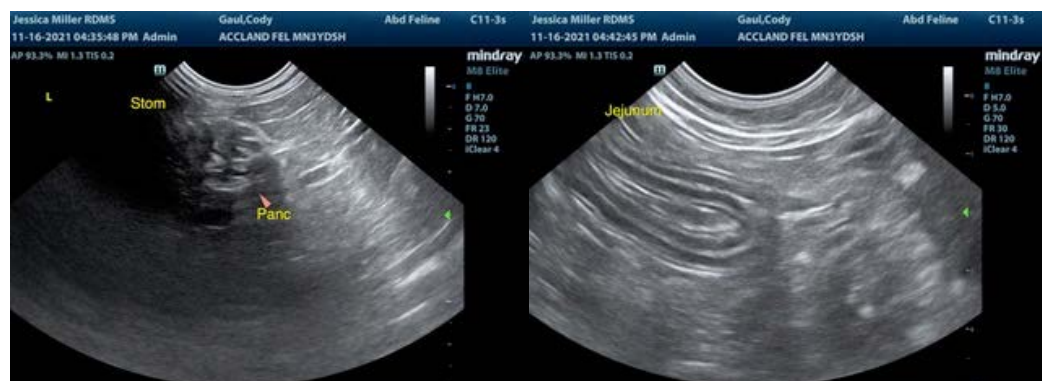
Dr. Villari

INVOICE

29821

DATE

11/16/21





PATIENT

Cody Gaul

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

3 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

ACC Landing

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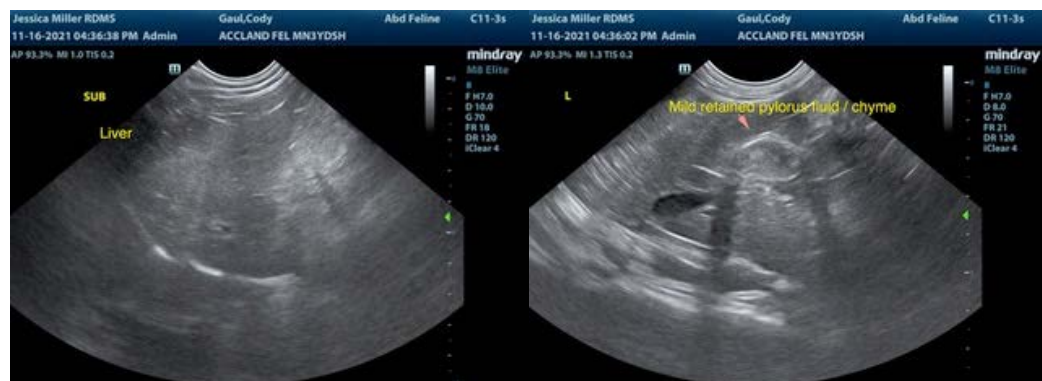
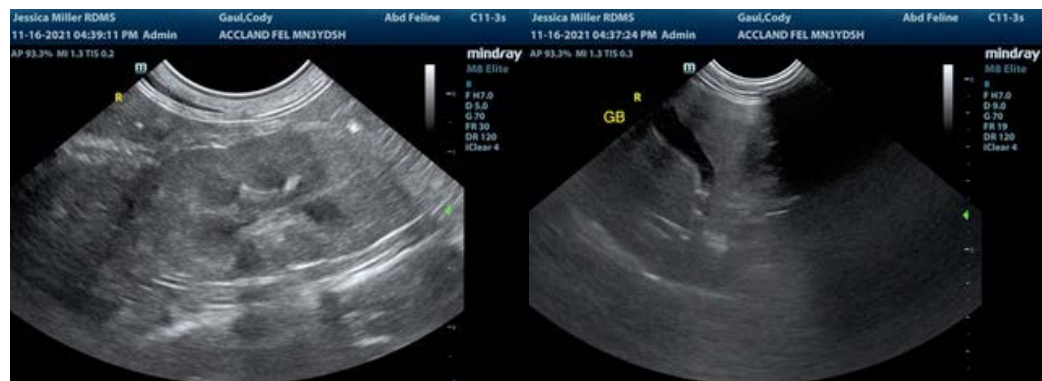
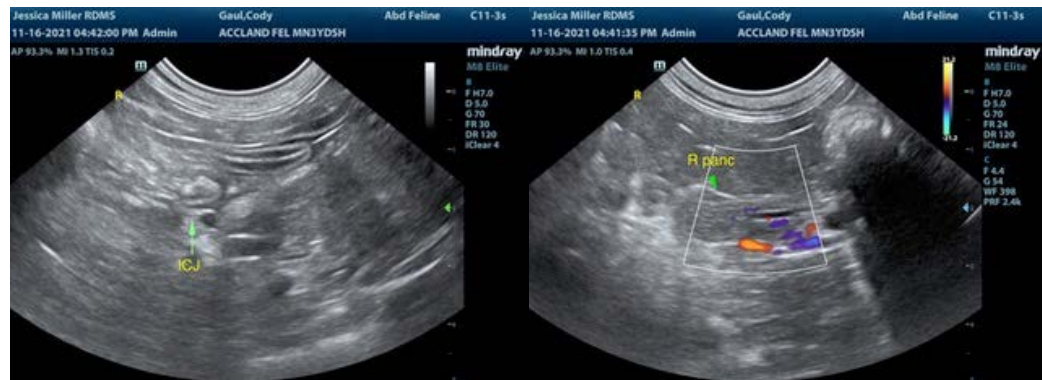
Dr. Villari

INVOICE

29821

DATE

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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)
info@SonoPath.com