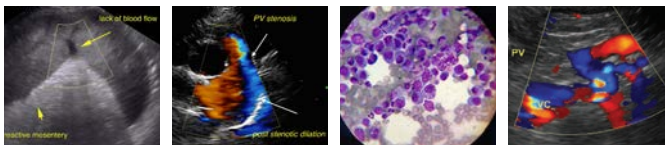
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Zizi Scheppmann-Loud

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

1 Year

WEIGHT

4.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency Care

REFERRING VET

Dr. Bailey

INVOICE

42875

DATE

11/19/22

PRESENTING CLINICAL SIGNS

Young otherwise healthy cat with no known health history, acutely started vomiting yesterday, vomited up some foam and little bits of paper.

Abnormal PE/Chem/CBC/UA Results: No Labwork yet Radiographs suspicious for "bunching in SI"; his spleen is definitely curved around strangely so it looks odd on rads and ultrasound;

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. Mild to moderate non-dependent particulate sediment was present, which may indicate cellular debris/protein, crystalline debris, lipid, or mucus. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

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 3.9 cm. The right kidney measured 4.2 cm.

Adrenal Glands

The left adrenal gland is visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.29 cm.

No overt pathology in the area of the right adrenal gland.

Spleen

The spleen was enlarged in sized with maintained symmetrical capsule contour and finely textured homogeneous parenchyma. No splenic masses or nodules. The spleen measured 1.6 cm in width at the level of the hilus.

Liver

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.

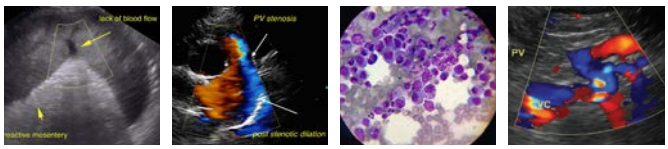
Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. Mild to moderate retained, primarily anechoic pyloric fluid present and minor non-shadowing pyloric chyme. No evidence of mechanical pyloric outflow obstruction or obstructive pyloric mural pathology.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. A focal shadowing density was present within the intestinal lumen, which did not appear to be obstructive, and without evidence of segmental or generalized intestinal obstructive pattern. The density measured approximately 2.0 cm in diameter.

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

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Zizi Scheppmann-Loud

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

1 Year

WEIGHT

4.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency Care

REFERRING VET

Dr. Bailey

INVOICE

42875

DATE

11/19/22

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.

PRIMARY FINDINGS

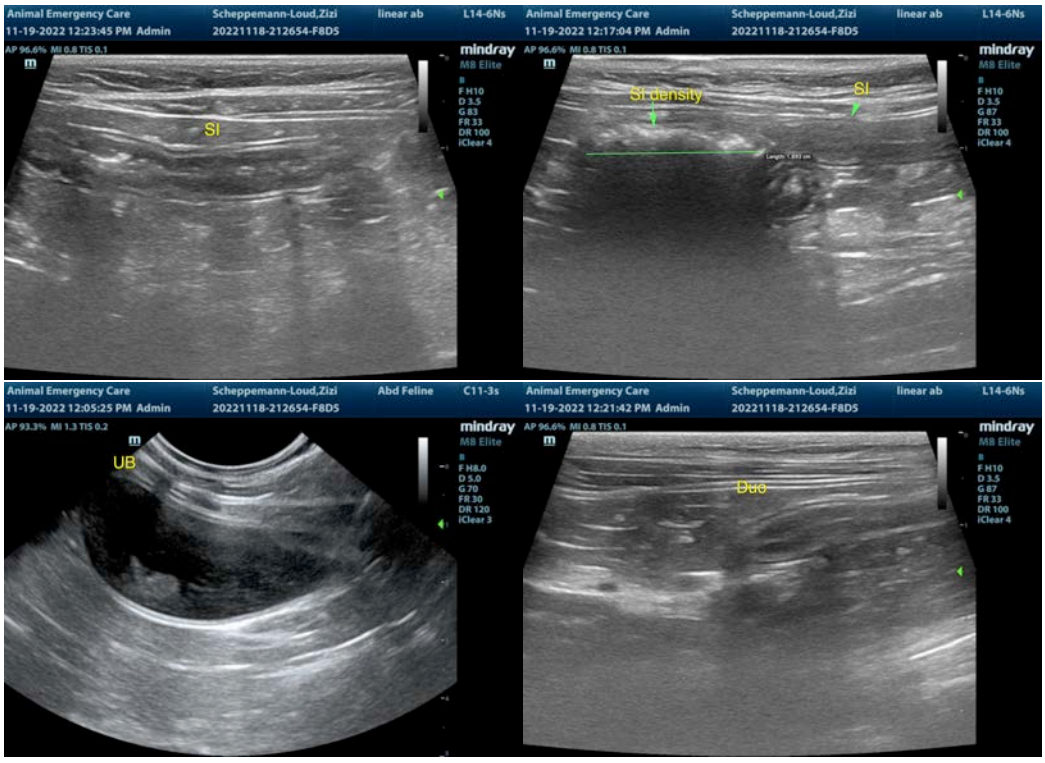
- Mild / moderate splenomegaly - subjective benign, hyperplasia, hematopoiesis, incidental splenitis likely, infiltrative round cell neoplasia less likely
- Mild retained gastric fluid - consistent with mild nonobstructive / metabolic gastric stasis
- Focal shadowing SI echo - non obstructive

ULTRASONOGRAPHIC FINDINGS

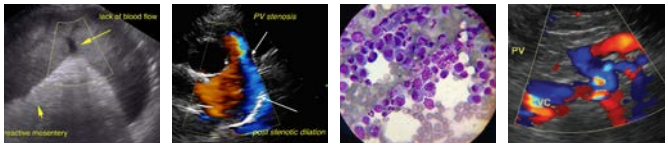
- Urinary bladder sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The shadowing SI echo is suggestive of focal nonobstructive, possibly passing foreign material considering patient history. Recommend 24–48-hour hospitalization with IV fluids, GI support and sonographic monitoring of the SI echo without evidence of obstructive pattern. Screening splenic FNA could be considered, assuming normal clotting status and using 25 ga needle if persistent splenomegaly or evidence of weight loss. Urine culture and sensitivity suggested if evidence of inflammatory urinary bladder sediment.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Zizi Scheppmann-Loud

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

1 Year

WEIGHT

4.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency Care

REFERRING VET

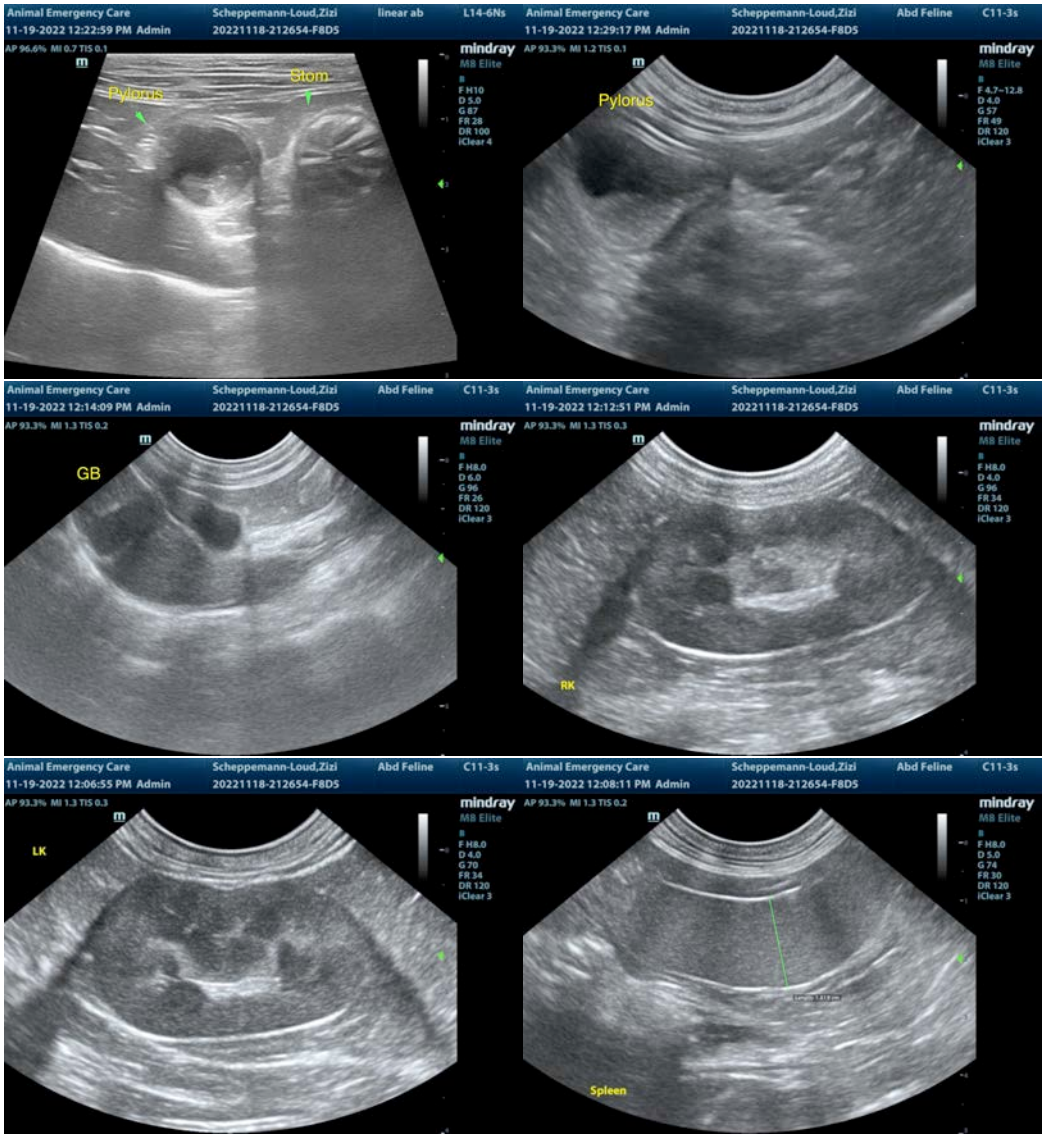
Dr. Bailey

INVOICE

42875

DATE

11/19/22



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