



PATIENT

Leo Nadal

PRESENTING CLINICAL SIGNS

Dx w/ DM 6/22. Poor regulation. Wt loss. O conc. distended abdomen.

Current meds: P21 insulin 7u

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: 1/26: gluc 438 UA: 3+ protein, 3+ glucose SG: 1.047

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DSH

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

SEX

MN

Mildly enlarged size and symmetrical margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.3 cm in length. The right kidney measured 5.3 cm in length

AGE

10yr

The area of the aortic trifurcation was free of pathology.

WEIGHT

12.8lb

Adrenal Glands

The left adrenal gland exhibited mild enlargement with normal contour. The right adrenal gland exhibited normal size and contour. Pinpoint areas of mineralization were present without capsular distortion or overt tumors. This is an age-related finding and not pathological. The left adrenal gland measured 0.74 width and the right adrenal gland measured 0.46 width

INTERPRETED BY

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

Spleen

The spleen exhibited borderline to mildly enlarged size with a finely textured and homogenous parenchyma with minor decreased parenchymal echogenicity. The capsule was smooth and regular without apparent expansion.

IMAGING PERFORMED BY

Jessica Miller

Liver

The liver presented mild to moderately increased in size. The parenchyma of the liver was subjectively increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

HOSPITAL NAME

Basking Ridge AH

REFERRING VET

Dr. Blachzk

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.

INVOICE

12302ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Segmental mildly thickened intestinal walls with mildly prominent muscularis layer primarily in the mid to caudal abdominal intestinal segments were present to the level of the ileocolic junction. The ileocolic junction exhibited intact mildly prominent wall layering. The small intestinal wall measured up to 0.34 cm in width. The ileocolic wall measured 0.48 cm in width.

DATE

11/28/2022



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

Leo Nadal **Pancreas**

SPECIES The pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.

Feline

Free Abdomen

BREED An ill-defined mildly expansive infiltrative mesenteric mass in the mid to caudal abdomen adjacent to regional intestinal segments and within the area of the ileocolic junction was present measuring ~ 4-5 cm in diameter. Associated regional non-uniform hyperechoic to nodular mesentery was noted. Intermittent pockets of scant peritoneal free fluid were present.

DSH

SEX

ULTRASONOGRAPHIC FINDINGS

MN

- Bilateral mild renomegaly with intact to mildly indistinct corticomedullary architecture
- Borderline to mild splenomegaly
- Hepatomegaly with mild parenchyma hyperechogenicity
- Segmentally thickened small bowel
- Pancreatitis
- Ill-defined mid to caudal abdominal infiltrative mesenteric mass with associated regional non-uniform to nodular mesentery, scant peritoneal free fluid
- Left adenomegaly

AGE

10yr

WEIGHT

12.8lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Primary concern for neoplastic process associated with the infiltrative mesenteric mass with potential for regional omental seeding is warranted. Inflammatory, granulomatous or necrotic is possible. Small intestinal origin of the mass may be possible with potential for multicentric neoplastic criteria involving the segmental intestinal tract and potentially the spleen and liver. Correlation with pending cytology is recommended. Aside from the concern for neoplasia, potential multifactorial contributing factors to the diabetic dysregulation in this patient are possible. This is a suggestive checkoff list when faced with an unregulated diabetic patient:

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PATIENT

- Diffuse liver disease

Leo Nadal

SPECIES

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BREED

DSH

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MN

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HOSPITAL NAME

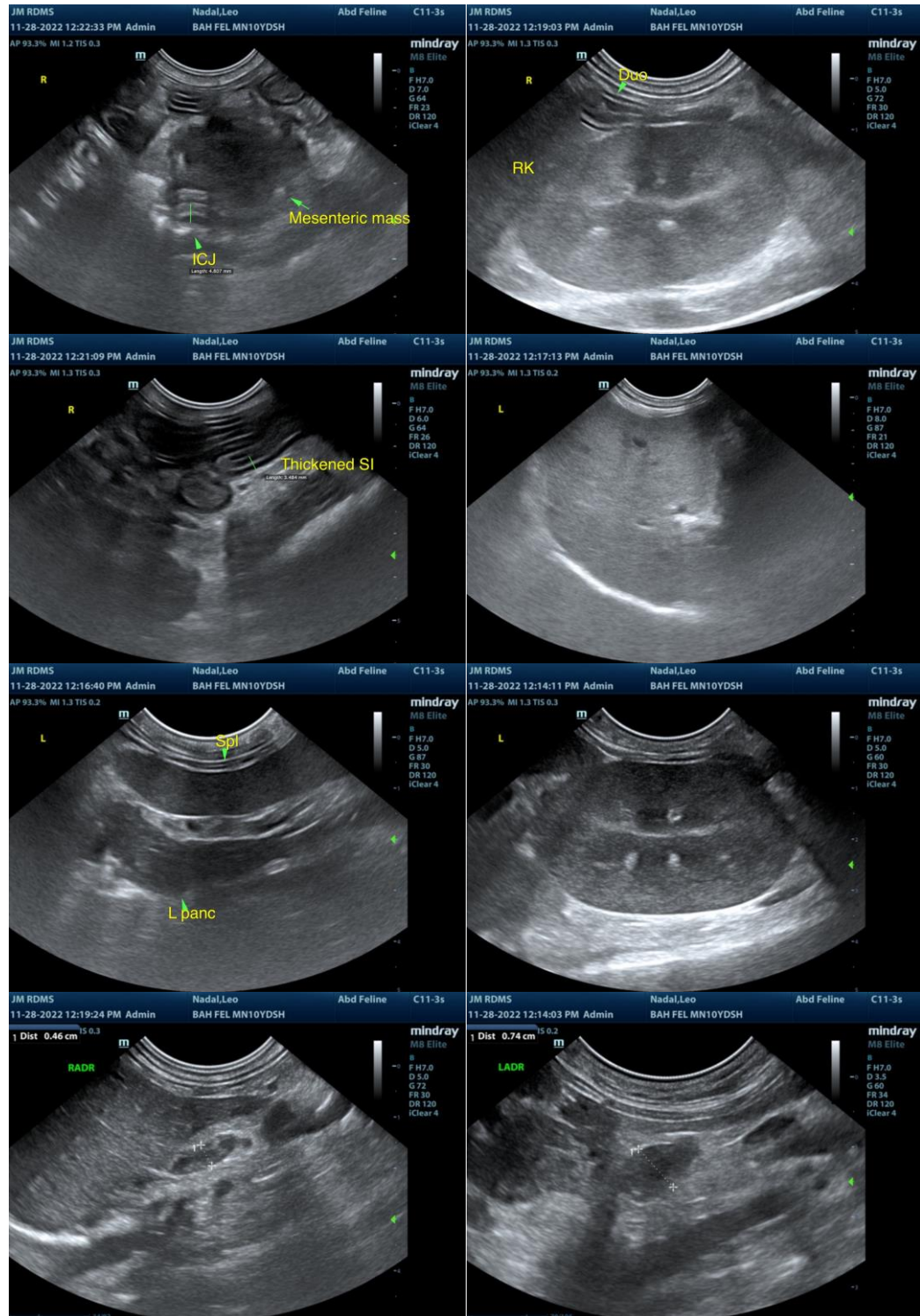
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



PATIENT

visible in the image/video clips provided.

Leo Nadal

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.

SPECIES

Feline

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AGE

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