



PATIENT	PRESENTING CLINICAL SIGNS
Mommy Cat Mowat	losing weight, not eating very much, Abnormal PE/Chem/CBC/UA Results: T4 29.9, BUN 6.1, Creatinine 110, Potassium 5.5, Na/K ratio 28, Albumin 18, HCT 0.28, WBC 20.5 with neutrophilia and monocytosis
SPECIES	
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
	Urinary System
DSh	The urinary bladder, trigone, and cystourethral junction 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 was noted.
SEX	
FS	The area of the aortic trifurcation was free of pathology.
AGE	
15 years	Normal size and 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. Areas of nonobstructive medullary mineralization were present in the left kidney and potentially in the right kidney. No evidence of pelvic dilation was present. The left kidney measured 3.5 cm in length. The right kidney measured 3.6 cm in length.
WEIGHT	
3 kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP	The left adrenal gland was indistinctly visualized yet without overt pathology, measuring 0.27 cm in width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.36 cm width.
IMAGING PERFORMED BY	Spleen
Kelly Reshny, RVT	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.
HOSPITAL NAME	Liver/ Gallbladder
Chippawa AH	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. A moderately sized, thinly walled intraparenchymal cyst was noted in the deep mid to right liver adjacent to the gallbladder. The cyst measured 3.1 cm in diameter and contained anechoic fluid. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Dowell	
INVOICE	
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DATE	
11/29/21	



PATIENT	<i>Gastrointestinal</i>
Mommy Cat Mowat	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 width measured 0.25 cm.
SPECIES	
Feline	A large to moderately expansive intestinal mural mass exhibiting variable yet marked mural hypertrophy, decreased mural echogenicity, and loss of distinct wall layering was present in the mid abdomen and directly adjacent to the ileocolic junction. The intestinal mural mass measured approximately 5.3 cm x 3.8 cm. The intestinal mural mass did not appear to overtly involve the ileocolic junction as discernable ileocolic wall layering was visualized. Potential distal jejunal or ileal location of the mass is suspected, although not definitive. The rest of the visualized small intestine was sonographically unremarkable.
BREED	
DSh	
SEX	
FS	Normal visible colon wall layers were present with apparent formed feces in lumen.
AGE	
15 years	<i>Pancreas</i> 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 were evident.
WEIGHT	
3 kg	<i>Free Abdomen</i> Associated peri intestinal reactive mesentery and suspect mild lymphadenopathy was present. No evidence of peritoneal free fluid was noted.
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP	<i>Primary Findings</i> <ul style="list-style-type: none"> • Intestinal mural mass mid abdomen and adjacent to the ileocolic junction • Associated peri intestinal reactive mesentery and suspect mild mesenteric lymphadenopathy • Mild chronic renal changes with nonobstructive medullary mineral • Hepatic cyst
IMAGING PERFORMED BY	
Kelly Reshny, RVT	
HOSPITAL NAME	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
Chippawa AH	Although sampling is required for further clarification, intestinal mural mass is suggestive of probable aggressive or high-grade neoplasia such as high-grade lymphoma vs. other neoplasia. Potential for severe inflammation or granulomatous disease (Dry FIP) is possible yet considered less likely.
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Dr. Dowell	Assuming normal clotting status, ultrasound-guided FNA of the intestinal mass could be considered for cytology and potential oncology consultation. Three view chest radiographs and as-needed gastrointestinal support are recommended.
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PATIENT

Mommy Cat Mowat

SPECIES

Feline

BREED

DSh

SEX

FS

AGE

15 years

WEIGHT

3 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Kelly Reshny, RVT

HOSPITAL NAME

Chippawa AH

REFERRING VET

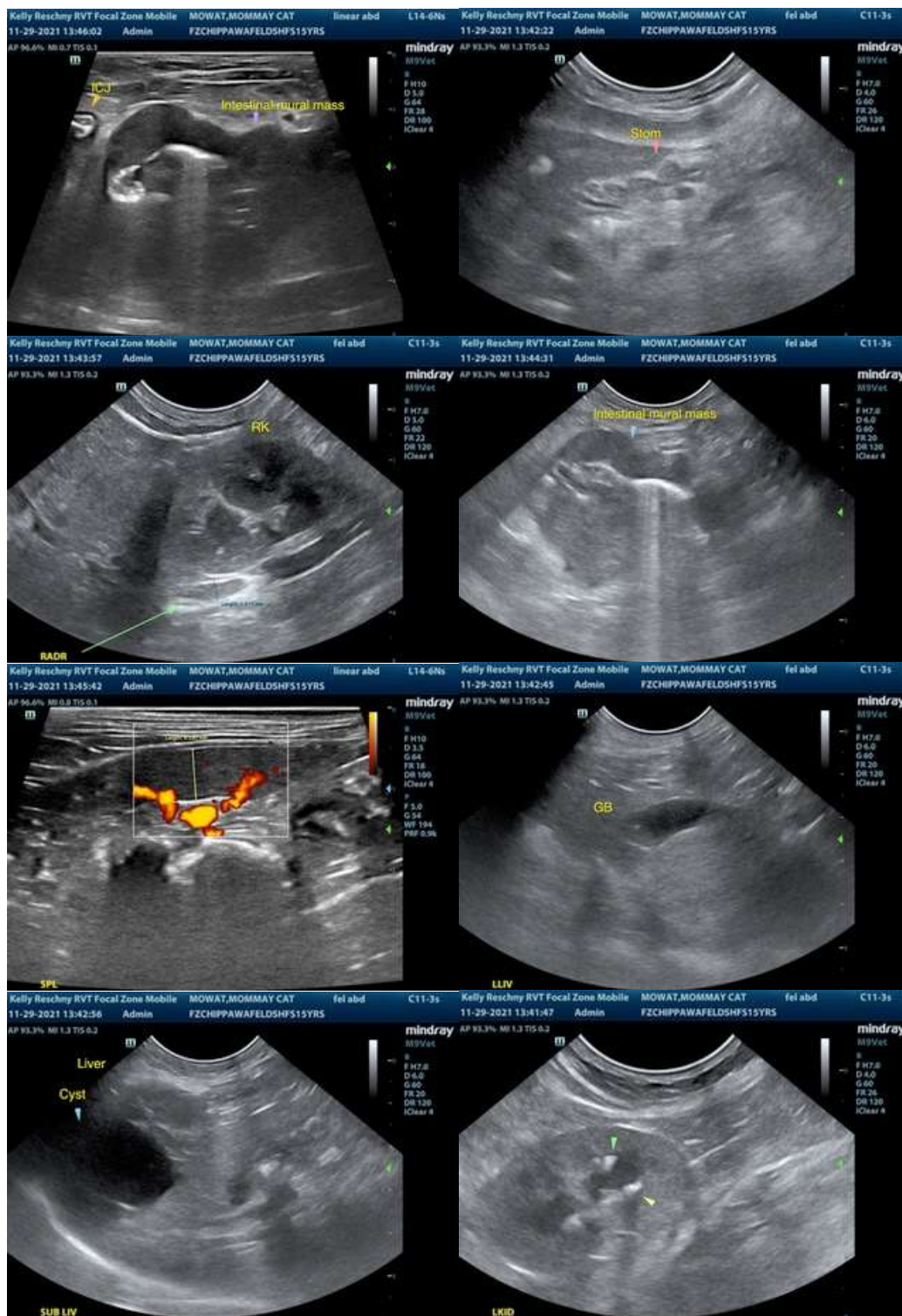
Dr. Dowell

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PATIENT

Mommy Cat Mowat

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.

SPECIES

Feline

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.

BREED

DSh

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

FS

AGE

15 years

WEIGHT

3 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Kelly Reshny, RVT

HOSPITAL NAME

Chippawa AH

REFERRING VET

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