



<b>PATIENT</b> Freyja Bedford- Peterson	<b>PRESENTING CLINICAL SIGNS</b> Weight loss, decreased appetite Abnormal PE/Chem/CBC/UA Results: Mild renal changes
<b>SPECIES</b>  Feline	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>  DSH	<b>Urinary System</b> 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 was noted.
<b>SEX</b>  FS	The area of the aortic trifurcation was free of pathology.
<b>AGE</b>  12 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. No evidence of pelvic dilation was present. The left kidney measured 3.2 cm in length. The right kidney measured 3.6 cm in length.
<b>WEIGHT</b>  11.66 lbs.	
<b>INTERPRETED BY</b>  R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<b>Adrenal Glands</b> The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.48 cm width.
<b>IMAGING PERFORMED BY</b>  Jenna Walsh, CVT	<b>Spleen</b> 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 0.83 cm width.
<b>HOSPITAL NAME</b> Bush Animal Hospital	<b>Liver/ Gallbladder</b> 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.
<b>REFERRING VET</b>  Dr. Blystone	<b>Gastrointestinal</b> 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 0.26 cm.
<b>INVOICE</b>  12549	
<b>DATE</b>  11/8/21	



**PATIENT**  
Freyja Bedford-Peterson

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 width measured 0.23 cm. The jejunum wall width measured 0.22 cm. The ileum wall width measured 0.32 cm.

**SPECIES**

Feline

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

**BREED**

DSH

**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 were evident.

**SEX**

FS

**Free Abdomen**

No omental masses, lymphadenopathy or peritoneal effusion were present.

**AGE**

12 years

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

**WEIGHT**

11.66 lbs.

- Mild chronic renal changes
- Sonographically unremarkable gastrointestinal tract

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overall, normal to mild geriatric abdomen without evidence of significant visceral, specifically gastrointestinal or pancreatic, pathology. Structurally insignificant inflammatory bowel is possible, while low-grade to chronic pancreatitis may be present yet ultrasonographically normal.

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or rule out occult disease which may cause weight loss. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. As-needed gastrointestinal support is recommended.

**HOSPITAL NAME**

Bush Animal  
Hospital

**REFERRING VET**

Dr. Blystone

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**PATIENT**  
Freyja Bedford-Peterson

**SPECIES**

Feline

**BREED**

DSH

**SEX**

FS

**AGE**

12 years

**WEIGHT**

11.66 lbs.

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**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Bush Animal  
Hospital

**REFERRING VET**

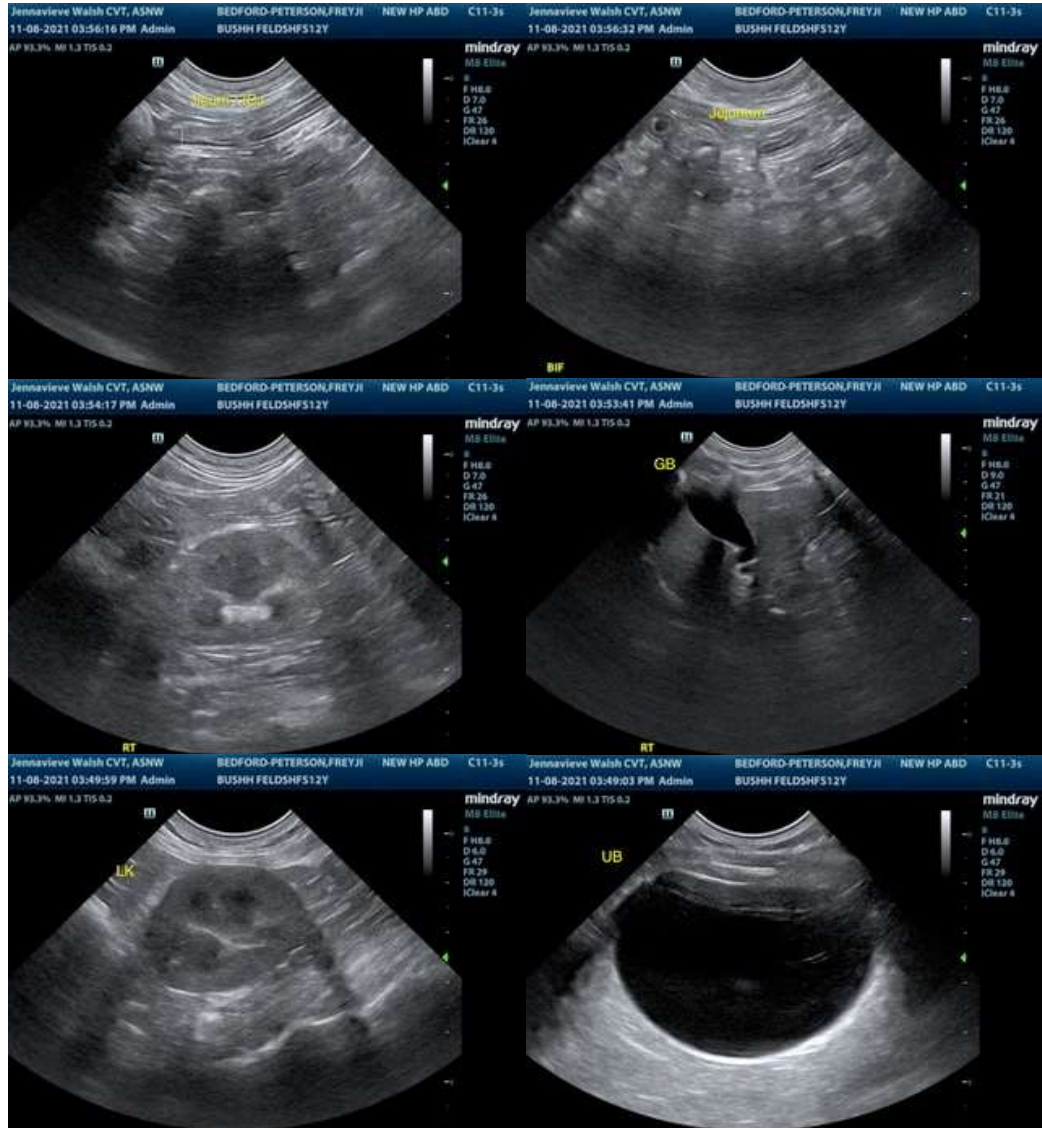
Dr. Blystone

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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 I can be of any further assistance please contact me.

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
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