

PATIENT	PRESENTING CLINICAL SIGNS
Tillebrook Auch	Acute onset of vomition and brought up part of a toy. History of indiscriminate eating. Body score 4/5
SPECIES	Abnormal PE/Chem/CBC/UA Results: Non diagnostic
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	<i>Urinary System</i>
DMH	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	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 4.2 cm in length. The right kidney measured 4.2 cm in length.
AGE	
3	The area of the aortic trifurcation was free of pathology.
WEIGHT	<i>Adrenal Glands</i>
6kg	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.37 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm width.
INTERPRETED BY	<i>Spleen</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen exhibited subtly prominent size secondary to sedation with 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.
IMAGING PERFORMED BY	<i>Liver</i>
Dr. Belan	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.
HOSPITAL NAME	<i>Gastrointestinal</i>
SAVE	The stomach presented intact subtle prominent wall layering noted in the area of the antrum and pylorus. The lumen of the stomach contained minor retained pyloric fluid with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.28 cm in width.
REFERRING VET	
Dr. Corbeil	
INVOICE	
12427ag	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 measured 0.23 cm width. The jejunum wall measured 0.22 cm width. The ileocolic wall measured 0.27 cm width.
DATE	
12/15/2022	Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Tillebrook Auch

The pancreas was normal in size with subtle capsule asymmetry and heterogeneous parenchyma compared to the adjacent omental fat. Subtle pancreatic duct dilation was present.

SPECIES

Free Abdomen

Feline

Solitary hyperechoic caudal abdominal omentum adjacent to the distal descending colon suggestive of focal steatitis or emerging benign nodular fat necrosis was present which is not considered pathology. This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.

BREED

DMH

Subtle evidence of mild reactive peripancreatic and perigastric mesentery was noted.

SEX

MN

Intermittent mildly prominent to enlarged gastric/pancreaticoduodenal and colic lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.

ULTRASONOGRAPHIC FINDINGS

AGE

3

- Mild gastritis pattern, sonographically unremarkable small bowel-no evidence of GI foreign material obstruction
- Heterogeneous pancreas-nonspecific possible benign remodeling or chronic pancreatitis
- Intermittent minor benign gastric/pancreaticoduodenal and colic lymphadenopathy
- Minor reactive perigastric/peripancreatic omentum

WEIGHT

6kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No indication for surgical intervention. Pancreatitis may be considered if evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with a spec fPL is recommended. As needed GI and supportive care with empirical therapy for low-grade pancreatitis and assessment of clinical response would be reasonable.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

SAVE

REFERRING VET

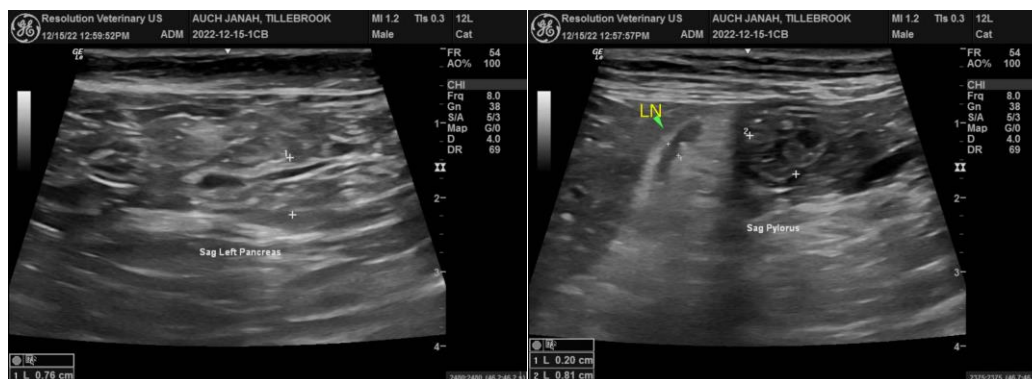
Dr. Corbeil

INVOICE

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DATE

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PATIENT

Tillebrook Auch

SPECIES

Feline

BREED

DMH

SEX

MN

AGE

3

WEIGHT

6kg

INTERPRETED BY

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IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

SAVE

REFERRING VET

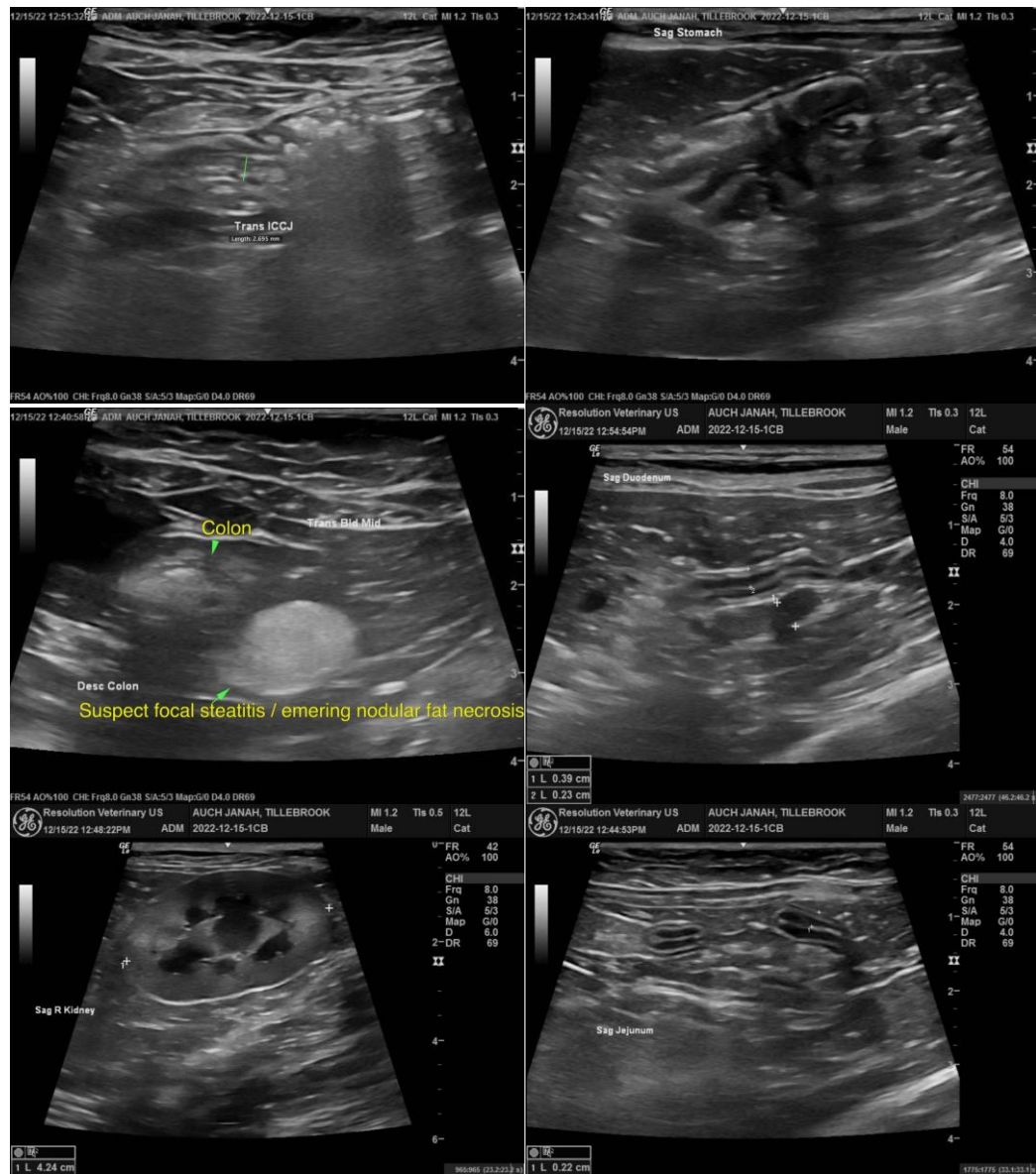
Dr. Corbeil

INVOICE

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DATE

12/15/2022



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.

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