

Portable Animal Vascular Sonography, Inc.

PATIENT PRESENTING CLINICAL SIGNS

Mr. Dude King No sedation. No meds. CKD IRIS stage 2 - probable, Wellness, Bradycardia, Chronic vomiting, Inappropriate defecation, Constipation, Weight loss. History - Patient vomiting with unknown frequency, seems to be drinking more water, unknown urination, defecating outside of LB, hard stool, eating generally well, indoor only. Static history. Owner notes weight loss. One of four cats, indoor only. Was not giving Miralax because all household cats eat same wet food. Diet: variety wet, urinary dry due to requirements of housemate cat.

SPECIES Feline

BREED Abnormal PE/Chem/CBC/UA Results: Chemistry profile - BUN 42 Creat 2.6 else unremarkable; CBC - Unremarkable; Thyroid hormones - T4 1.3

DSH ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX *Urinary System*

MN 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.

AGE 15yr

WEIGHT 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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Mild right kidney pyelectasia was present. The left kidney measured 3.3 cm in length. The right kidney measured 3.4 cm in length.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.33 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.51 cm width.

IMAGING BY

Loetitia Saint-Jacques, LVT

Spleen

HOSPITAL NAME

VCA Feline AH

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.

REFERRING VET

Dr. Fleming

Liver/Gallbladder

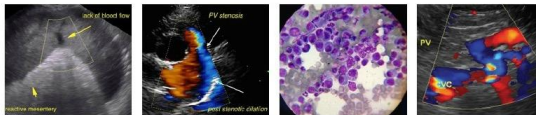
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The liver presented normal in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a

DATE

02/08/2023



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IMAGING PERFORMED BY
pawsonography@gmail.com 530-786-8340

PATIENT mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder appeared to be possibly divided into two separate compartments consistent with bilobed gallbladder which is a normal variant in a cat. The gallbladder was non-distended in size with primarily anechoic luminal content with minor echogenic debris. The cystic and common bile ducts were normal.

Mr. Dude King

SPECIES

Feline

Gastrointestinal

BREED

DSH

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 measured 0.25 cm in width.

SEX

MN

The small intestine presented intact wall layering with a primarily 1:3 muscularis/mucosa ratio. Segmental subtly prominent muscularis layer without evidence of mural hypertrophy, loss of wall layering, or intestinal masses was present. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The duodenum wall measured 0.27 cm width. The jejunum wall measured 0.27 cm width. The ileocolic wall measured 0.32 cm width.

AGE

15yr

Normal visible colon wall layers were present with segmental to diffuse distention with gas. Formed fecal matter was present in the ascending colon.

WEIGHT

8.5lb

Pancreas

INTERPRETED BY

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

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.

Free Abdomen

No omental masses or peritoneal effusion was present.

IMAGING BY

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LVT

Intermittent mildly prominent to enlarged mesenteric 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).

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ULTRASONOGRAPHIC FINDINGS

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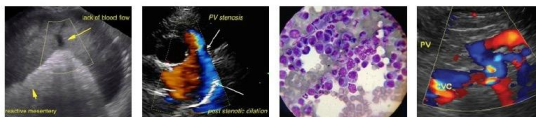
- Mild to moderate chronic renal changes with minor right kidney pyelectasia
- Chronic active pancreatitis pattern
- Possible chronic enteropathy
- Intermittent minor benign/reactive mesenteric lymph nodes
- Minor hepatic parenchymal remodeling, mild gallbladder debris

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PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Mr. Dude King A GI panel to include PLI/TLI/Cobalamin/Folate is recommended given the patient's weight loss for further assessment of potential chronic intestinal disease or pancreatitis. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology.

SPECIES

Feline

The right kidney pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein:creatinine ratio on sterile urine sample is recommended.

BREED

DSH

Triad disease could be a consideration with this patient if continued weight loss, evidence of previous or future hepatic enzyme elevation is present given short half-life of hepatic enzymes in cats.

SEX

MN

AGE

15yr

WEIGHT

8.5lb

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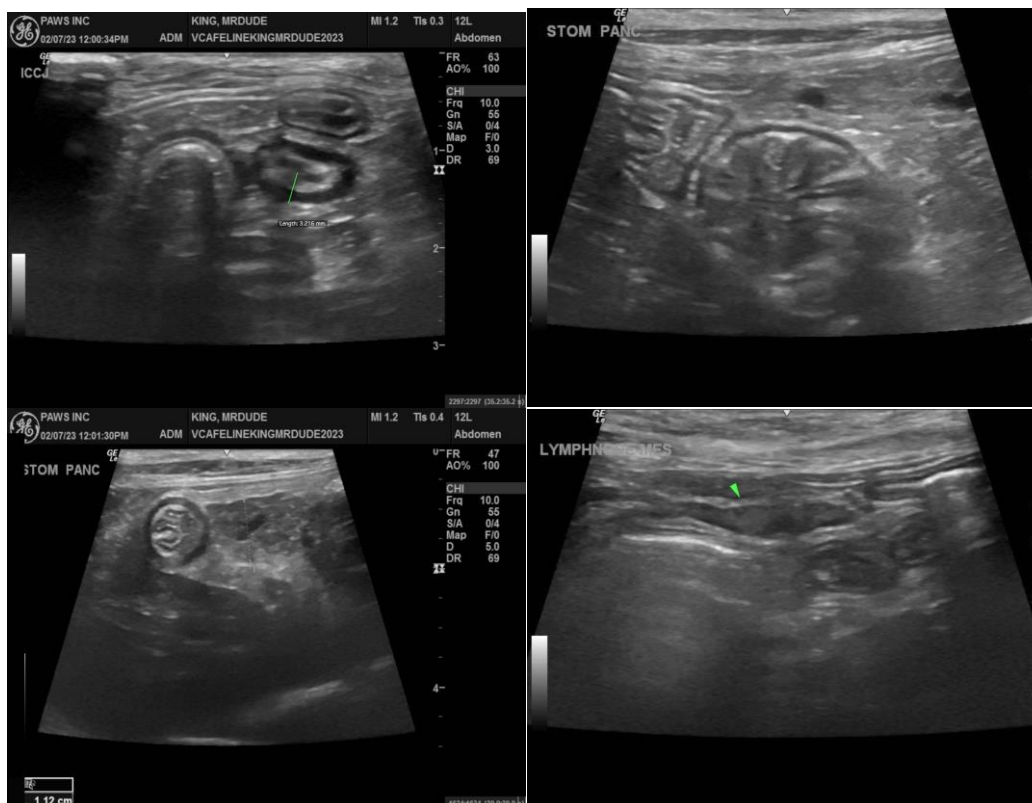
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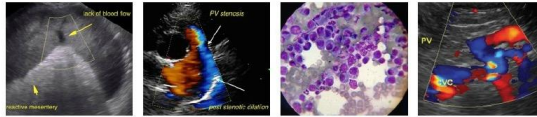
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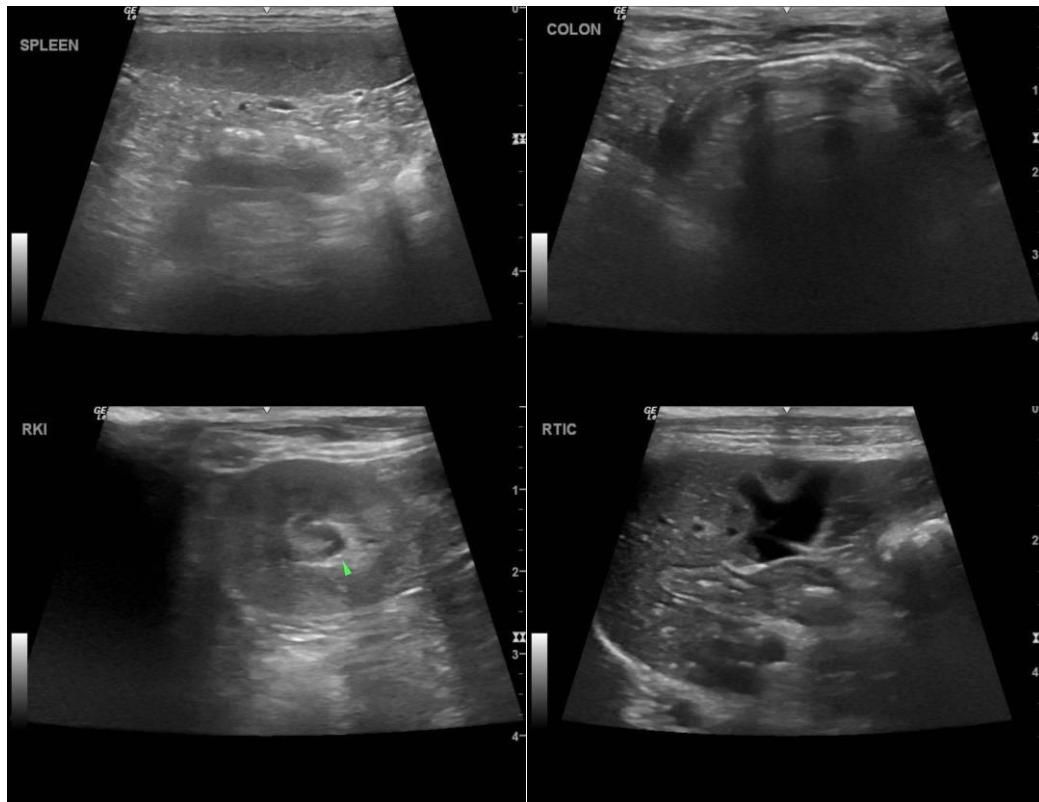
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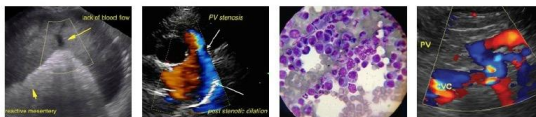
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SPECIES

Feline

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DSH

SEX

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AGE

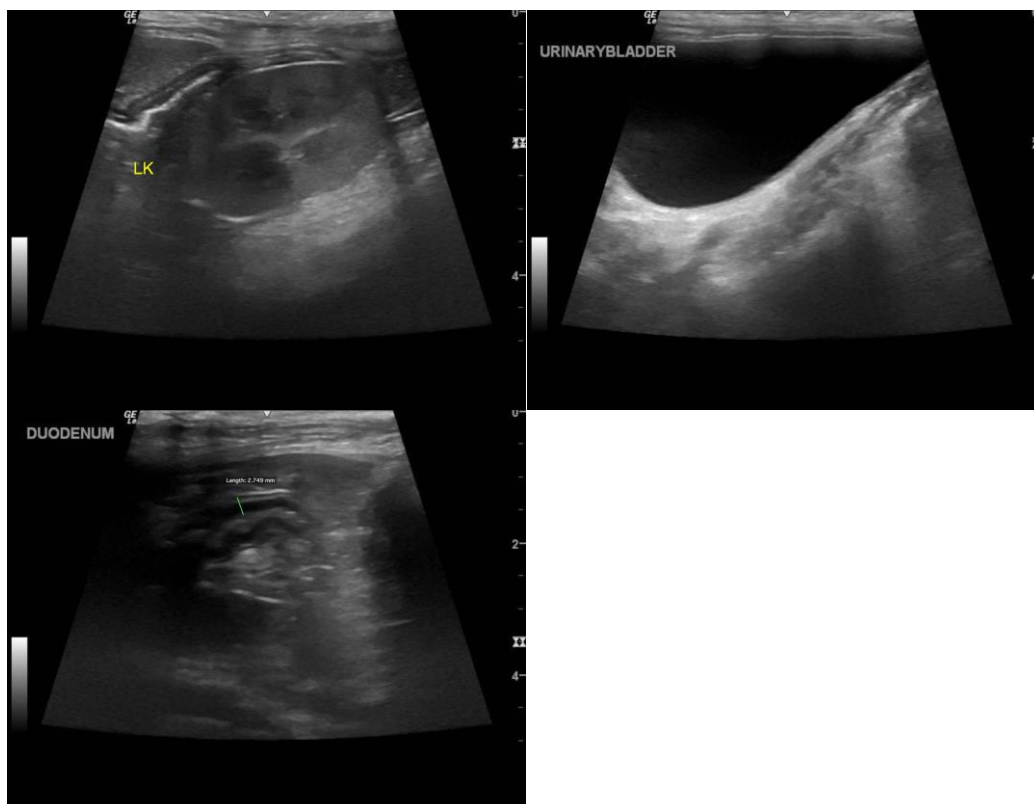
15yr

WEIGHT

8.5lb

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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 visible in the image/video clips provided.

IMAGING BY

Loetitia Saint-Jacques,
LVT

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.

HOSPITAL NAME

VCA Feline AH

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

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