

<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Riley Rodda	FLUTD, recurring symptoms including blockage. This scan is mainly for urinary systems evaluation.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: Weight stable, Gr 2/9 pansystolic murmur. L thyroid (cystic) enlarged on palpation. Lab work in Dec: Crea 2.0, otherwise normal labs.
Feline	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>	<b>Urinary System</b>
Maine Coon	The urinary bladder was normal in size and tone with sonographically normal walls. The 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 minor non-dependent particulate to hyperechoic sediment. No macrocalculi present. No evidence of inflammatory or neoplastic changes were noted.
<b>SEX</b>	Normal size and asymmetric margination were present in the kidneys. Asymmetrical mild cortical hypertrophy with mild non-homogenous cortex echogenicity was present. Moderate loss of corticomedullary definition was present. Areas of medullary mineral to small nephroliths were noted bilaterally. An example of a nephrolith in the left kidney measured 0.6 cm, in the right kidney measured 0.7 cm. No pyelectasia and likely bilateral cortical infarcts were present. No evidence of retroperitoneal inflammation. The left kidney measured 4.0 cm in length. The right kidney measured 4.0 cm in length.
MN	
<b>AGE</b>	
12	
<b>WEIGHT</b>	The area of the aortic trifurcation was free of pathology.
12.7lb	<b>Adrenal Glands</b>
<b>INTERPRETED BY</b>	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.3 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.5 cm width.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<b>Spleen</b>
<b>IMAGING PERFORMED BY</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.
Sorbo	
<b>HOSPITAL NAME</b>	<b>Liver/Gallbladder</b>
Mill Brook Animal Clinic VBF	The liver was subjectively borderline to mildly enlarged with normal 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>	
Sorbo	<b>Gastrointestinal</b>
<b>INVOICE</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.
13226ag	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.
<b>DATE</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
03/20/2023	



**PATIENT**

**Pancreas**

Riley Rodda

The left limb of the pancreas extending into the pancreas base exhibited subtle prominent size with mild capsule asymmetry and mild non-homogenous to hypoechoic left pancreatic and pancreas base parenchyma. No overt evidence of hyperechoic omentum.

**SPECIES**

Feline

**Free Abdomen**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**BREED**

Maine Coon

**ULTRASONOGRAPHIC FINDINGS**

- Sonographically unremarkable urinary bladder with minor particulate sediment.
- Chronic renal changes with non-obstructive medullary mineral/nephroliths.
- Prominent non-homogenous hypoechoic left pancreatic limb/pancreas base.

**SEX**

MN

**Secondary findings**

- Possible subjective borderline mild hepatomegaly.

**AGE**

12

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No sonographic evidence of lower urinary tract pathology was present i.e., cystitis, tumors or macrocalculi. Potential renal origin of hematuria if present would be considered most likely. Low-grade cystitis is possible although no sonographic evidence of urinary bladder mural pathology was present.

**WEIGHT**

12.7lb

The pancreatic presentation was non-specific yet may suggest low-grade to chronic active inflammation if previous or current clinical signs suggestive of pancreatitis are present. This potential may be considered if there is evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with a spec fPL or a GI panel to include PLI/TLI/Cobalamin/Folate is recommended. A full CBC/Chem panel to assess renal and hepatic parameters and full urinary workup with UA, C/S and baseline UPC is recommended.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sorbo

**HOSPITAL NAME**

Mill Brook Animal  
Clinic VBF

**REFERRING VET**

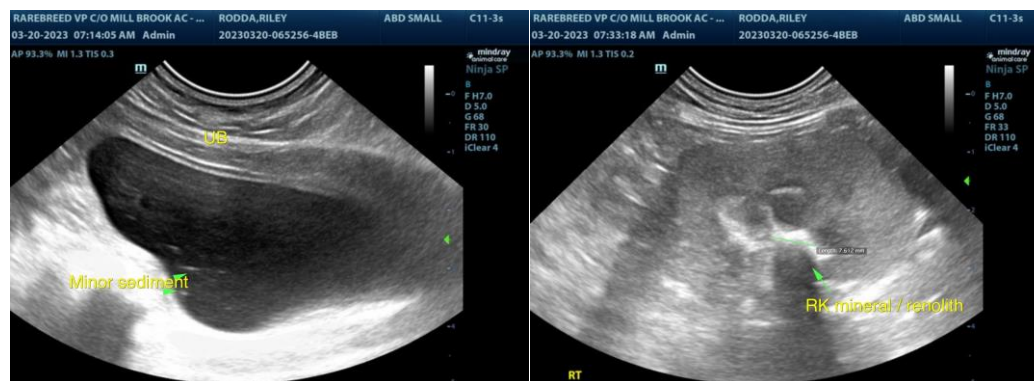
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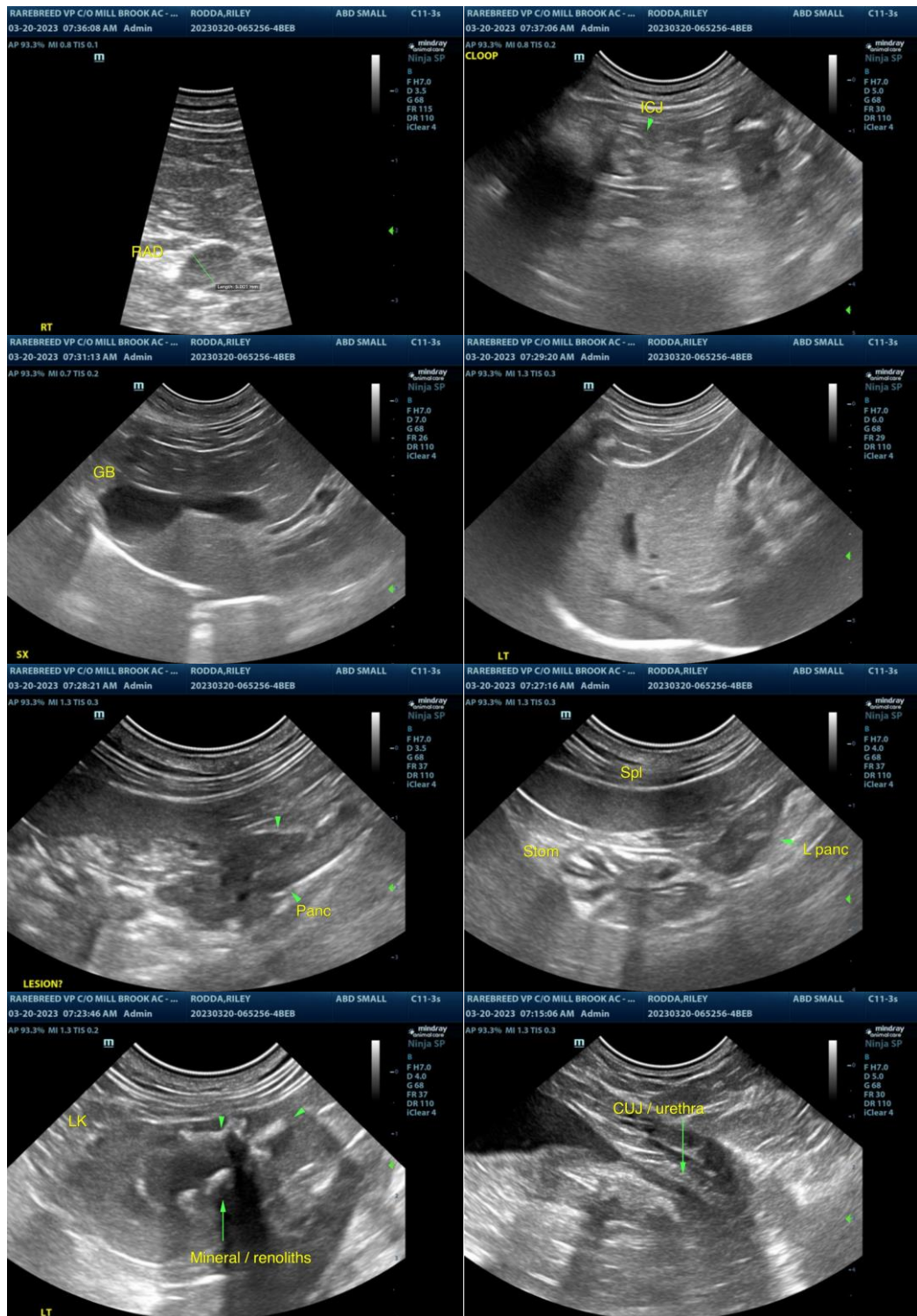
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



**PATIENT**

can be of any further assistance, please contact me.

Riley Rodda

**SPECIES**

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

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Feline

**BREED**

Maine Coon

**SEX**

MN

**AGE**

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**WEIGHT**

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