



PATIENT	PRESENTING CLINICAL SIGNS
Snowy Veerman	Presented for anorexia lethargy for 48-hour duration .There has been increased regurgitation of about 1 time per week for the last 2 to 3 months. Is been no diarrhea or active vomiting during this time of lethargy and anorexia. Up until recently has been drinking more than usual. Is an indoor/outdoor cat and vaccinations are up-to-date.
SPECIES	
Feline	Abnormal PE/Chem/CBC/UA Results: Lethargic Significant dehydration Pale pink mucous membranes Mid abdominal mass Weak Significant anemia (blood loss of some chronicity with evidence of regeneration) Hypokalemia Mild hypoproteinemia Normal fPL Urinalysis: Very concentrated (dehydration) Otherwise unremarkable Thoracic radiographs: Relative hyperinflation (hypovolemia - blood loss/dehydration etc.). Normal cardiac dimensions. Normal pulmonary parenchyma. Incidentally can visualize the cranial aspect of a mid-abdominal mass
BREED	
DLH	
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
FS	Urinary System
AGE	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.
8	
WEIGHT	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 3.7 cm in length. The right kidney measured 4.3 cm in length.
5.05kg	
INTERPRETED BY	The area of the aortic trifurcation was free of pathology.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Adrenal Glands
	The bilateral adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.33 cm width. The right adrenal gland measured 0.40 cm width.
IMAGING PERFORMED BY	Spleen
Dr. Westcott	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.
HOSPITAL NAME	Liver/Gallbladder
Dr. Westcott	The liver exhibited generalized enlargement, areas of capsule asymmetry and non-homogenous parenchyma with diffuse intraparenchymal cystic lesions. Intermittent discrete nodules exhibiting mild central hyperechoic echogenicity with hypoechoic periphery were present, an example measuring 0.6 cm in diameter. 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 common bile duct was indistinctly visualized owing to hepatic cysts.
REFERRING VET	Gastrointestinal
Dr. Westcott	
INVOICE	
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DATE	
03/28/2023	



PATIENT

Snowy Veerman

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate anechoic fluid with no signs of ileus, obstruction or foreign material.

SPECIES

Feline

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio to the level of the ileum. A moderately sized irregular non-homogenous mass appearing to surround the ileocolic junction was present measuring ~ 6.0 cm in diameter. Possible indistinct cystic to cavitated parenchyma within the mass was visualized. Suspect associated peripheral hypoechoic non-homogenous omental lymphadenopathy adjacent to the mass.

BREED

DLH

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

Pancreas

The pancreas was indistinctly visualized owing to increased peripancreatic omental artifact.

SEX

FS

Free Abdomen

Mild to moderate volume peritoneal free fluid was present.

AGE

8

ULTRASONOGRAPHIC FINDINGS

- Non-homogeneous irregular to cystic mass surrounding the ileocolic junction with suspected peripheral omental lymphadenopathy.
- Hepatomegaly exhibiting non-homogenous diffusely cystic parenchyma, potential for discrete target nodules.
- Mild to moderate volume peritoneal free fluid.
- Hypomotile stomach.

WEIGHT

5.05kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Considerations for the ileocolic junction mass include suspect neoplasia such as adenocarcinoma, lymphoma or other, granulomatous disease (FIP), fibroplasia or less likely severe inflammatory disease. Correlation with pending cytology suggested. If neoplastic process is confirmed, concern for possible hepatic metastasis indicated by target like nodules may be indicated. Potential for diffuse neoplasia i.e., carcinomatosis, lymphomatosis or similar may be indicated if neoplastic process is confirmed.

IMAGING PERFORMED BY

Dr. Westcott

HOSPITAL NAME

Dr. Westcott

REFERRING VET

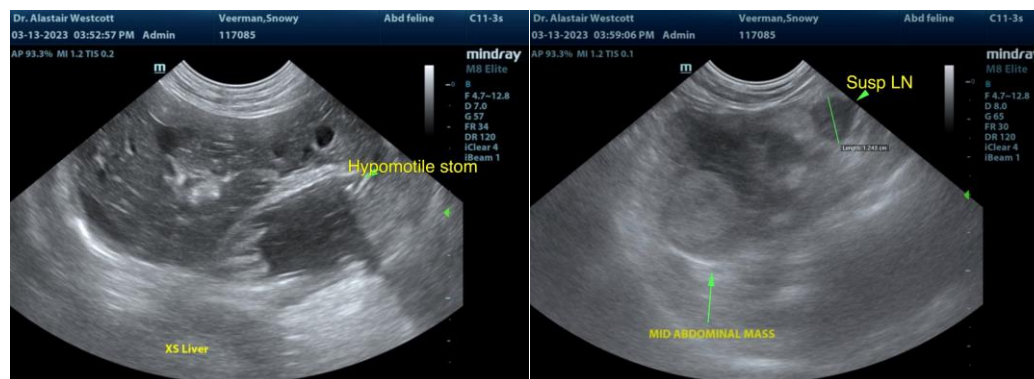
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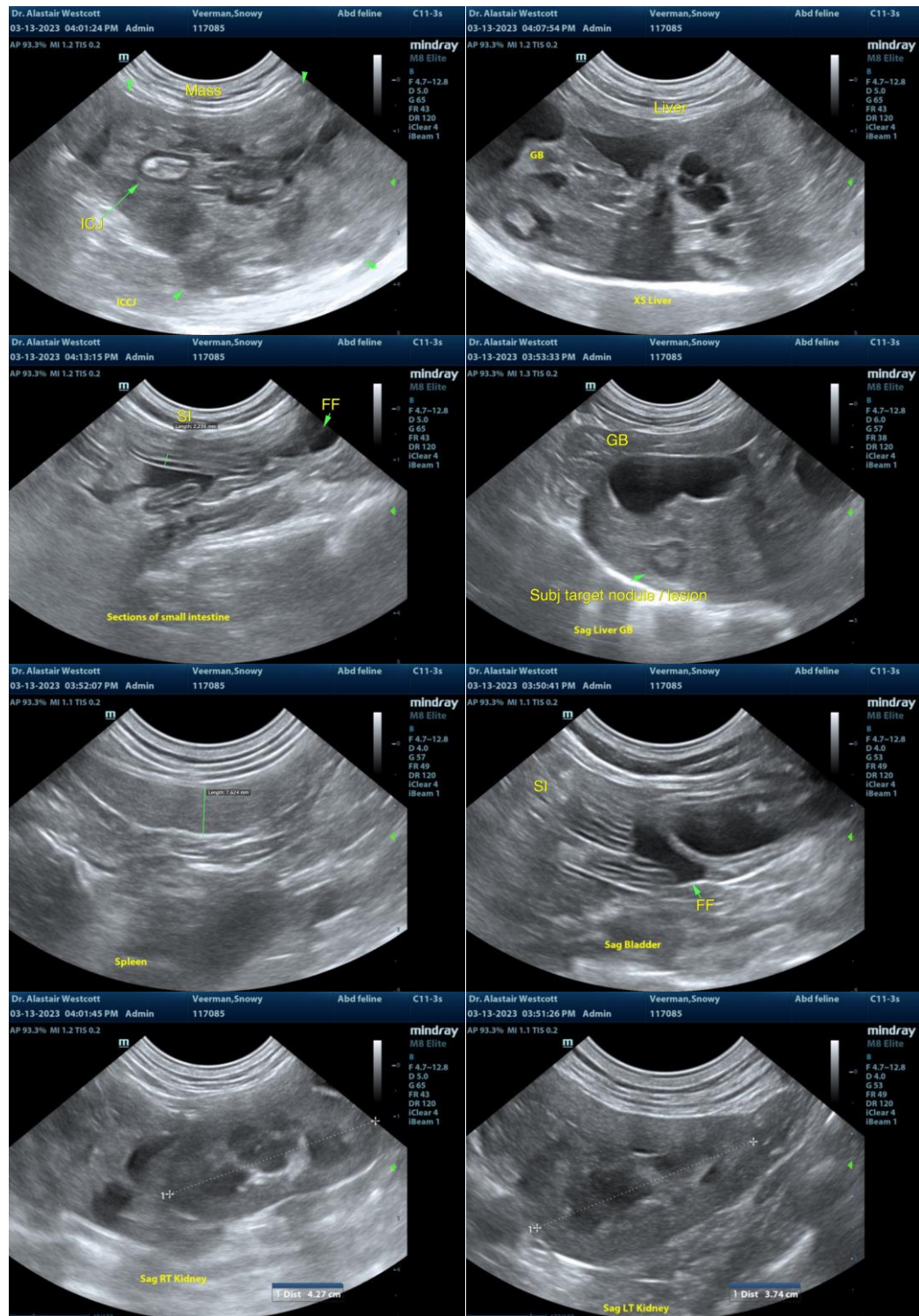
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Snowy Veerman

SPECIES

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

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FS

AGE

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WEIGHT

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