



PATIENT PRESENTING CLINICAL SIGNS

Gidget Bennett History: Weight loss despite normal activity and appetite. No evidence PU/PD. Normal physical exam. Lab work WNL, including thyroid.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

BREED

Manx

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

Spayed female

Normal size and margination was 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 3.9 cm in length. The right kidney measured 3.8 cm in length.

AGE

12 years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

9.7 pounds

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.45 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.40 cm width.

Spleen

INTERPRETED BY

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

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 0.75 cm width at the level of the hilus.

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

Liver

HOSPITAL NAME

Woods River Animal Hospital

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 yet divided into two compartments containing anechoic luminal fluid. The cystic and common bile ducts were normal.

REFERRING VET

Leah Fischer DVM

Gastrointestinal

INVOICE

10388ag

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 pylorus wall measured 0.22 cm in width.

DATE

04/15/2022

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 0.21 cm in width. The jejunum wall measured 0.21 cm in width. The ileocolic wall measured 0.28 cm in width.

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



PATIENT

Pancreas

Gidget Bennett

The left pancreatic limb exhibited normal size and contour with subtle uniform hypoechoic parenchyma with minor duct dilation. The right pancreatic limb exhibited mild heterogeneous to echogenic parenchyma.

SPECIES

Feline

Free Abdomen

BREED

Manx

Focal, mildly prominent to enlarged gastric node adjacent to the pylorus was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 0.43 cm in diameter. No peritoneal effusion was noted. No omental masses were noted.

SEX

Spayed female

ULTRASONOGRAPHIC FINDINGS

AGE

12 years

- Sonographically normal GI tract.
- Possible low grade pancreatitis.
- Focal benign/reactive gastric LN-not consistent with neoplastic criteria.
- Bi-lobed gallbladder-normal variant in a cat.

WEIGHT

9.7 pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no overt evidence of significant abdominal visceral pathology as an obvious cause for the patient weight loss. Potential for low grade pancreatitis or structurally insignificant GI disease could be present. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. If not done, three view chest radiographs to rule out occult thoracic pathology is recommended. Assessment of caloric plane and for potential competitive eating environment is clinically indicated could be considered.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

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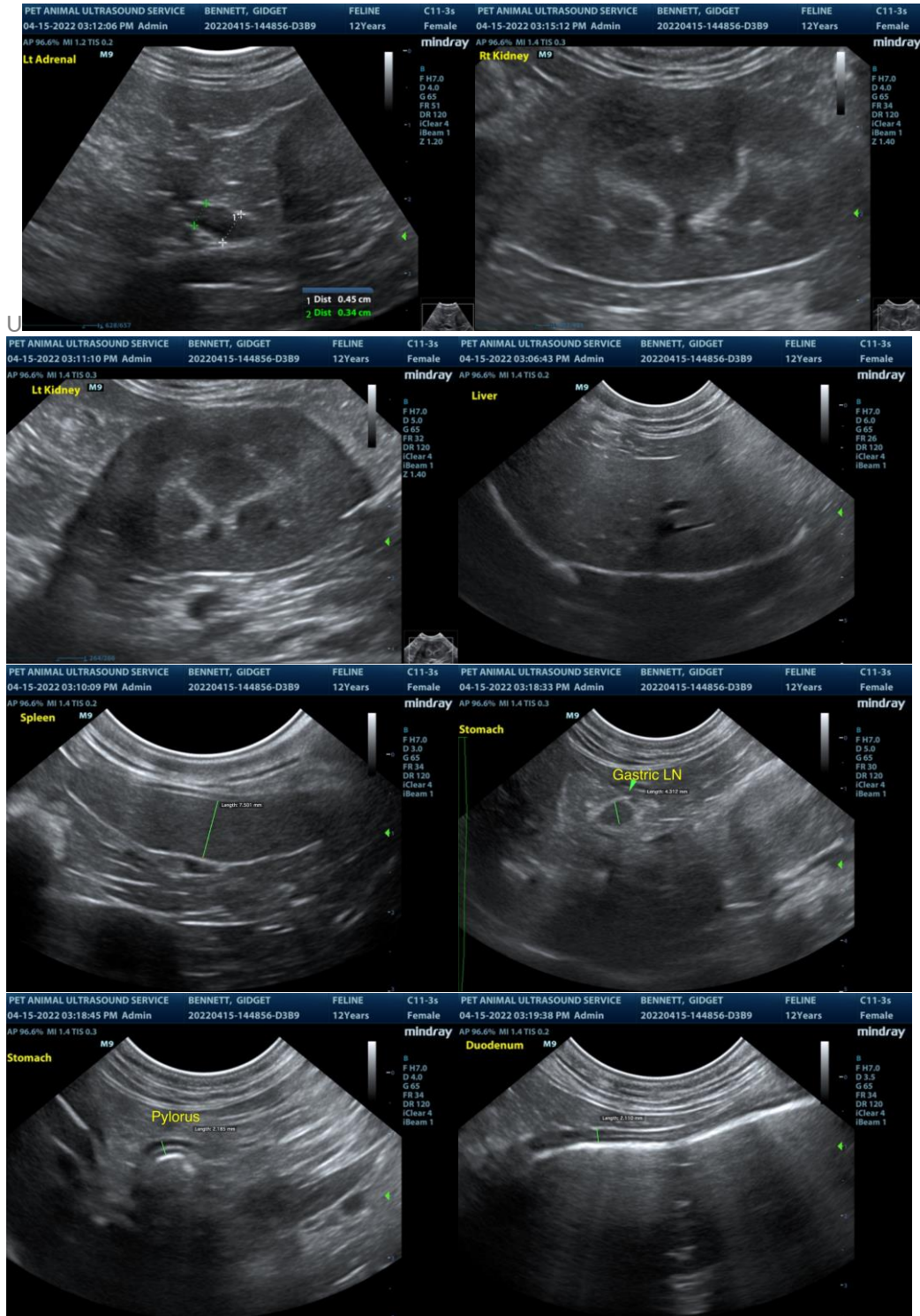
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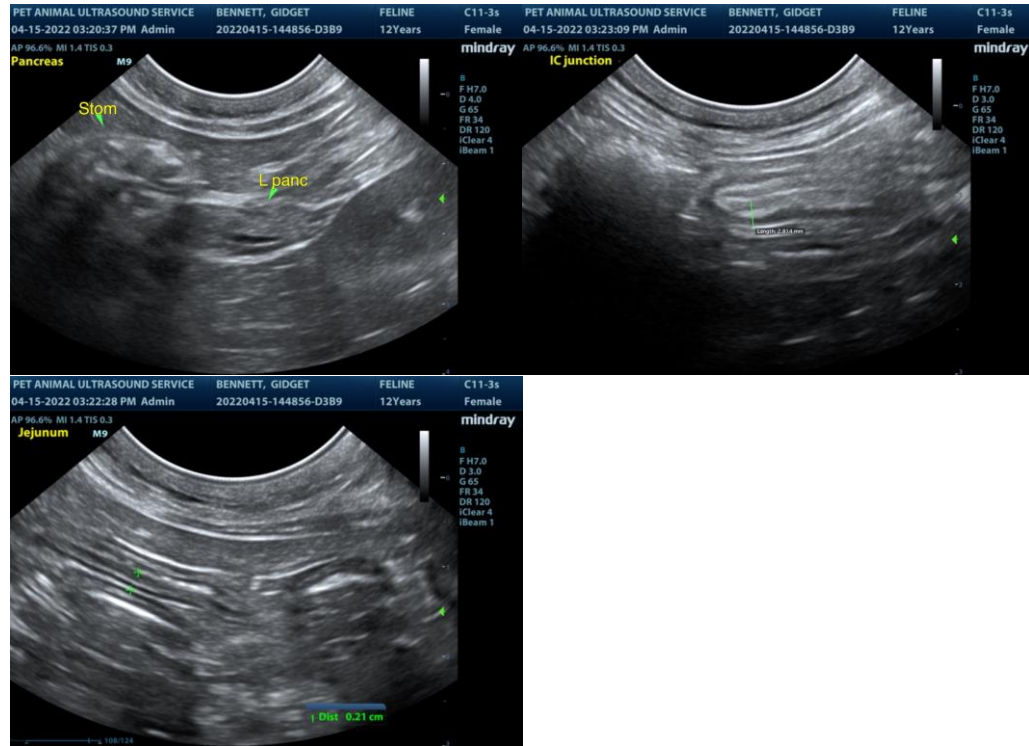
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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