



PATIENT

Dash Claire

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

14 years

WEIGHT

12.8 lbs.

PRESENTING CLINICAL SIGNS

P presented for investigation of residual caudal stomatitis (prev called "faucitis") under sedation. Had full mouth extraction a year or so ago, but has since had bouts of sneezing fits and rhinorrhea from predominantly the R nostril. Rads are being sent to a DAVDC for review.

Abnormal PE/Chem/CBC/UA Results: Edontia, otherwise no concerns on today's exam. Stable weight. Pre-sedation lab: HCT 30%, tBIL 2.5 (0-0.9), ALT 144, otherwise unremarkable labs. AlkP low. AUS to assess for cholangiohepatic concerns. A blood smear will be reviewed.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Moderate, dependent to non-dependent, particulate sediment, which may indicate cellular debris / protein, crystalline debris, lipid, or mucus, was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

No evidence of pathology in the area of the aortic trifurcation.

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 4.1 cm in length. The right kidney measured 4.1 cm in length.

Adrenal Glands

The bilateral adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.36 width and the right adrenal gland measured 0.30 width.

Spleen

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 0.83 cm width at the level of the hilus.

Liver/ Gallbladder

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 containing anechoic content with normal appearance to the gallbladder walls. The proximal common bile duct was mildly dilated and tortuous without overt post hepatic obstruction. The common bile

INTERPRETED BY

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

IMAGING PERFORMED BY

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duct measured 0.30 cm diameter containing anechoic content with no visualized evidence of mucoduct or bile duct calculi.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild ingesta exhibiting subtle progressive distal acoustic shadowing along with luminal gas.

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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.

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

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Pancreas

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

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(Canine and Feline)

- Urinary bladder sediment
- Normal bilateral kidneys
- Mild cholangitis / cholangiohepatitis hepatobiliary pattern
- Sonographically unremarkable gastrointestinal tract / pancreas

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinalysis +/- C/S, if evidence of inflammatory sediment, is suggested. Assuming normal clotting status, screening hepatic FNA cytology could be considered for possible identification of inflammatory criteria or cell type. No evidence of post hepatic obstruction or intraabdominal neoplastic criteria was present. A definitive cause of the mild anemia was not obvious. Correlation with pending CBC pathology review is suggested.

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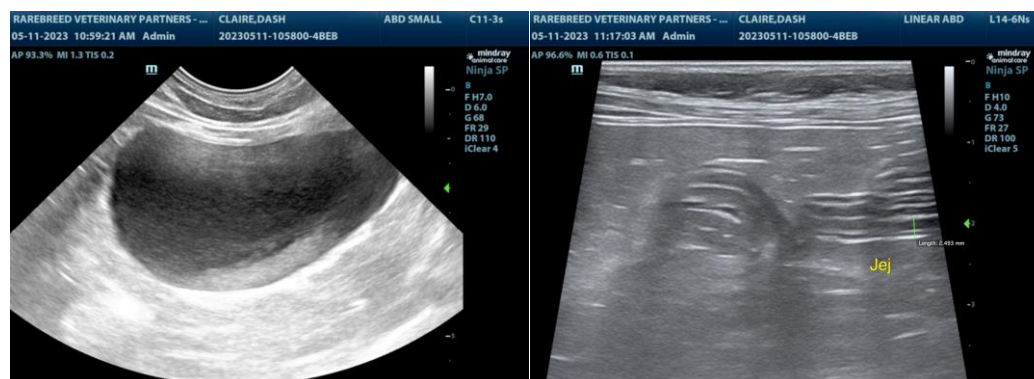
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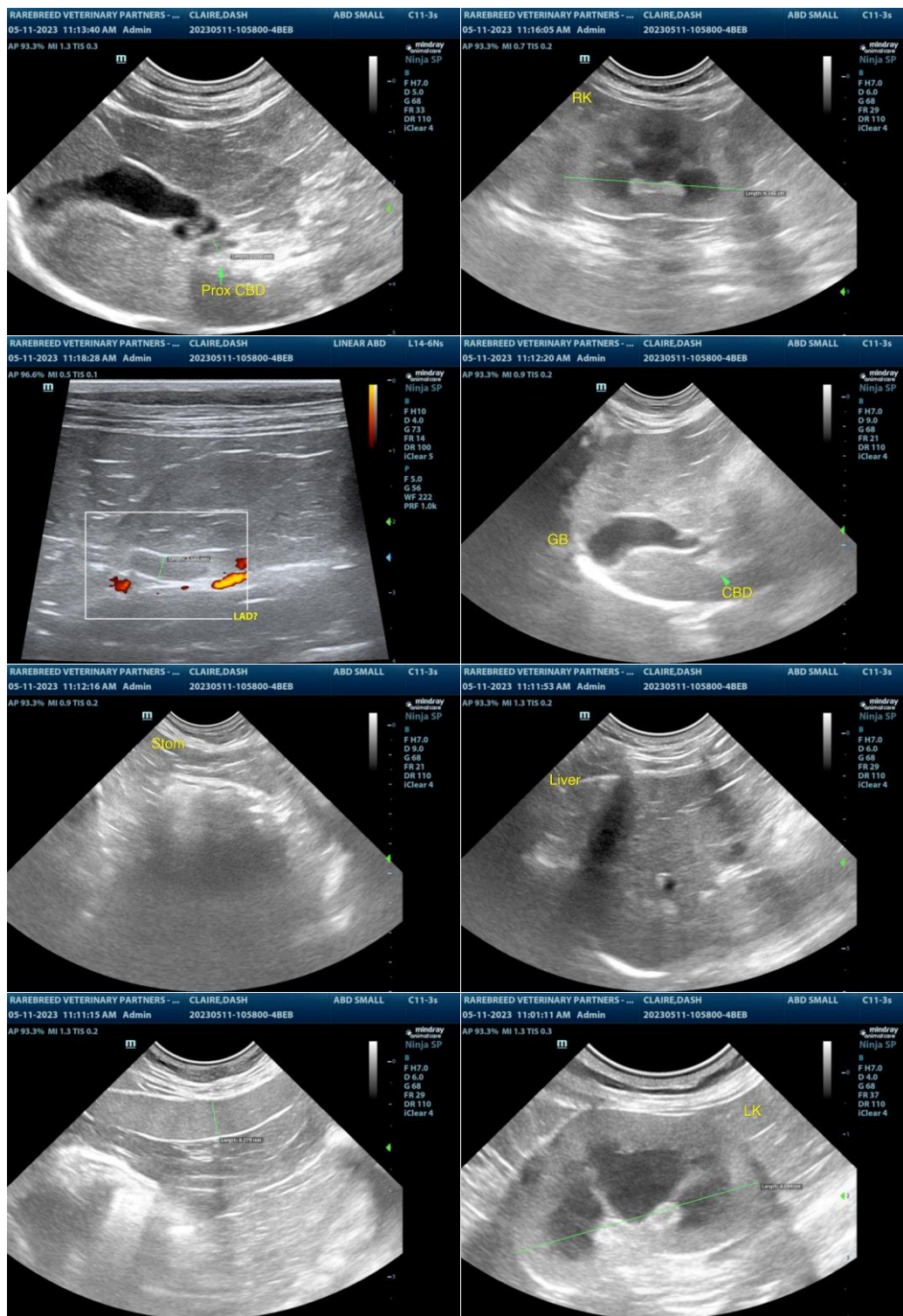
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
mac.daniel@sonopath.com

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