

PATIENT PRESENTING CLINICAL SIGNS

PATIENT Oliver Madigan
History: Inappetance, possible foreign body. Was given barium but not moving through intestines much on June 7th. On Ampicillin and Metronidazole.

SPECIES Abnormal PE/Chem/CBC/UA Results: Glob and ALT elevated.

Feline **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

BREED *Urinary System*

DSH 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 Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. Mild nonuniform to variably echogenic cortex was present in both kidneys. Mild increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.7 cm in length. The right kidney measured 4.4 cm in length.

10 yr **Adrenal Glands**

WEIGHT The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm width. No overt pathology in the area of the right adrenal gland.

21.9 lb **Spleen**

INTERPRETED BY 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.

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

IMAGING PERFORMED BY *Liver*

Crystall Hill The liver exhibited mild generalized enlargement with symmetrical capsule contour. Uniform mild increased parenchyma echogenicity was noted when compared 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.

HOSPITAL NAME

Dog and Cat Clinic of
Niagara

REFERRING VET

Dr. Snieder

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of retained gastric ingesta, ileus, obstruction or foreign material.

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. No evidence of mechanical/metabolic small intestinal ileus to the level of the ileocolic junction. Shadowing noted in the area of the distal small intestine and likely ileum as well as in the proximal colon suggestive of barium.

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

Pancreas



PATIENT

Oliver Madigan

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 was evident.

SPECIES

Feline

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present. An increased amount of omental fat was present.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

- Echogenic liver, sonographically unremarkable gallbladder
- Overtly normal GI tract and colon with strong shadowing in the area of the distal small intestine to proximal colon, suspect barium
- Mild chronic renal changes

SEX

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall no overt evidence of significant intra abdominal pathology. Considerations for the liver include cholangiohepatitis or other inflammatory hepatopathy given the ALT elevation. No overt evidence of hepatic neoplastic criteria was present which is considered an unlikely differential diagnosis. No evidence of mechanical GI obstruction pattern or overt foreign material, however shadowing in the area of the distal small intestine and proximal colon is likely consistent with barium and prohibited full evaluation of the intestinal interior. No indication for immediate surgical intervention. Continued GI and hepatic supportive care would be reasonable. A spec fPL could be considered to assess for evidence of low grade to chronic pancreatitis which may present sonographically normal.

AGE

10 yr

WEIGHT

21.9 lb

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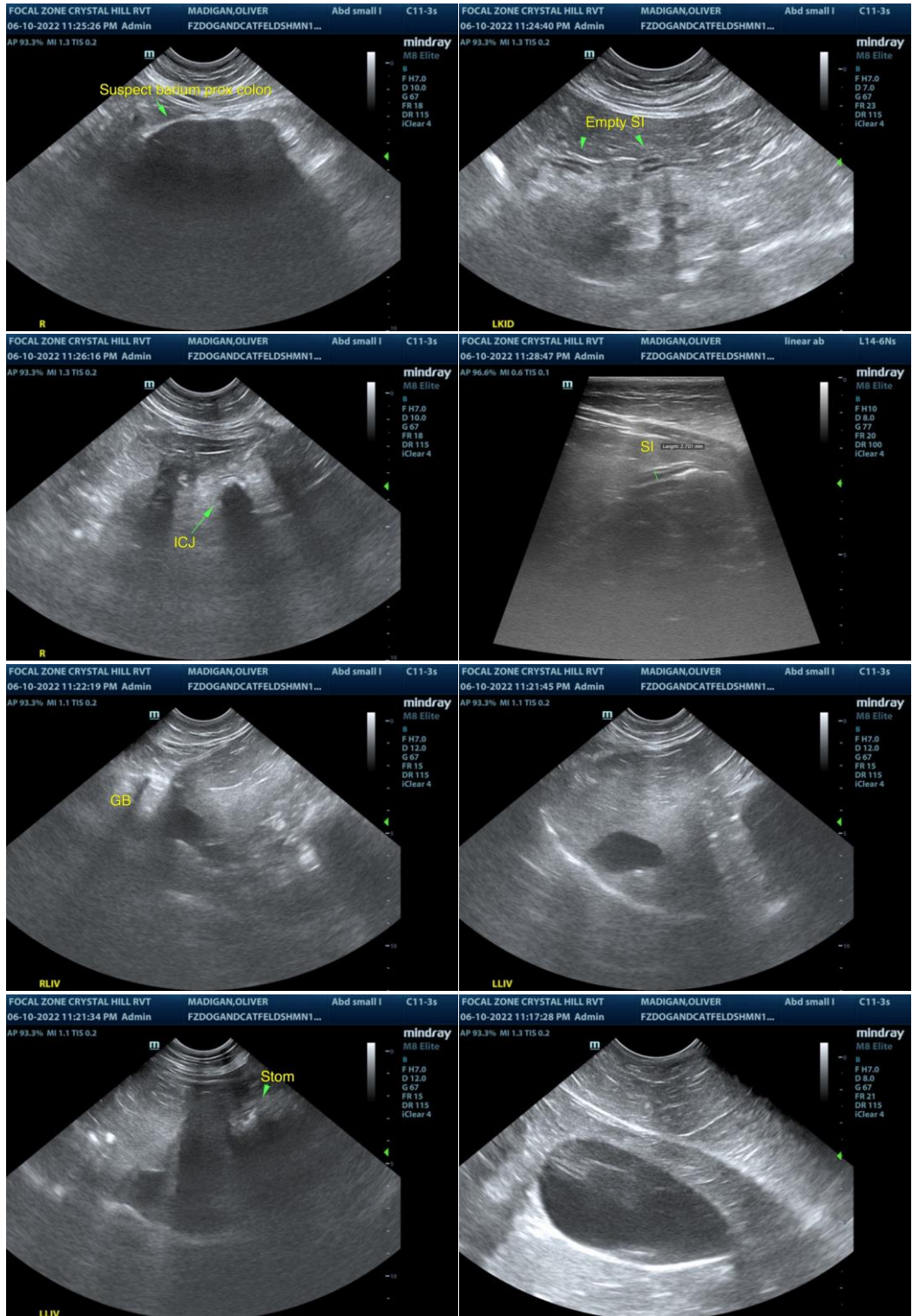
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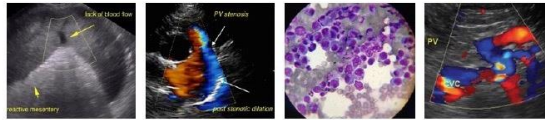
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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