



PATIENT	PRESENTING CLINICAL SIGNS
Jazz Alfonso	Body score 4.5/5 History of chronic intermittent vomition and mild lethargy and has lost 2 Kg in last 6 months. Not on a hypoallergenic diet
SPECIES	Abnormal PE/Chem/CBC/UA Results: Severe elevation of ALP ALT
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
DSH	Urinary System
SEX	The urinary bladder was normal in size and tone with normal urinary bladder wall without inflammatory criteria. No tumors were noted. Anechoic urine was present. Dependent cystic calculus measuring 0.66 cm diameter was present with concurrent dependent mineral and non-dependent particulate sediment.
Female / Spay	
AGE	No evidence of pathology in the area of the aortic trifurcation.
Not provided	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 3.6 cm in length. The right kidney measured 3.7 cm in length.
WEIGHT	
7.2	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left and right adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.32 cm width and the right adrenal gland measured 0.38 cm width.
IMAGING PERFORMED BY	Spleen
Dr. Belan	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
Fish Creek VH	The liver was subjectively normal in size and maintained a symmetrical capsule contour with normal hepatic parenchyma echogenicity exhibiting moderate coarse echotexture. The gallbladder was non-distended in size with subtly prominent to hyperechoic gallbladder walls containing anechoic content with mild echogenic gallbladder sediment. Generalized mild to moderate common bile duct dilation was present extending from the cystic duct to the level of the duodenal papilla. No obvious evidence of obstructive duodenal papilla pathology or calculi were noted. Minor concurrent common bile duct sediment was noted with primarily anechoic common bile duct content.
REFERRING VET	Gastrointestinal
Dr. Brugnola	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 gastric body wall width measured 0.25 cm.
INVOICE	
17153	
DATE	
6/22/23	



PATIENT	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 0.25 cm width. The jejunum wall measured 0.23 cm width. The ileocolic wall measured 0.28 cm width.
Jazz Alfonso	
SPECIES	
Feline	Normal visible colon wall layers were present with apparent formed feces in lumen.
BREED	<i>Pancreas</i>
DSH	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
SEX	<i>Free Abdomen</i>
Female / Spay	No omental masses, lymphadenopathy, or evidence of peritoneal effusion were noted.
AGE	ULTRASONOGRAPHIC FINDINGS
Not provided	<ul style="list-style-type: none"> • Probable cholangitis / cholangiohepatitis hepatobiliary pattern • Sonographically unremarkable gastrointestinal tract • Mild heterogeneous pancreas - no overt sonographic evidence of significant or active pancreatitis • Small cystic calculi with concurrent dependent to non-dependent mineral / sediment
WEIGHT	
7.2	
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Urine C/S on a sterile urine sample is recommended.
IMAGING PERFORMED BY	Aside from the hepatobiliary presentation, a definitive cause of the patient's mild weight loss was not obvious. Assuming normal clotting status, screening hepatic FNA cytology, using a 25-gauge needle, is warranted for further clarification and potential identification of inflammatory cell type, as well as rule out the unlikely potential for occult infiltrative neoplasia.
Dr. Belan	
HOSPITAL NAME	No obvious evidence of post hepatic obstructive criteria, yet sonographic reassessment of the gallbladder and common bile duct is advised if progressive hepatic enzyme elevations or development of icterus is noted.
Fish Creek VH	
REFERRING VET	A GI panel to include PLI/TLI/Cobalamin/Folate, as well as three view chest radiographs to rule out occult disease as a contributing factor to the patient's weight loss, i.e., evidence of Triad Disease, is recommended.
Dr. Brugnola	
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PATIENT

Jazz Alfonso

SPECIES

Feline

BREED

DSH

SEX

Female / Spay

AGE

Not provided

WEIGHT

7.2

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Fish Creek VH

REFERRING VET

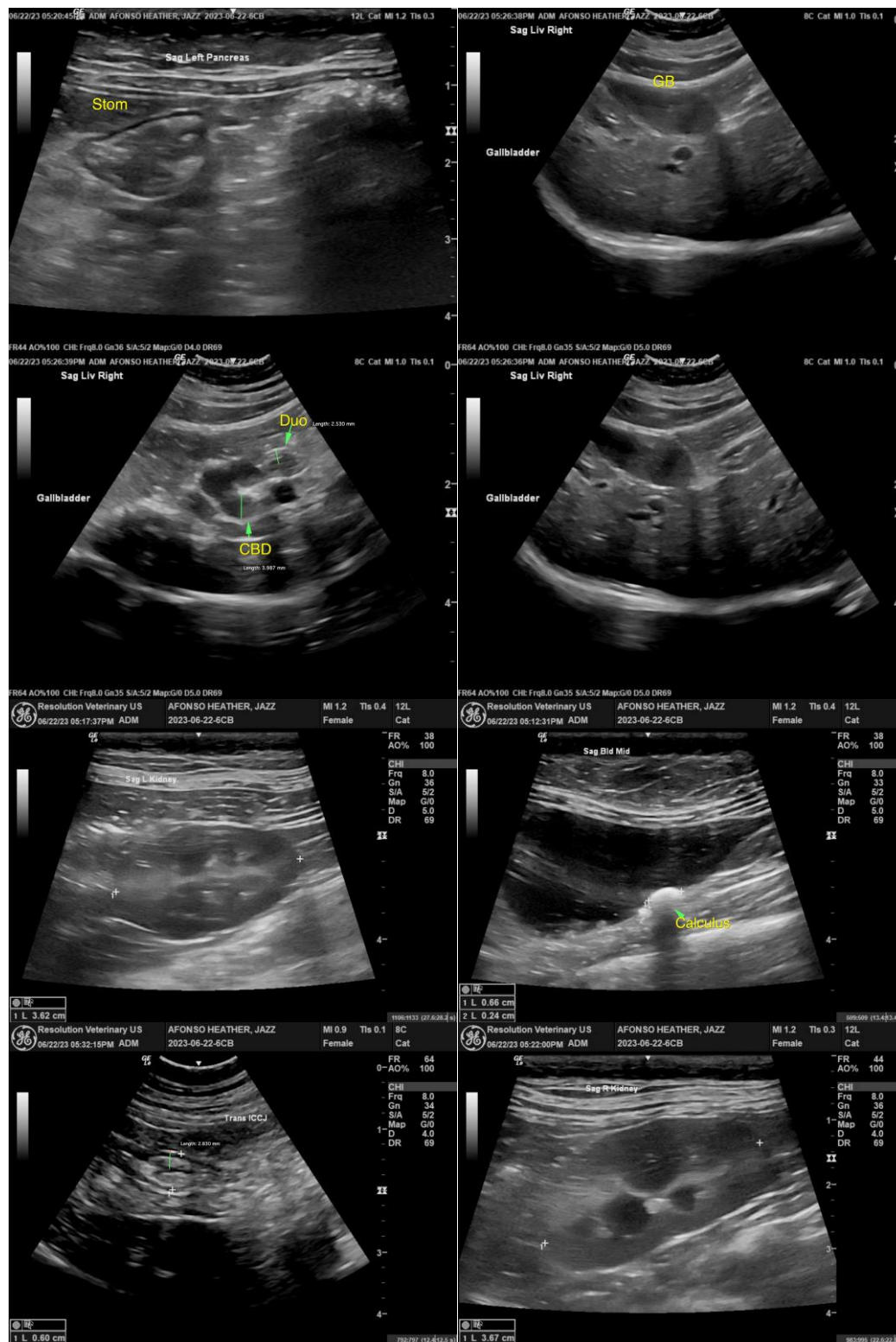
Dr. Brugnola

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PATIENT

Jazz Alfonso

SPECIES

Feline

BREED

DSH

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Female / Spay

AGE

Not provided

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R. McKenzie Daniel,
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HOSPITAL NAME

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REFERRING VET

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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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