



PATIENT PRESENTING CLINICAL SIGNS

Toasty Kreykenbohm 10 day duration anorexia, weight loss, no response to medical management.
 Medication: Cerenia, omeprazole, Clavamox, SQF, Elura, Convenia, mirtazapine

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

BREED The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 was noted.

DSH

SEX The area of the aortic trifurcation was free of pathology.

FS

AGE

2012

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Right kidney lateral cortical infarct noted. The left kidney measured 4.0 cm in length. The right kidney measured 3.5 cm in length. Subtle increased right retroperitoneal echogenicity was present with minor right kidney perinephric to retroperitoneal free fluid.

WEIGHT

8.2

Adrenal Glands

INTERPRETED BY The left adrenal gland was enlarged exhibiting mild asymmetrical capsule contour and homogeneous parenchyma. The left adrenal gland measured 1.7 cm x 1.2 cm. The right adrenal gland was subtly prominent in size measuring 0.55 cm in diameter.

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

Spleen

IMAGING PERFORMED 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. The spleen measured 0.6 cm width at the level of the mid spleen.

Rebekah Jakum, CVT
 ARDMS/RVT

HOSPITAL NAME

White Haven VH

Liver/ Gallbladder

REFERRING VET

Dr. Gallagher

The liver exhibited potential subjective borderline to mild enlargement with normal 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 mild gallbladder wall edema. The gallbladder wall measured 1.3 cm width. The gallbladder contained anechoic content. No evidence of gallbladder sediment was noted. The cystic and common bile ducts were normal.

INVOICE

17109

Gastrointestinal

DATE
 6/20/23

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.



PATIENT

Toasty Kreykenbohm

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.

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

SPECIES

Pancreas

Feline

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.

BREED

Free Abdomen

DSH

A small pocket of scant perihepatic, free fluid was noted. No overt significant omental lymphadenopathy was noted. No evidence of omental masses was visualized.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

2012

- Left adrenal mass
- Concurrent nonspecific mildly prominent right adrenal gland
- Nonspecific chronic renal changes with right kidney infarct
- Subjective borderline / mild hepatomegaly
- Minor gallbladder wall edema
- Sonographically unremarkable gastrointestinal tract
- Scant peritoneal / right retroperitoneal free fluid

WEIGHT

8.2

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening blood pressure to assess for evidence of hypertension and aldosterone levels in conjunction with left adrenal mass is recommended. Assuming normal clotting status, screening hepatic FNA cytology, using a 25-gauge needle, may be considered given the elevated calcium levels and evidence of gallbladder wall edema. Potential for early vascular invasion associated with the left adrenal mass cannot be excluded. If possible, a referral for further assessment and potential surgical options would likely be ideal. Empirically, as-needed gastrointestinal support is recommended.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

White Haven VH

REFERRING VET

Dr. Gallagher

INVOICE

17109

DATE

6/20/23





PATIENT

Toasty Kreykenbohm

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

2012

WEIGHT

8.2

INTERPRETED BY

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

IMAGING

PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

White Haven VH

REFERRING VET

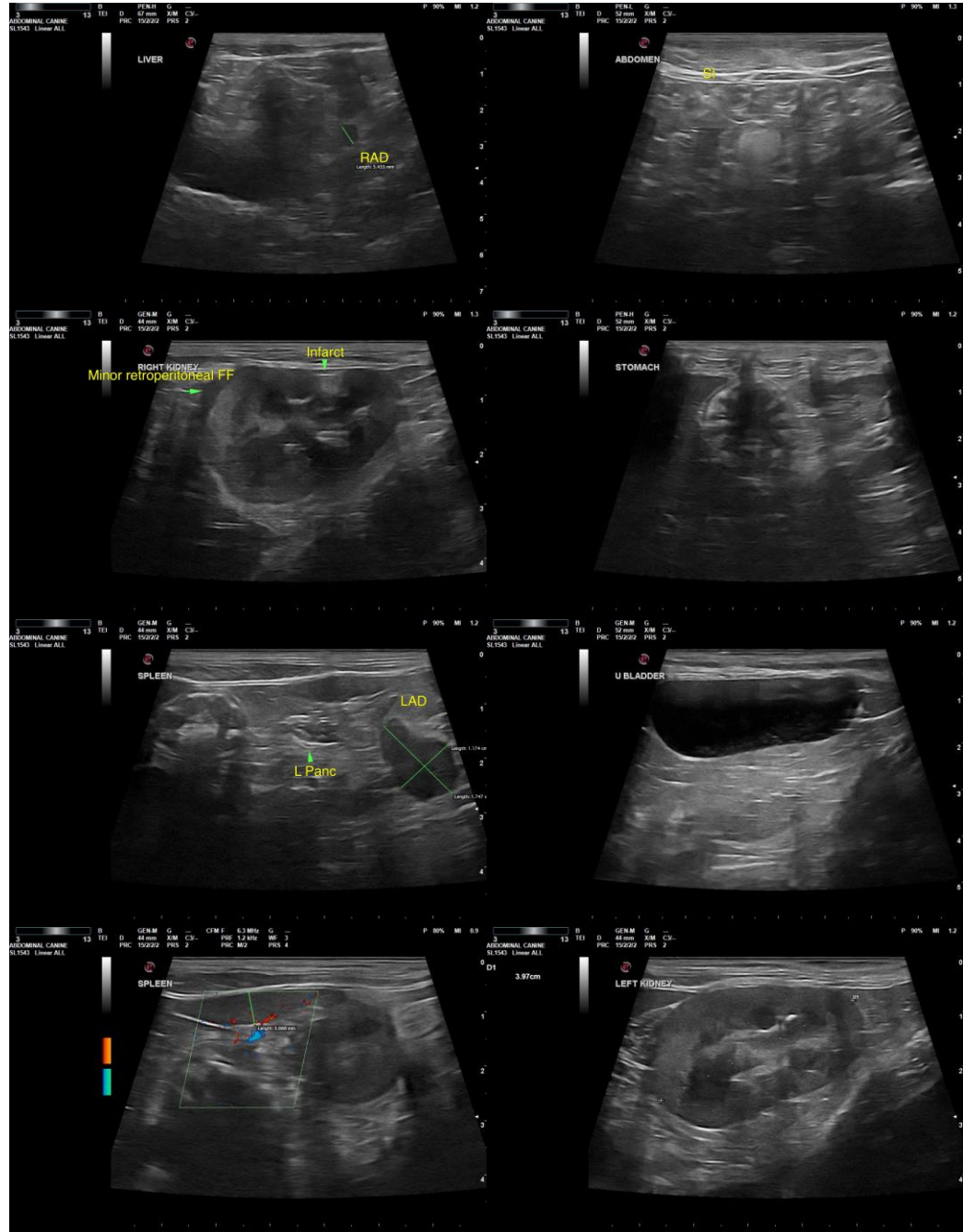
Dr. Gallagher

INVOICE

17109

DATE

6/20/23



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)
info@sonopath.com