



PATIENT	PRESENTING CLINICAL SIGNS
Hakuna DeFrancisco	Weight loss (1.2lb in 1yr), increased appetite, vomiting (when overeating), new cardiac murmur, slightly doughy intestinal segments on palpation.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Creatinine 1.9, BUN 43, SDMA 9, USG 1.018 ,T4 1.6, BG 127 mg/dL, Fecal float negative GI panel (B-12/Folate/cPL) pending
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Mixed	Urinary System
SEX	The urinary bladder, trigone, and cystourethral junction 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.
FS	
AGE	No evidence of pathology in the area of the aortic trifurcation.
15 years 10 months	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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.5 cm in length. The right kidney measured 3.5 cm in length.
WEIGHT	
6.81 lbs.	
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 0.35 cm width and the right adrenal gland measured 0.34 cm width.
IMAGING PERFORMED BY	Spleen
Graham Sager-Gellerman, DVM	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
Back Bay VC	The liver was enlarged with symmetrical capsule contour and normal to mildly decreased hepatic parenchyma echogenicity. Normal vascular volume was noted. No visualized hepatic masses or nodules were present. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
REFERRING VET	
Erin CDarey, DVM	
INVOICE	Gastrointestinal
17149	The stomach presented intact wall layering with a normal wall layer ratio. Minor retained anechoic pyloric fluid was present with no signs of ileus, obstruction, or foreign material. The pylorus wall width measured 0.30 cm.
DATE	
6/22/23	The small intestine presented generalized intact thickened wall layering owing to propensity for variably thickened muscularis layer. The jejunum wall measured 0.37 cm width. The ileocolic wall measured 0.38 cm width.



PATIENT

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

Hakuna DeFrancisco

Pancreas

SPECIES

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. Mild pancreatic duct dilation was present.

Feline

BREED

Free Abdomen

Mixed

No sonographic evidence of significant omental lymphadenopathy. No omental masses or overt peritoneal free fluid was noted.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

- Infiltrative enteropathy - inflammatory vs. neoplastic infiltrative enteropathy possible, less likely dry form FIP
- Hepatomegaly
- Chronic to chronic active pancreatitis
- Mild chronic renal changes

15 years 10 months

WEIGHT

6.81 lbs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Correlation of the intestinal and pancreatic presentation with pending GI panel is recommended. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

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

IMAGING PERFORMED BY

Although no reported hepatic enzyme elevations, Triad Disease may be a consideration in this patient given the short half-life of hepatic enzymes in cats. Further clarification may include screening hepatic FNA cytology, assuming normal clotting status and using a 25-gauge needle, primarily to assess for evidence of inflammatory criteria or occult neoplasia. A definitive diagnosis would require intestinal +/- hepatopancreatic biopsies.

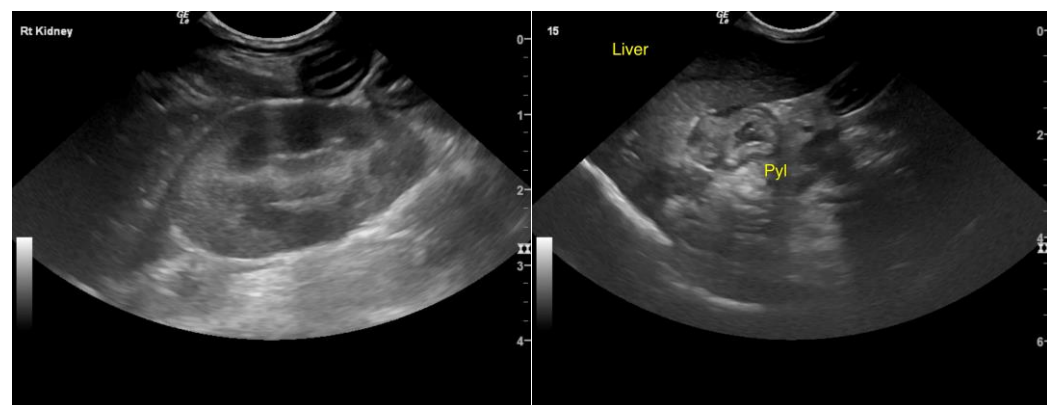
Graham Sager-Gellerman, DVM

HOSPITAL NAME

Empirically, as-needed gastrointestinal support with IBD / Triaditis protocol and monitoring of patient clinical response and body weight going forward may be considered.

Back Bay VC

REFERRING VET



Erin CDarey, DVM

INVOICE

17149

DATE

6/22/23



PATIENT

Hakuna DeFrancisco

SPECIES

Feline

BREED

Mixed

SEX

FS

AGE

15 years 10 months

WEIGHT

6.81 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Graham Sager-
Gellerman, DVM

HOSPITAL NAME

Back Bay VC

REFERRING VET

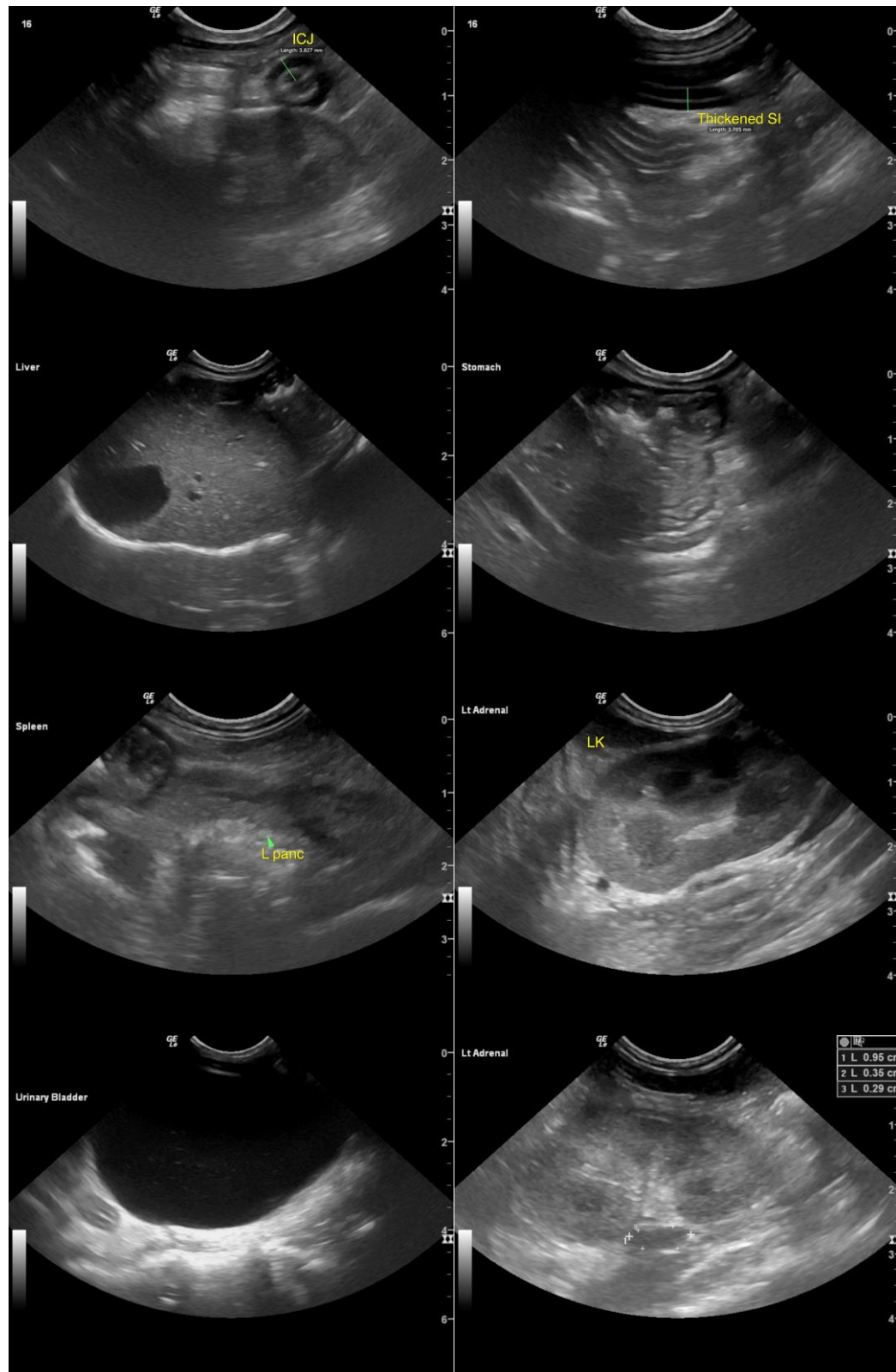
Erin CDarey, DVM

INVOICE

17149

DATE

6/22/23





PATIENT

Hakuna DeFrancisco

SPECIES

Feline

BREED

Mixed

SEX

FS

AGE

15 years 10 months

WEIGHT

6.81 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Graham Sager-
Gellerman, DVM

HOSPITAL NAME

Back Bay VC

REFERRING VET

Erin CDarey, DVM

INVOICE

17149

DATE

6/22/23

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