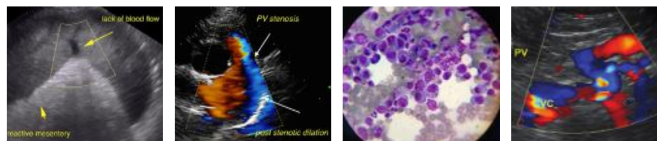


SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Timmy Lehigh

SPECIES

Feline

BREED

DSH

SEX

M/N

AGE

3 years

WEIGHT

5.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Feline Fine Cat Clinic

REFERRING VET

Stephanie Kadasi DVM

INVOICE

17167

DATE

6/27/23

PRESENTING CLINICAL SIGNS

Abdominal explore for vomiting April 2023. Was doing well for some time, but the last few weeks intermittent vomiting/hematuria, waxing/waning lethargy. Currently a "pro bono" case with FF's Angel Fund as O funds are limited after prior abd. sx.

Abnormal PE/Chem/CBC/UA Results: PE: Unremarkable 6/27/23 CBC: -- WNL CHEM: -- PHOS: 6.4 mg/dL (2.9-6.3) -- TP: 6.2 g/dL (6.3-8.8) -- GLOB: 2.9 g/dL (3.0-5.9) -- ALT: 23 U/L (27-158) -- AST: 15 U/L (16-67) -- ALP: 9 U/L (12-59) Spec fPL: WNL Cardiopet proBNP (feline): WNL UA (cysto): amber, slightly cloudy, USG: >1.050, pH: 7, inactive sediment T4: 2.8 ug/dL (wnl)

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. Minor non-dependent, particulate sediment 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 3.9 cm in length.

Adrenal Glands

The left and right adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.51 cm width and the right adrenal gland measured 0.49 cm width.

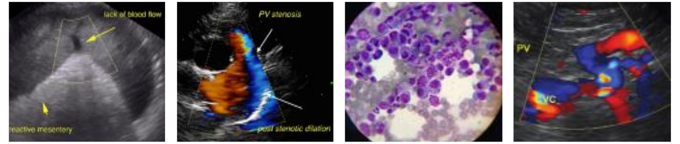
Spleen

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. Mild medial splenic folding was noted, which is not indicative of underlying splenic pathology and likely a patient variant. The spleen measured 0.9 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 with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.



SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Timmy Lehigh

SPECIES

Feline

BREED

DSH

SEX

M/N

AGE

3 years

WEIGHT

5.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Feline Fine Cat Clinic

REFERRING VET

Stephanie Kadasi DVM

INVOICE

17167

DATE

6/27/23

Gastrointestinal

The stomach presented intact, overtly normal wall layering with a normal wall layer ratio. The stomach contained a mild amount of retained anechoic fluid and mild echogenic mucus extending into the pyloric outflow. No evidence of mechanical pyloric outflow obstruction or obstructive pyloric mural pathology was noted. There was no evidence of gastric foreign material. The gastric body wall width measured 0.29 cm. The pylorus wall width measured 0.26 cm.

The small intestine presented generalized intact, borderline prominent wall layering with primarily maintained 1:3 muscularis / mucosa ratio. No evidence of small intestinal mechanical / metabolic ileus was noted. The duodenum wall measured 0.29 cm width. The jejunum wall measured up to 0.27 cm width. The ileocolic wall measured 0.38 cm width.

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

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.

Free Abdomen

No evidence of significant or overt omental lymphadenopathy. No omental masses or peritoneal effusion were noted.

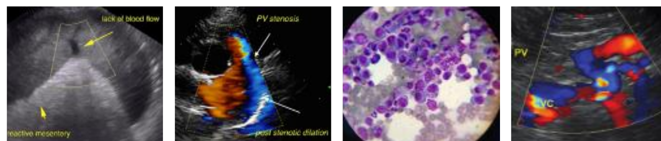
ULTRASONOGRAPHIC FINDINGS

- Normal stomach with mild retained gastric fluid / mucus
- Intact subjective borderline / mild prominent small bowel wall - no evidence of small bowel obstructive pattern
- Normal pancreas
- Minor urinary bladder sediment
- Normal bilateral kidneys

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient's vomiting, mild gastritis and concurrent mild metabolic / functional gastric hypomotility is suspected. Although a potential for patient variant, the small intestine exhibited borderline to mild subjective mural changes, which although not definitive, may suggest low-grade inflammatory intestinal criteria.

Dietary intolerance / food hypersensitivity, occult parasitism, low-grade pancreatitis which may present as sonographically normal, are potential considerations. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Empirically, gastroprotectant protocol, Omeprazole 1.0 mg/kg PO SID over the next 3 weeks, along with canned novel protein or hydrolyzed diet trial with potential for long-term dietary therapy, and empirical de-worming (even if fecal testing is negative) and assessment of clinical response may prove beneficial.



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Timmy Lehigh

SPECIES

Feline

BREED

DSH

SEX

M/N

AGE

3 years

WEIGHT

5.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Feline Fine Cat Clinic

REFERRING VET

Stephanie Kadasi DVM

INVOICE

17167

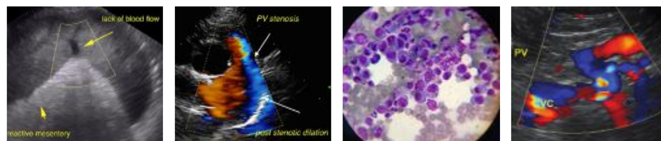
DATE

6/27/23

SonoPath

Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Timmy Lehigh

SPECIES

Feline

BREED

DSH

SEX

M/N

AGE

3 years

WEIGHT

5.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Feline Fine Cat Clinic

REFERRING VET

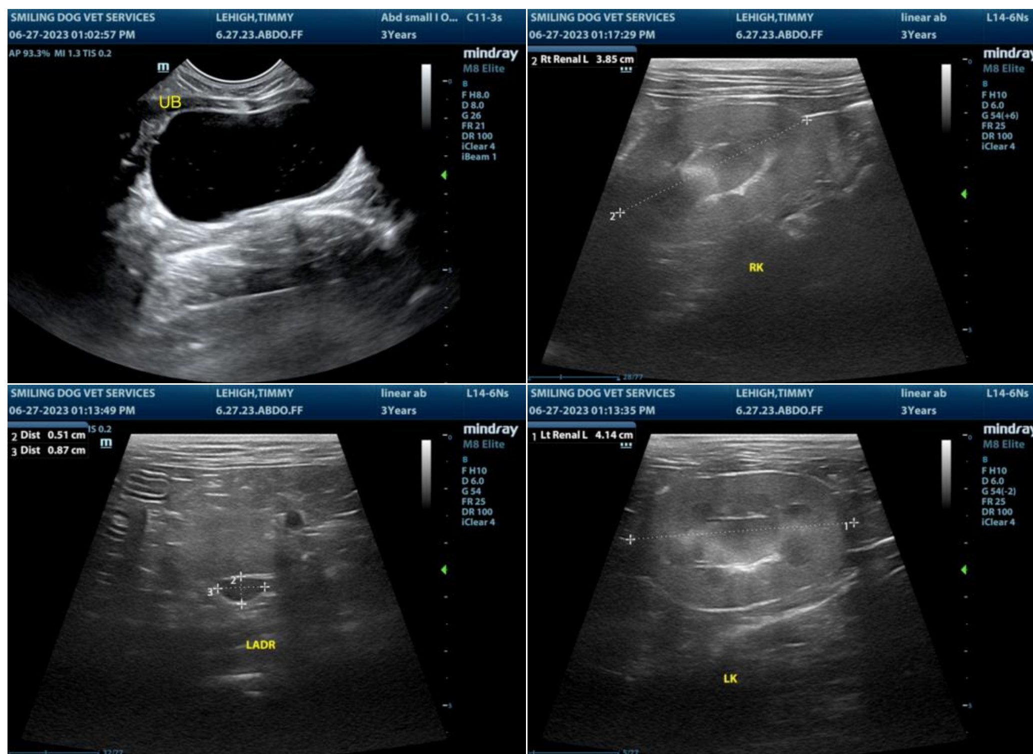
Stephanie Kadasi DVM

INVOICE

17167

DATE

6/27/23



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