



PATIENT

Tucker McKimm

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12.5 years

WEIGHT

11.1 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Miller

HOSPITAL NAME

ACC Flanders

REFERRING VET

Dr. Hallihan

INVOICE

14143

DATE

6/28/22

PRESENTING CLINICAL SIGNS

On and off bloody diarrhea, lost a pound, ravenous but always has been. (Fecal/giardia negative)
Abnormal PE/Chem/CBC/UA Results: Albumin 4.0, Neut 76%, Free T4 43.6

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. 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.

The area of the aortic trifurcation was free of pathology.

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 4.0 cm in length. The right kidney measured 4.5 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size and contour. Pinpoint areas of mineralization were present without capsular distortion or overt tumors. This is an age-related finding and not pathological. The left adrenal gland measured 0.58 width and the right adrenal gland measured 0.60 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.

Liver/ Gallbladder

The liver was normal in size and contour. Hepatic parenchyma exhibited overall normal echogenicity exhibiting mild coarse echotexture. Intermittent, nondisruptive, well-demarcated, uniformly hypoechoic intraparenchymal nodules were present, an example measuring 1.4 cm in diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

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.

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



PATIENT	width measured 0.31 cm. The jejunum wall width measured 0.22 cm. The ileocolic wall width measured 0.45 cm.
Tucker McKimm	
SPECIES	Normal visible colon wall layers were present with subjective formed feces in lumen. The descending colon wall width measured 0.24 cm.
Feline	<i>Pancreas</i>
BREED	The pancreas exhibited normal size with areas of capsule asymmetry. Nonhomogeneous mildly hypoechoic parenchyma and evidence of mild pancreatic duct dilation were present.
DSH	
SEX	<i>Free Abdomen</i>
MN	No omental masses, lymphadenopathy or evidence of peritoneal free fluid was present.
AGE	ULTRASONOGRAPHIC FINDINGS
12.5 years	<ul style="list-style-type: none"> • Mild chronic renal changes • Intermittent nonspecific nondisruptive liver nodules
WEIGHT	<ul style="list-style-type: none"> • Overtly normal gastrointestinal tract, possible low-grade to mild colitis • Suspect chronic active pancreatitis
11.1 lbs.	<ul style="list-style-type: none"> • Bilateral mild adrenal dystrophic mineralization - normal age-related variant in a cat
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The hepatic nodules were nonspecific with potential considerations including areas of nodular / regenerative hyperplasia, hematopoiesis, and small granulomas with neoplastic criteria thought unlikely yet cannot be definitively excluded. Further assessment may include pending hepatic FNA. Sonographic monitoring of the hepatic nodules for evidence of progression pending cytology would be reasonable.
IMAGING PERFORMED BY	Assessment for evidence of cranial abdominal or subxiphoid discomfort on palpation in the area of the pancreas is suggested.
Jessica Miller	
HOSPITAL NAME	Potential for structurally insignificant gastrointestinal disease with potential recurrent mild colitis is possible. Further assessment may include a GI panel to include PLI/TLI/Cobalamin/Folate. Three view chest radiographs are recommended to rule out occult thoracic pathology as a potential contributing factor to the patient's mild weight loss.
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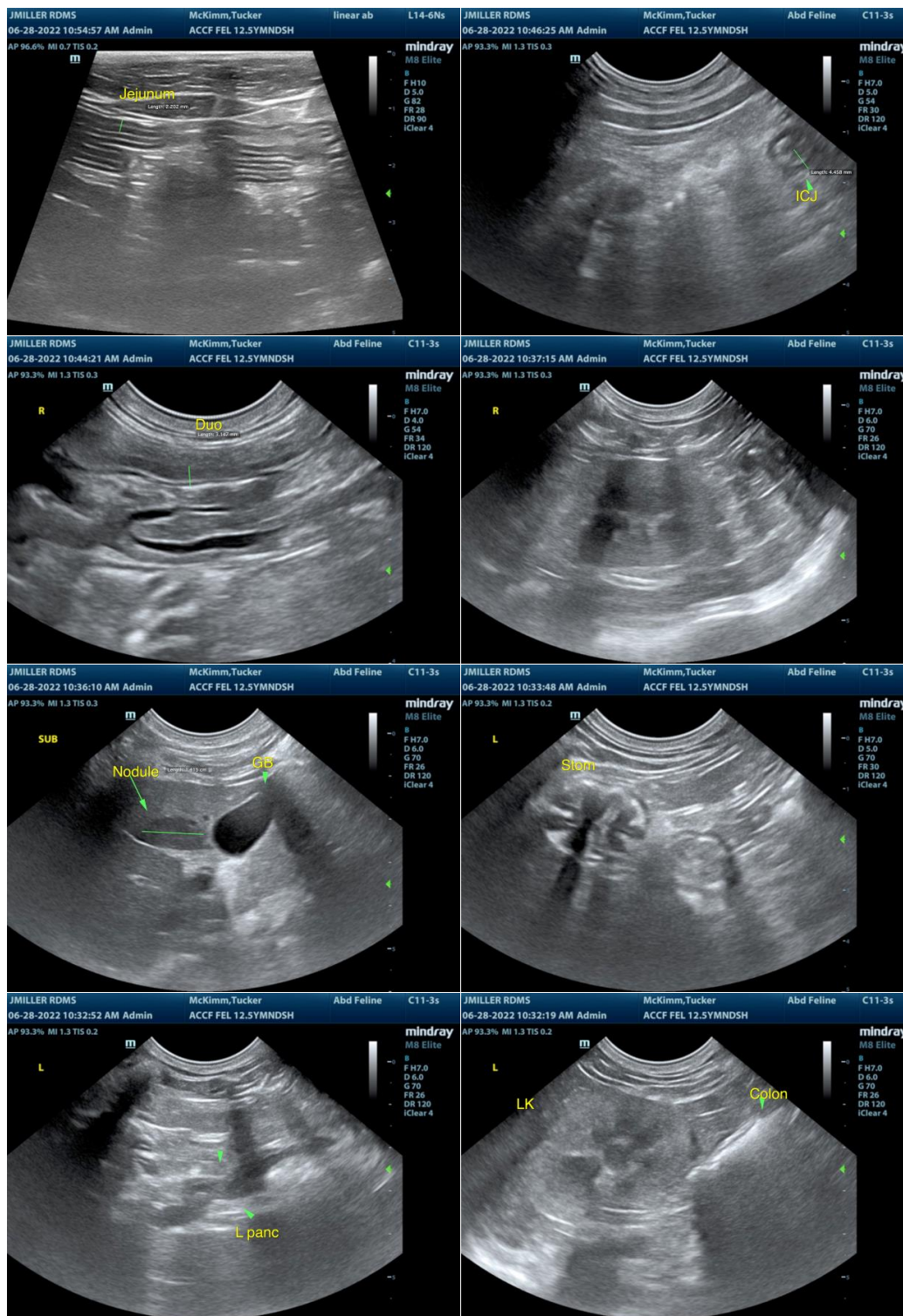
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

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