



PATIENT

Roxy McCall

SPECIES

Feline

BREED

DSH

SEX

F/S

AGE

14 years

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Trae Cutchin

HOSPITAL NAME

Friendship Springs
Veterinary Care

REFERRING VET

Trae Cutchin

INVOICE

17177

DATE

6/28/23

PRESENTING CLINICAL SIGNS

Weight loss. Patient has evidence of allergic dermatitis and CKD, but the changes in both are mild enough that they do not explain weight loss.

Abnormal PE/Chem/CBC/UA Results: BUN is slightly high, USG is low but not isosthenuric. Slight monocytosis, mild eosinophilia.

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.

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 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 3.4 cm in length. The right kidney measured 3.8 cm in length.

Adrenal Glands

The left and right adrenal glands were overtly normal in size, position, and shape. The left adrenal gland measured 0.3 cm width and the right adrenal gland measured 0.3 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.

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.

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	measured 0.25 cm width. The jejunum wall measured 0.23 cm width. The ileocolic wall measured 0.33 cm width.
Roxy McCall	
SPECIES	Normal visible colon wall layers were present with apparent formed fecal matter in lumen.
Feline	Pancreas
BREED	The left pancreatic limb and pancreas base exhibited normal size and capsule symmetry with mildly heterogeneous to hypoechoic pancreatic parenchyma compared to adjacent omentum.
DSH	Free Abdomen
SEX	Focal to intermittent mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example lymph node measured 1.4 cm x 0.42 cm. No omental masses or peritoneal effusion were noted.
F/S	
AGE	
14 years	ULTRASONOGRAPHIC FINDINGS
WEIGHT	<ul style="list-style-type: none"> • Mild chronic renal changes • Structurally unremarkable gastrointestinal tract • Mildly hypoechoic / heterogeneous pancreas • Intermittent mild sonographically benign or mildly reactive mesenteric lymph nodes
9.2 lbs.	
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Sonographically, there was no evidence of overt visceral pathology as a definitive cause or contributing factor to the patient's weight loss.
IMAGING PERFORMED BY	Baseline renal staging to include screening C/S and UPC level, if evidence of proteinuria, may be considered. Assessment for evidence of cranial abdominal or subxiphoid discomfort on palpation, which may allude to low-grade to chronic pancreatitis, is recommended.
Trae Cutchin	A GI panel to include PLI/TLI/Cobalamin/Folate, as well as three view chest radiographs and neurological / musculoskeletal examination, are recommended to assess for or rule out occult disease which may cause weight loss.
HOSPITAL NAME	
Friendship Springs Veterinary Care	
REFERRING VET	There was no evidence of intrabdominal neoplastic criteria.
Trae Cutchin	
INVOICE	
17177	
DATE	
6/28/23	



PATIENT

Roxy McCall

SPECIES

Feline

BREED

DSH

SEX

F/S

AGE

14 years

WEIGHT

9.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Trae Cutchin

HOSPITAL NAME

Friendship Springs
Veterinary Care

REFERRING VET

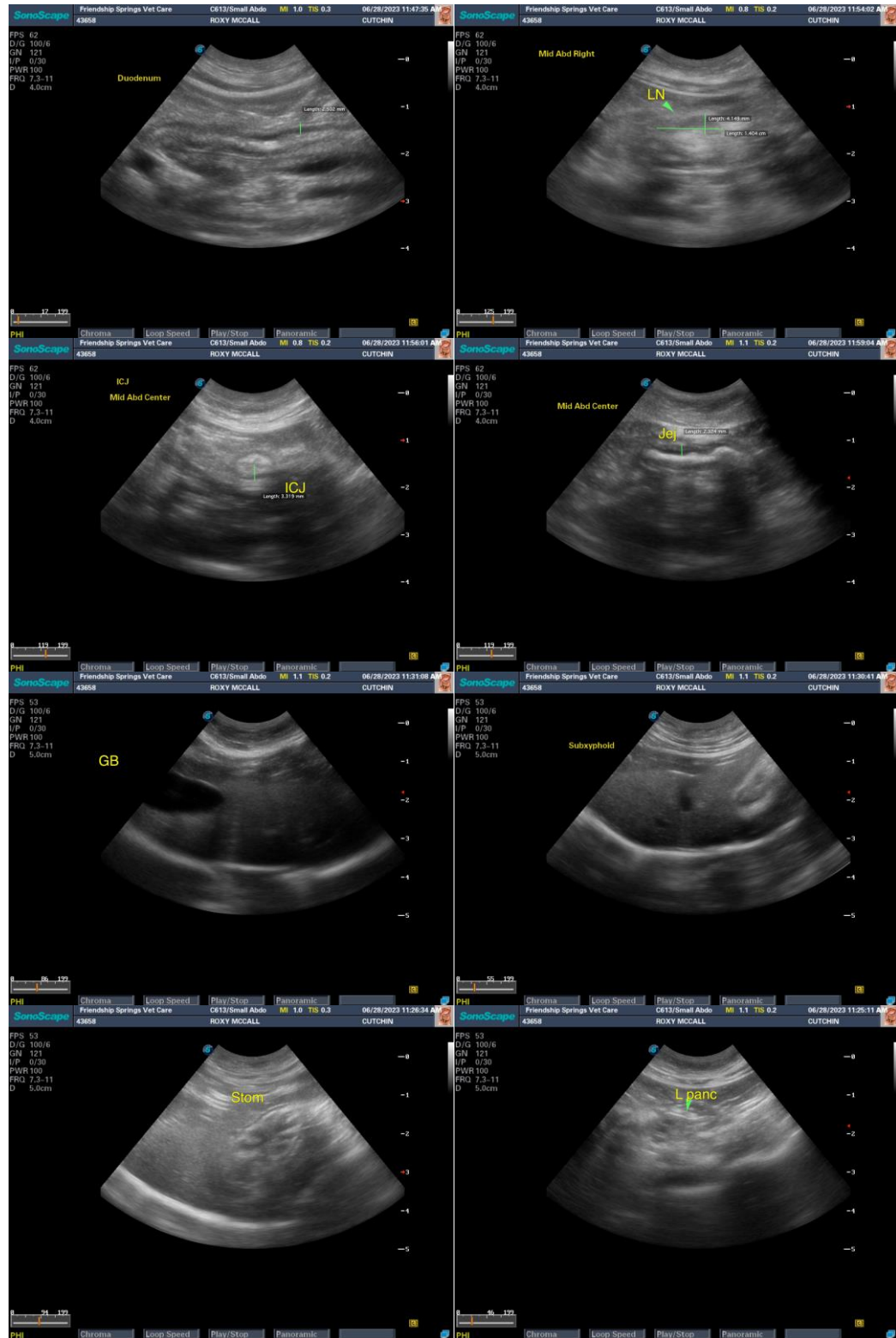
Trae Cutchin

INVOICE

17177

DATE

6/28/23





PATIENT

Roxy McCall

SPECIES

Feline

BREED

DSH

SEX

F/S

AGE

14 years

WEIGHT

9.2 lbs.



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,
DVM, DABVP
(Canine and Feline)

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com

IMAGING PERFORMED BY

Trae Cutchin

HOSPITAL NAME

Friendship Springs
Veterinary Care

REFERRING VET

Trae Cutchin

INVOICE

17177

DATE

6/28/23