



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Emily Carlson
SPECIES History: Chronic vomiting since 6/2021. She was 11.2 lbs in 2021. Given B12 inj and cerenia as needed.
 Abnormal PE/Chem/CBC/UA Results: TLI and PLI normal BW in May /22 normal ALT was high was rechecked 2 weeks later and was normal

Feline ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

DSH 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 were noted. Aortic trifurcation was normal.

SEX

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

AGE

13 Years

Adrenal Glands

WEIGHT

5.8 Pounds

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.30 cm.

INTERPRETED BY

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

Spleen

The spleen exhibited generalized enlargement with mild asymmetrical medial capsule contour. Primarily finely textured homogeneous splenic parenchyma was present. Subtle decreased splenic parenchyma echogenicity was noted. No masses or nodules noted. The spleen measured up to 1.4 cm in width.

IMAGING PERFORMED BY

Kim Liedberg

Liver

The liver was moderately enlarged. The parenchyma of the liver was subjectively increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

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REFERRING VET

Dr Marion, Grayslake
Animal Hosp

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 measured 0.26 cm.

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The small intestine exhibited intact yet segmental to generalized thickened wall layering with some wall layering exhibiting indistinct wall layer detail. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The jejunum wall in the area of the mural thickening measured

DATE

6/29/22



PATIENT

Emily Carlson

up to 0.39 cm in wall width, by comparison, intact wall layering exhibiting maintained 1:3 muscularis to mucosa ratio measured 0.25 cm.

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

SPECIES

Pancreas

Feline

The left limb of the pancreas was normal in size and contour with mild hypoechoic uniform parenchyma compared to adjacent omentum.

BREED

Free Abdomen

DSH

Intermittent, mildly prominent to enlarged 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 of lymph node measured 1.2 cm x 0.33 cm width.

SEX

Spayed Female

Generalized mild hyperechoic mesentery. Small pockets of scant peritoneal free fluid noted.

ULTRASONOGRAPHIC FINDINGS

AGE

13 Years

- Hepatomegaly, exhibiting uniform parenchyma hyperechogenicity

- Splenomegaly

WEIGHT

5.8 Pounds

- Segmentally thickened small bowel, exhibiting segmental altered wall layering

- Mild pancreatitis pattern

- Mild chronic renal changes

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Feline)

- Intermittent mildly prominent mesenteric lymphadenopathy with generalized mild hyperechoic mesentery and scant peritoneal free fluid

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Kim Liedberg

Given the patients weight loss combined with previously elevated ALT and sonographic findings, chronic triad disease or possible multicentric round cell neoplasia, i.e., lymphoma, mast cell neoplasia or other may be considered top differential diagnosis. Correlation with pending hepatosplenic FNA is recommended. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Higher concern for underlying neoplastic process is warranted, although not definitive.

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Empirical therapy for triad disease, which may include prednisolone at 1-2 mg/kg SID, cobalamin supplementation, as needed GI support, novel protein or hydrolyzed diet trial and hepatosupportive medications, if clinically indicated would be reasonable. Guarded prognosis.

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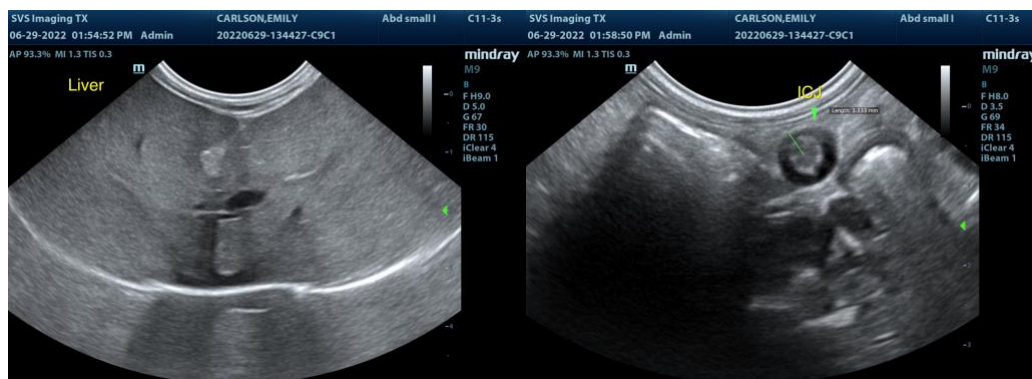
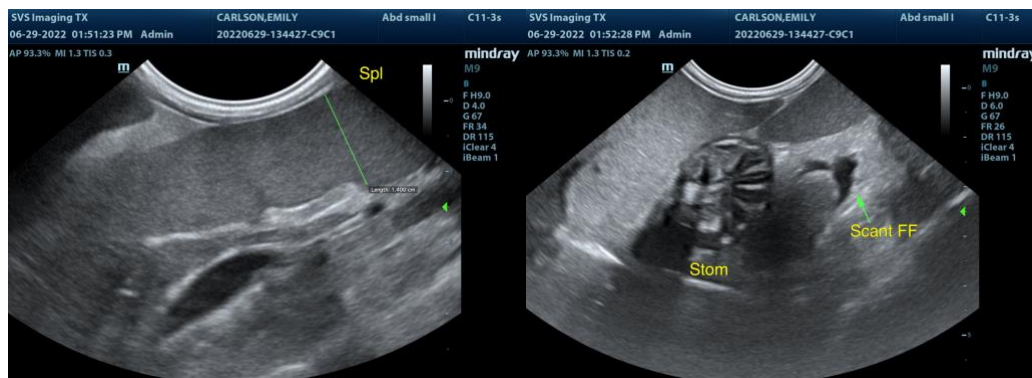
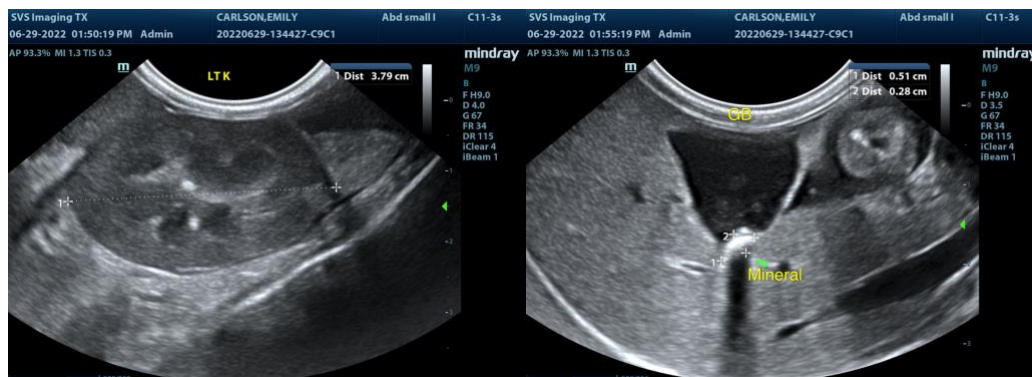
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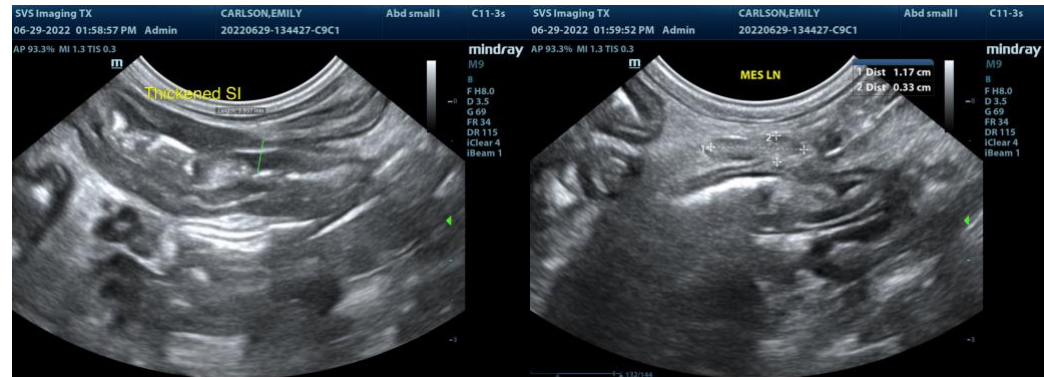
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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