



PATIENT	PRESENTING CLINICAL SIGNS
Lafitte Conway	Lymphoma follow up, pet seems a little nauseas and off today. pet takes Chlorambucil weekly. Doing well otherwise
SPECIES	
Feline	Abnormal PE/Chem/CBC/UA Results: pending today
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
	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 was noted.
SEX	
M/N	
AGE	No evidence of pathology in the area of the aortic trifurcation.
14	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 3.9 cm in length. The right kidney measured 3.8 cm in length.
WEIGHT	
10.3	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left or right adrenal glands were not definitively visualized.
IMAGING PERFORMED BY	Spleen
Dr. Reyes	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. The spleen measured 0.68 cm width.
HOSPITAL NAME	Liver/ Gallbladder
Graceful Paws Pet Clinic	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Focal areas of mild biliary tree mineral were present. The gallbladder was non-distended in size containing primarily anechoic content with mild echogenic gallbladder sediment. A solitary, nonobstructive cholelith was noted in the gallbladder lumen measuring 1.0 cm in diameter. The cystic and common bile ducts were normal.
REFERRING VET	Gastrointestinal
Dr. Reyes	The stomach presented intact sonographically unremarkable wall layering with a normal wall layer ratio. The lumen of the stomach contained variably echogenic, nonshadowing ingesta primarily in the area of the gastric antrum and pylorus without signs of obstruction or foreign material.
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PATIENT	The small intestine presented intact mildly prominent wall layering exhibiting subjective maintained 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The small intestinal wall width measured 0.27 cm.
Lafitte Conway	
SPECIES	Normal visible colon wall layers were present with subjective semi-formed fecal matter.
Feline	<i>Pancreas</i>
BREED	The parenchyma of the left limb of the pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
DSH	
SEX	<i>Free Abdomen</i>
M/N	No overt lymphadenopathy or peritoneal effusion was present.
AGE	ULTRASONOGRAPHIC FINDINGS
14	<ul style="list-style-type: none"> • Normal stomach with mild ingesta • Intact mildly prominent small bowel wall • Mildly heterogeneous left pancreas • Nonobstructive cholelith • Age-related renal changes
WEIGHT	
10.3	
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Largely sonographically unremarkable abdomen with largely geriatric abdomen changes without evidence of recurrent neoplastic criteria.
IMAGING PERFORMED BY	The presence of gastric ingesta is nonspecific and likely indicates post-prandial presentation. Correlation with most recent meal ingestion is recommended. If documented NPO prior to the ultrasound, the presence of gastric ingesta may indicate some degree of gastric hypomotility or metabolic stasis. The sonographic presentation of the ingesta was most consistent with food, without evidence of foreign material.
Dr. Reyes	Potential for mild chronic left limb pancreatitis may be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with pending lab work +/- Spec fPL could be considered.
HOSPITAL NAME	
Graceful Paws Pet Clinic	
REFERRING VET	
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PATIENT

Lafitte Conway

SPECIES

Feline

BREED

DSH

SEX

M/N

AGE

14

WEIGHT

10.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Reyes

HOSPITAL NAME

Graceful Paws Pet
Clinic

REFERRING VET

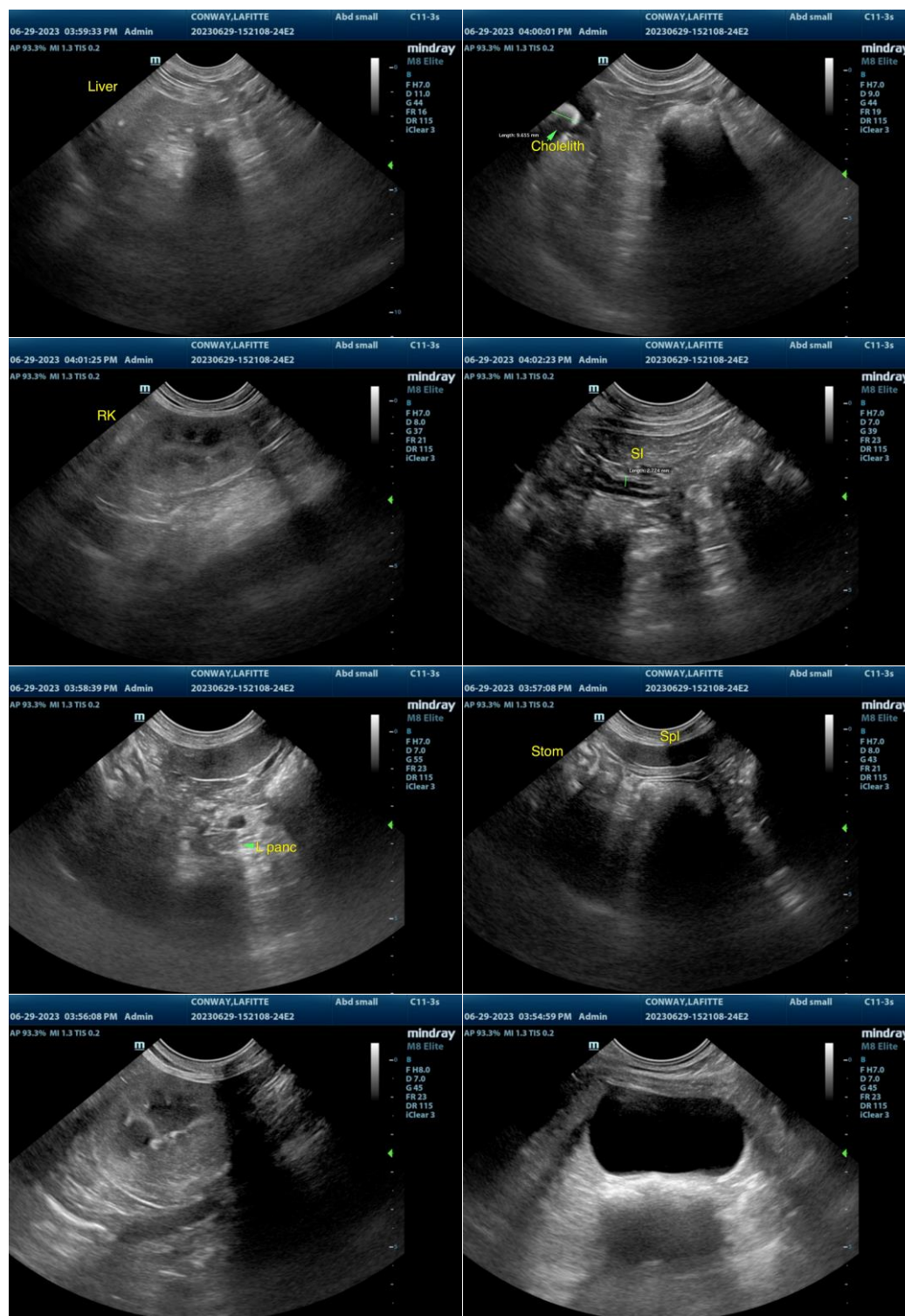
Dr. Reyes

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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.



PATIENT

Lafitte Conway

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.

SPECIES

Feline

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)

info@sonopath.com

BREED

DSH

SEX

M/N

AGE

14

WEIGHT

10.3

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Reyes

HOSPITAL NAME

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