



PATIENT

Thor Asturizaga

SPECIES

Feline

BREED

Siamese

SEX

MN

AGE

1

WEIGHT

9.2

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Sharkaway

HOSPITAL NAME

Kew Gardens AH

REFERRING VET

Dr. Sharkaway

INVOICE

14039

DATE

6/7/22

PRESENTING CLINICAL SIGNS

VOMITING MULTIPLE TIME SINCE YESTERDAY -THE PET IS UNDER TREATMENT OF FIP GS-441524
Abnormal PE/Chem/CBC/UA Results: URINE SPGR-1.035

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 asymmetrical margination were present in the kidneys. Moderate to marked cortical hypertrophy and reduced medullary volume were present. No evidence of pelvic dilation was noted. A hyperechoic corticomedullary band, consistent with a medullary rim sign, was present. The left kidney appeared to be partially encompassed in a thinly-walled cystic structure containing anechoic fluid. A moderately expansive, potentially encapsulated cystic lesion occupying the subjective caudal right kidney containing primarily anechoic fluid exhibiting echogenic changes potentially indicative of concurrent cellular component was present in the right kidney. The left kidney measured 3.8 cm in length. The right kidney measured 4.2 cm in length. The caudal cystic lesion associated with the right kidney measured 3.5 cm in diameter.

Adrenal Glands

The bilateral adrenal glands were not definitively visualized.

Spleen

Although indistinctly visualized, the spleen exhibited potential for generalized enlargement exhibiting asymmetrical capsule contour and mild parenchyma heterogeneity. The spleen potentially measured 1.4 cm in width.

Liver/ Gallbladder

The liver was subjectively normal to potentially mild increased in size with normal 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. 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 yet potential mild prominent wall layering with mild retained variably echogenic to focally shadowing ingesta and chyme. The gastric body wall width measured 0.28 cm. The pylorus wall width measured 0.30 cm.



PATIENT	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 small intestinal wall width measured 0.23 cm.
Thor Asturizaga	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Feline	Pancreas
BREED	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.
Siamese	
SEX	Free Abdomen
MN	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 of a lymph node measured 1.4 cm x 0.64 cm. Small pockets of scant peritoneal free fluid were present.
AGE	
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WEIGHT	ULTRASONOGRAPHIC FINDINGS
9.2	<ul style="list-style-type: none"> • Left kidney chronic nephropathy exhibiting previously noted medullary rim sign, probable concurrent left kidney perinephric pseudocyst • Right kidney chronic nephropathy exhibiting previously noted medullary rim sign with nonspecific, mildly expansive, caudal cystic lesion - complex renal cyst, potential for necrosis renal abscess or other • Potential enlarged asymmetrical spleen • Hepatic parenchymal remodeling • Nonspecific focally shadowing gastric ingesta, overtly normal small bowel • Intermittent subjective benign / reactive mesenteric lymphadenopathy and intermittent small pocket of scant peritoneal free fluid
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Assuming normal clotting status, ultrasound-guided FNA of the right kidney cystic lesion for fluid analysis cytology +/- C/S if evidence of inflammatory cells is recommended. Concurrent ultrasound-guided splenic FNA using a 25-gauge needle could be considered primarily to ensure only benign changes are present.
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14039	The retained to focally shadowing gastric ingesta was nonspecific and may correlate with recent meal ingestion. However, given the patient's reported vomiting, some degree of gastric stasis is suspected while the possibility of a small amount of nonobstructive gastric foreign material or hair density could be possible. Monitoring for evidence of gastric emptying is recommended.
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6/7/22	Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Sonographic monitoring of the bilateral kidneys is recommended.



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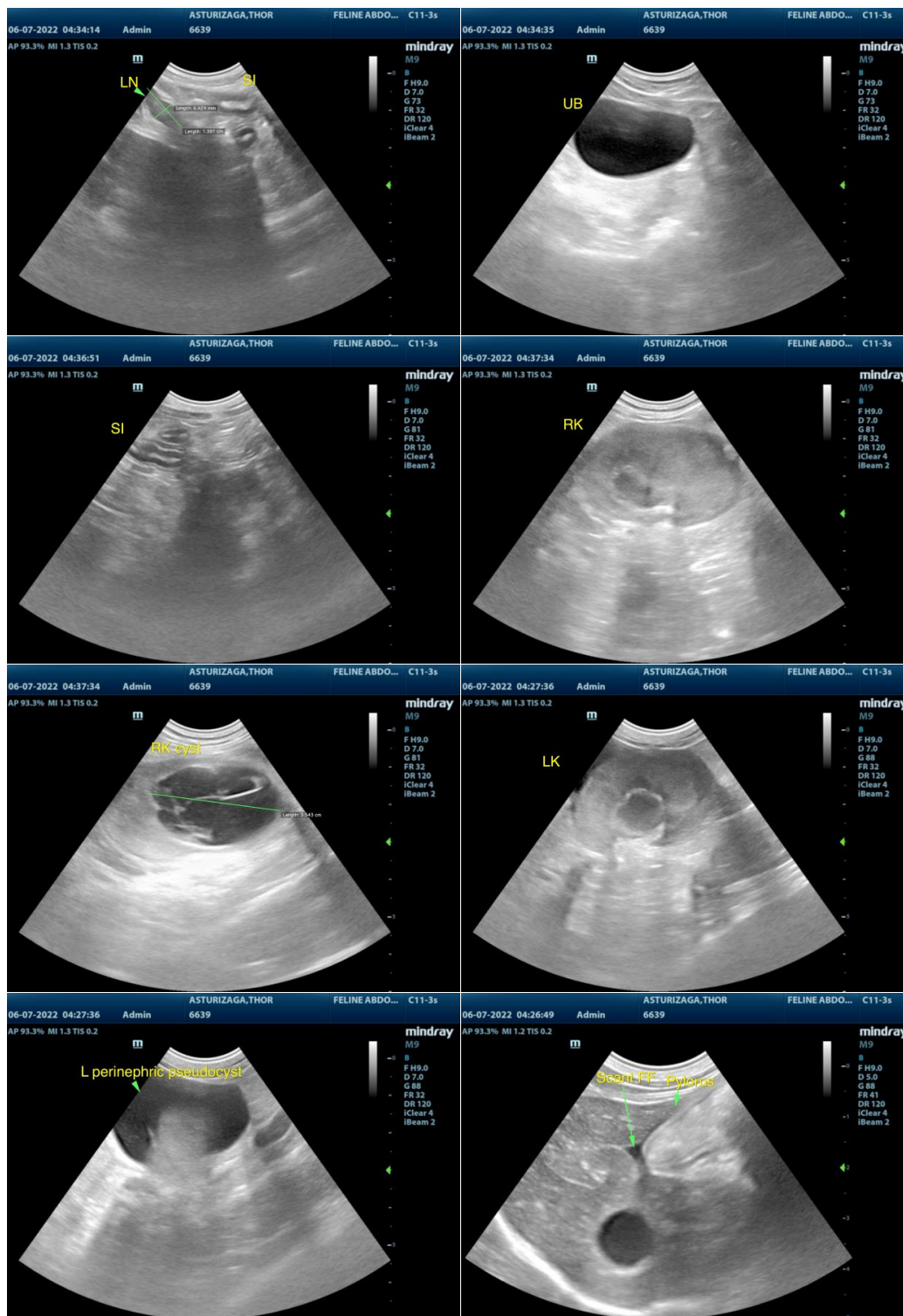
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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