



PATIENT PRESENTING CLINICAL SIGNS

Wendy Paws N Tails
Rescue

History: persistent fever, anorexia

Abnormal PE/Chem/CBC/UA Results: please see attached BLADDER WALL

SPECIES

Feline

6/8/22: CBC hematocrit 0.21. WBC 12.80. Albumin 19.0. Globulin 32. FeLV/FIV negative. Previous lab-work dated 5/18/22 revealed mild hyperglobulinemia with albumin: globulin ratio 0.40 (<0.80).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DSH

Urinary System

The urinary bladder is mild to sub-normal in size yet presents overall normal structure and tone. Mild 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.

SEX

Spayed Female

Aortic trifurcation was normal.

AGE

3 Years

Both kidneys were mildly swollen in appearance with maintained symmetrical capsular contour. A normal 1:3 cortex / medulla ratio and decreased corticomedullary echogenicity. There was no evidence of pyelectasia. There was potential, subtle evidence of left and right retroperitoneal inflammation. The left kidney measured 4.20 cm in length. The right kidney measured 4.00 cm in length.

WEIGHT

8 Pounds

Adrenal Glands

No overt pathology in the area of the left and right adrenal glands.

Spleen

The spleen presented normal in size and contour (0.67 cm), primarily finely textured and homogenous parenchyma with subjective mild, decreased splenic parenchymal echogenicity. There was potential for mild splenic volume contraction.

Liver

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. There was no evidence of post-hepatic stasis.

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Paws and Tails Rescue

The gallbladder was non-distended in size with thin walls mild nonmineralized luminal debris, nonspecific, yet potentially secondary to anorexia/fasting. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Beech

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 0.27 cm.

INVOICE

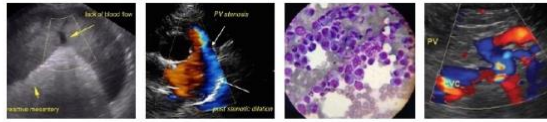
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The small intestine exhibited minor subtle areas of corrugation and minor nonobstructive areas of ileus. The small intestinal wall measured 0.25 cm.

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

DATE

6/9/22



PATIENT *Pancreas*

Wendy Paws N Tails
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The left pancreatic limb presented normal in size and contour with uniform hypoechoic parenchyma compared to adjacent omentum. This may indicate mild, active inflammation or edematous change.

SPECIES *Free Abdomen*

Feline

Generalized hypoechoic mesentery noted with small pockets of mild peritoneal free fluid.

Other

BREED

DSH

A transdiaphragmatic view of the caudal thorax revealed subjective mild concurrent pleural free fluid.

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Mild swollen to hypoechoic kidneys
- Nonspecific inflammatory gastroenteropathy pattern
- Scant to slight peritoneal free fluid and generalized hypoechoic mesentery
- Mildly prominent to hypoechoic left pancreas
- Concurrent, subjectively mild pleural free fluid

AGE

3 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

8 Pounds

Although not definitive, the abdominal presentation is strongly concerning for FIP or potential lymphoma. A nonspecific intra-abdominal inflammation or generalized inflammatory/infectious disease process could also be possible.

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DABVP (Canine and
Feline)

Infectious disease serology, if not already performed, may be considered, assuming a normal clotting status. Collection of either peritoneal or pleural free fluid for effusion analysis, cytology, +/- culture and sensitivity is recommended, if evidence of inflammatory cells, is suggested. Likewise, assuming normal clotting status, and ultrasound-guided FNA of either renal cortex, using a 25-gauge needle, would be warranted to assess for evidence of neoplastic or granulomatous criteria.

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Paws and Tails Rescue

REFERRING VET

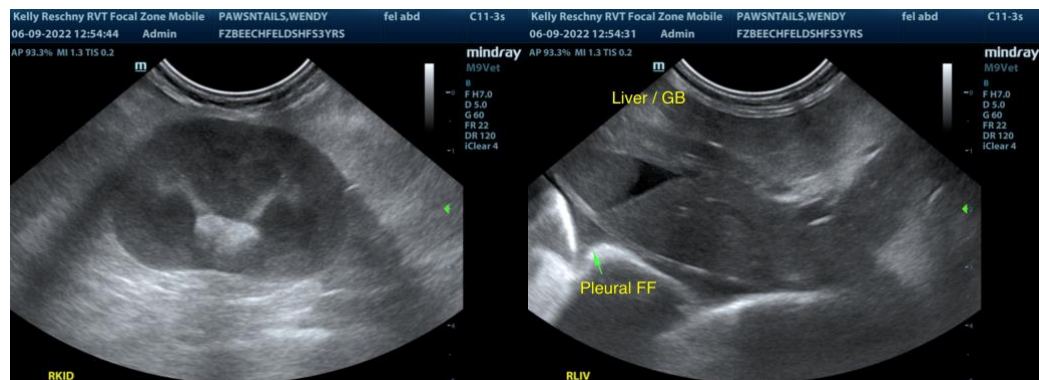
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PATIENT

Wendy Paws N Tails
Rescue

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

3 Years

WEIGHT

8 Pounds

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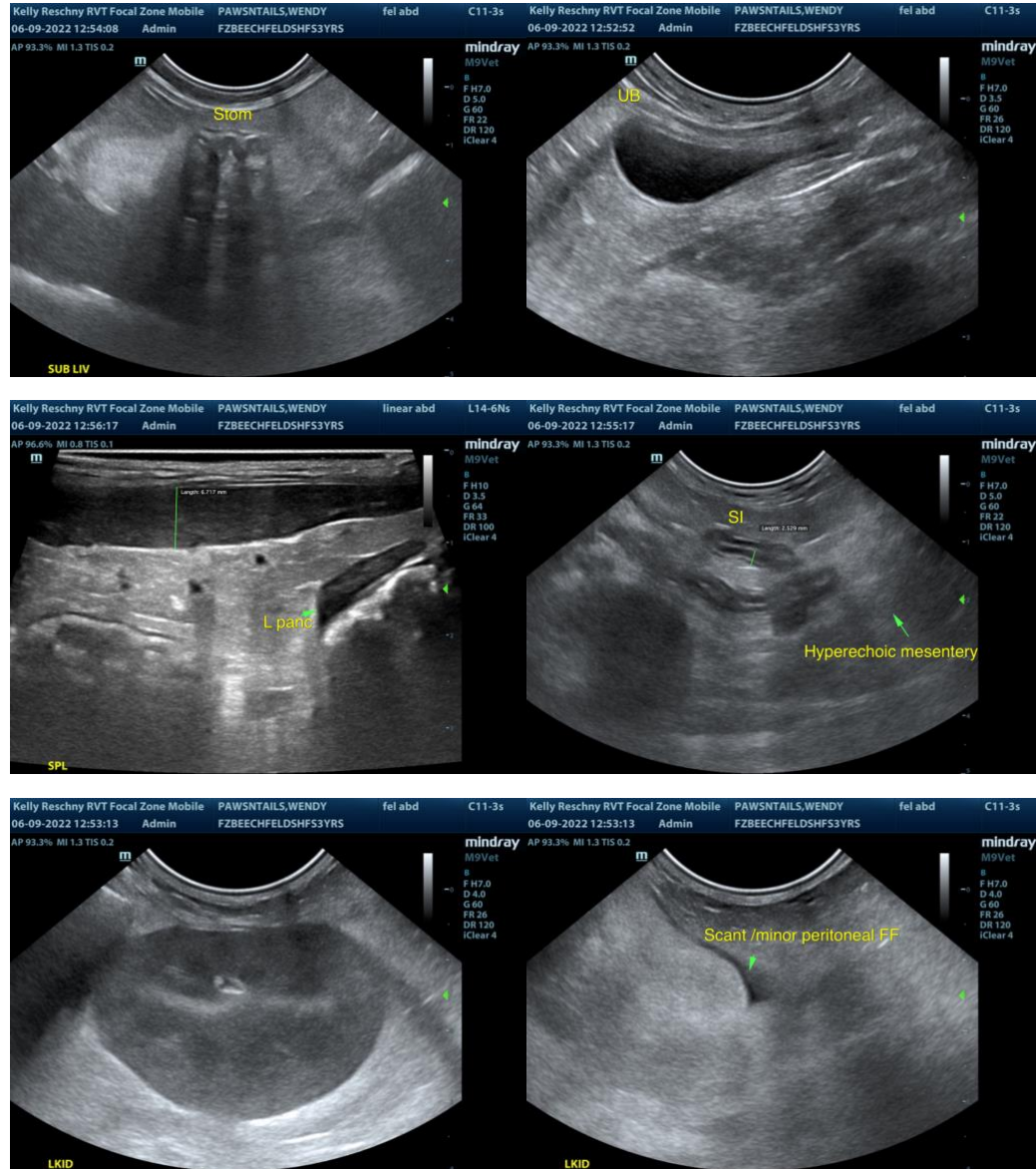
Dr. Beech

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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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