



PATIENT PRESENTING CLINICAL SIGNS

Bobo Furukawa

Reason for Visit: swallowed a ribbon History: Swallowed a ribbon yesterday. Vomited up food and the ribbon. Has been acting normal, eating, and keeping food down and great appetite.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: N Oral Cavity: mild calculus and gingivitis Lymph Nodes: N Skin: N CV/Respiratory: N Abd/GI: No pain, not taut/tensed Uro/Perineum: N Musculoskeletal: N Neurological: N

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Spayed Female

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

AGE

9y

The area of the aortic trifurcation was free of pathology.

WEIGHT

13.12 lbs

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 3.6 cm in length. The right kidney measured 3.8 cm in length.

INTERPRETED BY

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

Adrenal Glands

The areas of the left and right adrenal glands were free of pathology.

IMAGING PERFORMED BY

Michaleen

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.

HOSPITAL NAME

DPC Veterinary
Hospital

Liver/ Gallbladder

REFERRING VET

Dr. Weekes

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.

INVOICE

10321

Gastrointestinal

DATE

7/14/2023

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta fluid or foreign material.

The small intestine presented generalized intact mildly thickened wall layering owing to generalized propensity for mild thickened muscularis layer. The small intestinal wall measured up to 0.30 cm. The ileocolic wall measures 0.40 cm. The lumen of the small intestine exhibited generalized empty lumen without evidence of mechanical/metabolic ileus, or evidence of intestinal foreign material.

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



PATIENT

Bobo Furukawa

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9y

WEIGHT

13.12 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Michaleen

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Weekes

INVOICE

10321

DATE

7/14/2023

Pancreas

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Empty gastrointestinal tract with mildly thickened, yet intact small bowel walls.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gastrointestinal obstructed pattern or foreign material. Although for potential patient variant, the small intestine exhibited mild mural changes which may suggest inflammatory or less likely emerging to low-grade neoplastic infiltrative enteropathy criteria. However, given no reported current clinical signs i.e., vomiting, weightloss, etc. the small intestinal presentation is of unclear clinical significance. Monitoring for evidence of gastrointestinal signs and weight loss going forward with the potential for sonographic reassessment of gastrointestinal tract is recommended.





PATIENT

Bobo Furukawa

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9y

WEIGHT

13.12 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Michaleen

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

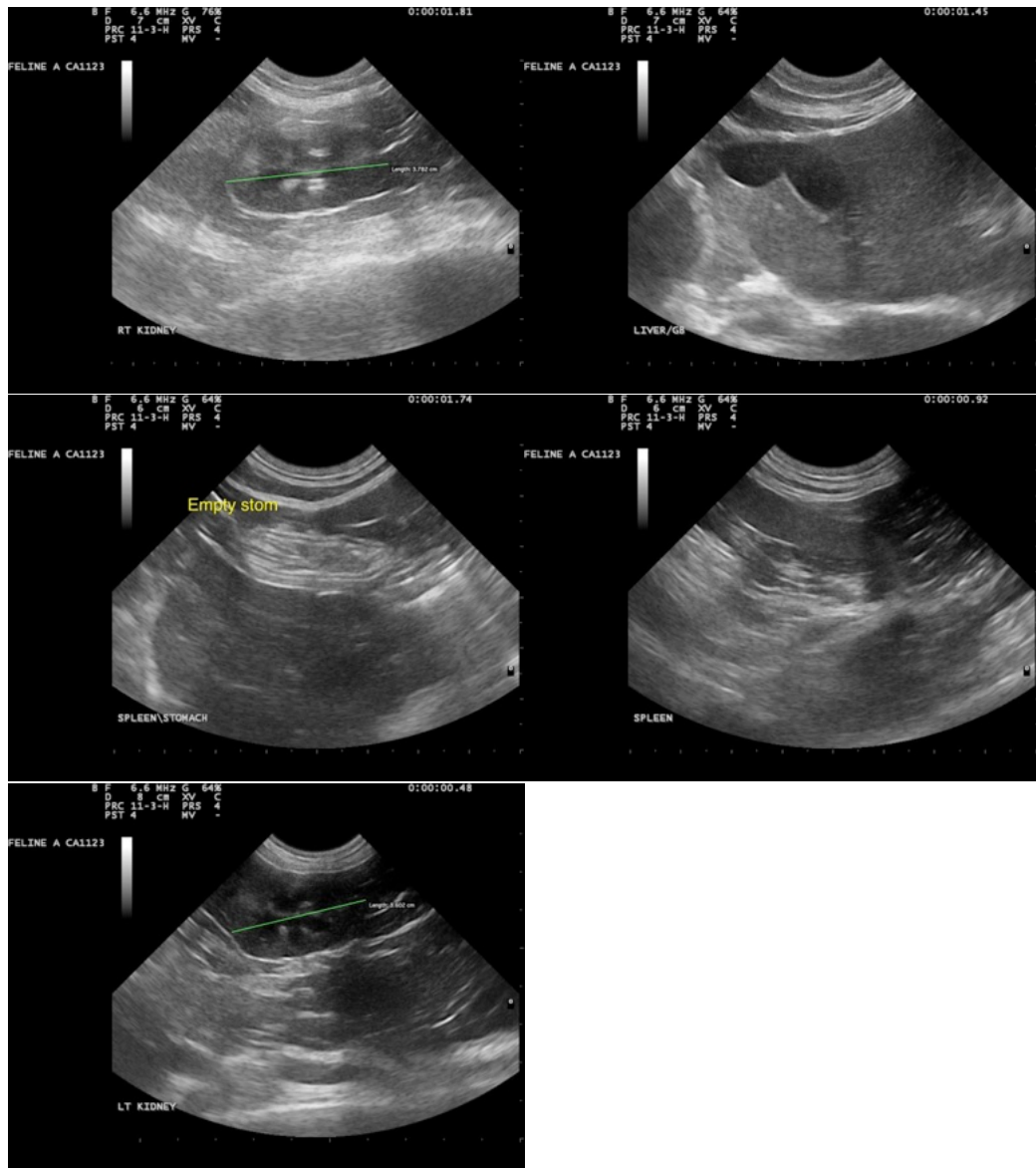
Dr. Weekes

INVOICE

10321

DATE

7/14/2023



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