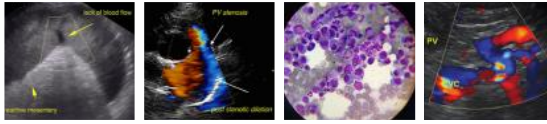




PATIENT	PRESENTING CLINICAL SIGNS
Foxy Brown Rose	BAR, tolerant of exam and vaccines Normal hydration H/L: WNL, purring MCS: normal Gingivitis grade 1/3 Tartar grade 1/4
SPECIES	Abnormal PE/Chem/CBC/UA Results: 4/8/2023 Superchem - ^BUN 38, Cre 1.6 CBC - WNL T4 - WNL 1.0 UA - USG 1.019 6/30/2023 Adult Chem - ^BUN 44, Cre 2.1, ^SDMA 21.0 (previously ^BUN 38, CRE 1.6, SDMA 13.1) CBC - WNL U/A - USG 1.017, no proteinuria Average systolic BP - 144 Current Medications n/a Radiographic Findings soft tissue mass in the cranial ventral abdomen
Feline	
BREED	
DMH	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
SEX	Urinary System
FS	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.
AGE	The area of the aortic trifurcation was free of pathology.
12 years	
WEIGHT	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 3.7 cm in length. The right kidney measured 3.8 cm in length.
10.8 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left and right adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm width and the right adrenal gland measured 0.41 cm width.
IMAGING PERFORMED BY	Spleen
Sara Hansen	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 0.84 cm width at the level of the mid-spleen.
HOSPITAL NAME	Liver/ Gallbladder
West Salem AC	The liver was enlarged in size primarily owing to mildly expansive, nonhomogeneous, cystic mass in the area of the ventral caudal liver extending past the level of the gastric axis measuring ~5.5 cm diameter. Mild generalized hepatic parenchymal remodeling was present with concurrent separate, nondisruptive, nonhomogeneous, intraparenchymal cystic-appearing hepatic nodules with an example measuring 1.0 cm diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Crane	
INVOICE	
17318	
DATE	
7/20/23	



PATIENT

Foxy Brown Rose

SPECIES

Feline

BREED

DMH

SEX

FS

AGE

12 years

WEIGHT

10.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Salem AC

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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 width measured 0.24 cm.

The small intestine presented intact generalized wall layering with propensity for mildly prominent generalized intestinal muscularis layer to the level of the colon. The small intestinal wall width measured up to 0.30 cm width.

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

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

- Liver ventral caudal nonhomogeneous cystic mass with concurrent intermittent cystic intraparenchymal nodules
- Mild chronic renal changes
- Intact, subjective borderline to mild prominent small bowel walls

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonographically, the cystic ventral caudal liver mass and concurrent similar appearing intraparenchymal nodules are suggestive of benign biliary cystadenomas commonly seen in older cats. Biliary cystadenocarcinoma or other cystic-appearing hepatic mass and nodules cannot be definitively excluded. FNA cytology of the cystic liver mass could be considered for further clarification yet may be unrewarding. Sonographic monitoring of the liver for evidence of progressive cystic mass and nodules would be reasonable.

The small intestine exhibited subtle mural changes which, although nonspecific and potential for patient variant given the lack of reported gastrointestinal signs or weight loss, may possibly indicate emerging enteropathy. Monitoring for gastrointestinal signs and/or weight loss going forward is suggested. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.



PATIENT

Foxy Brown Rose

SPECIES

Feline

BREED

DMH

SEX

FS

AGE

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WEIGHT

10.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Salem AC

REFERRING VET

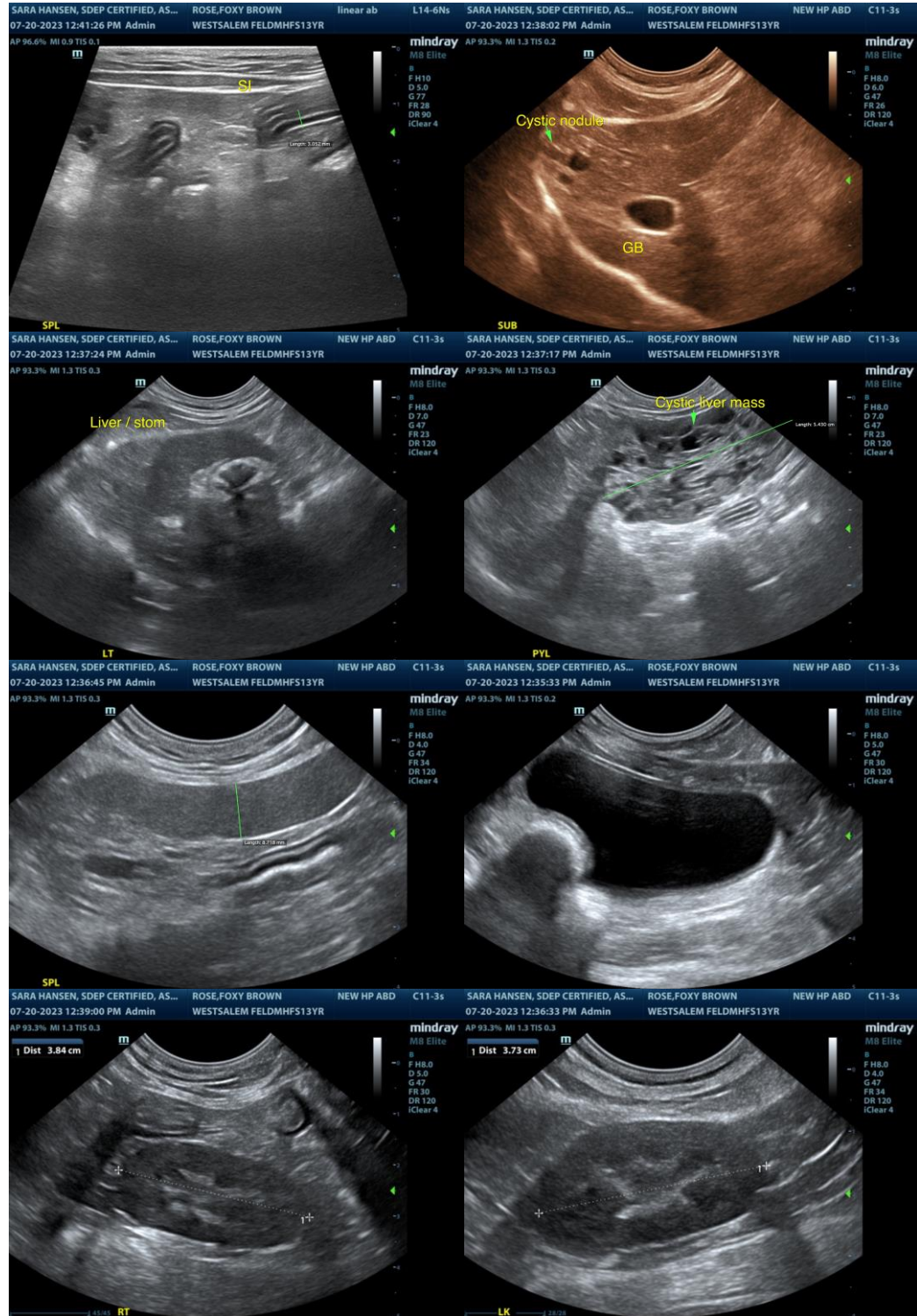
Dr. Crane

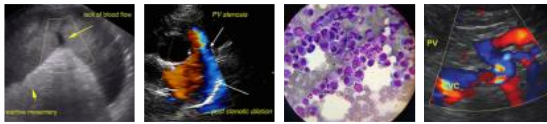
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DATE

7/20/23





PATIENT

Foxy Brown Rose

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.

SPECIES

Feline

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.

BREED

DMH

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

SEX

FS

AGE

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WEIGHT

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