



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Queen Graf	History: Acute onset of nausea, lethargy, inappetance
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: Mild dehydration, overweight, increased values PCV 57%, bun 126, crea 11.4, phos 13.4, TP 9.8, globulin 6.3. Normal values alb3.6, potassium 4.3, glucose 148. Low values chloride 102, sodium 135, alpk 10. UA - USG 1.010, glucose +, sediment is inactive, no crystals or casts. Radiographs are unrevealing. Kidneys are clearly seen due to large amount of retroperitoneal fat and appear to be 2.5x L2 and of normal shape.
Feline	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
DSH	<b>Urinary System</b>
<b>SEX</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 were noted.
FS	
<b>AGE</b>	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio with a mildly indistinct corticomedullary border demarcation was noted. 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 4.4 cm in length. The right kidney measured 4.3 cm in length. No evidence of renal neoplastic criteria was noted.
3 yr	
<b>WEIGHT</b>	The area of the aortic trifurcation was free of pathology.
12.2	<b>Adrenal Glands</b>
<b>INTERPRETED BY</b>	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.41 cm width.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<b>Spleen</b>
<b>IMAGING PERFORMED BY</b>	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 0.91 cm in width at the level of the hilus.
Trae Cutchin	<b>Liver</b>
<b>HOSPITAL NAME</b>	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.
Friendship Springs Veterinary Care	<b>Gastrointestinal</b>
<b>REFERRING VET</b>	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.
Trae Cutchin	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.
<b>INVOICE</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
11213ag	
<b>DATE</b>	
07/27/2022	



**PATIENT**

**Pancreas**

Queen Graf

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 was evident.

**SPECIES**

Feline

**Free Abdomen**

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

DSH

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

FS

- Overtly normal bilateral kidneys-suspect renal failure presentation
- Sonographically unremarkable GI tract

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

3 yr

No sonographic evidence of significant renal pathology was evidence on this scan. Consider potential renal toxicity, infectious disease or other causes of acute renal failure. The kidneys did not appear to be end stage however the prognosis is likely dependent on renal response to diuresis protocol with monitoring of urine output and body weight.

**WEIGHT**

12.2

No other evidence of intra-abdominal visceral pathology was present.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Trae Cutchin

**HOSPITAL NAME**

Friendship Springs  
Veterinary Care

**REFERRING VET**

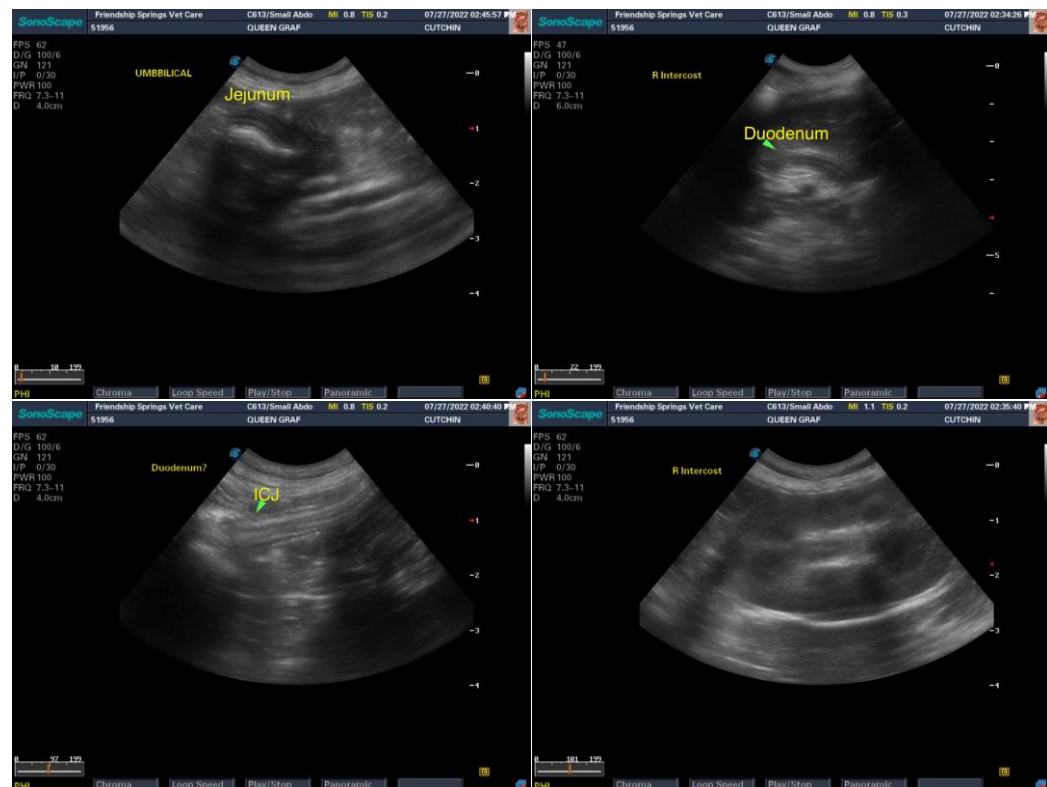
Trae Cutchin

**INVOICE**

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**PATIENT**

Queen Graf

**SPECIES**

Feline

**BREED**

DSH

**SEX**

FS

**AGE**

3 yr

**WEIGHT**

12.2

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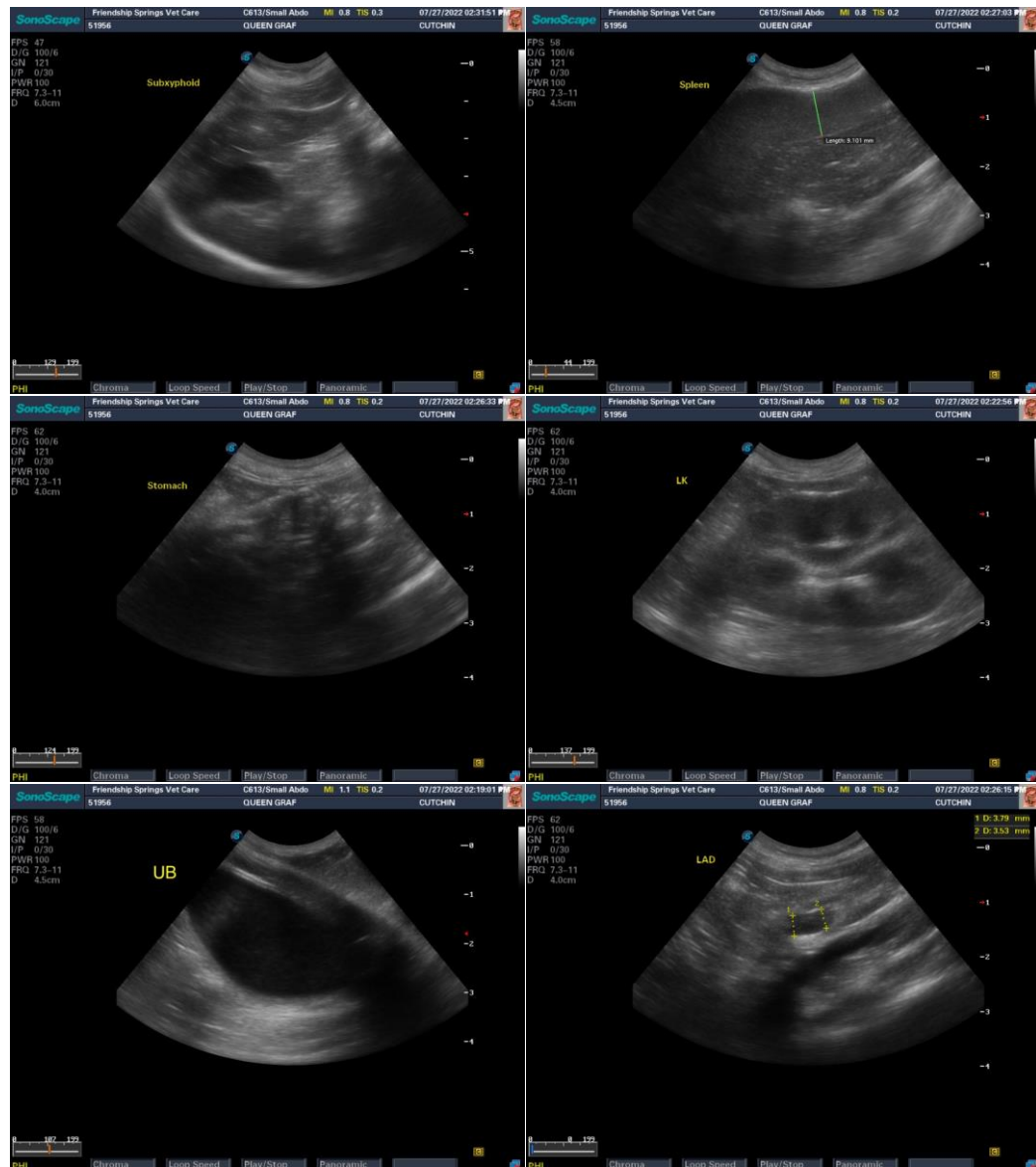
Trae Cutchin

**INVOICE**

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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)

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