



PATIENT

Cashmere Van Auken

SPECIES

Feline

BREED

Persian Mix

SEX

FS

AGE

3yr

WEIGHT

2.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Wendy Turner

HOSPITAL NAME

Pennsauken Animal
Hospital and Urgent
Care

REFERRING VET

Wendy Turner

INVOICE

11248ag

DATE

08/01/2022

PRESENTING CLINICAL SIGNS

History: Weight loss x 3 months, with diarrhea first 2 months. Hiding 1 week.

Abnormal PE/Chem/CBC/UA Results: II/VI pansystolic murmur with gross cardiomegaly on CXR. Ca++ 11.7 (7.8-11.3), all else WNL. BW and radiology report are attached. Na/K ratio 42, hepatic and renal parameters wnl, ALB 3.4, CBC wnl

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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 3.3 cm in length. The right kidney measured 3.6 cm in length.

The area of the aortic trifurcation was free of pathology. No evidence of pathology in the area of the iliac trifurcation.

Adrenal Glands

The bilateral adrenal glands were normal in size and contour. Pinpoint to mild focal areas of mineralization were present without capsular distortion or overt tumors. This is an incidental finding and not pathological. The left adrenal gland measured 0.34 width and the right adrenal gland measured 0.32 width.

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. The spleen measured 0.69 cm in width at the level of the hilus.

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. 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 wall layering with a normal wall layer ratio. The lumen of the stomach contained minor retained pyloric fluid with no signs of ileus, obstruction or foreign material. The ventral gastric body wall measured 0.25 cm in width.



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| 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 duodenum wall measured 0.26 cm in width. The jejunum wall measured 0.21 cm in width. |
| Cashmere Van Auken | |
| SPECIES | Normal visible colon wall layers were present with apparent formed feces in lumen. |
| Feline | Pancreas |
| | The left pancreas exhibited subtle subjective prominent size, symmetrical capsule contour with mildly nonhomogeneous to hypoechoic parenchyma. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident. |
| BREED | Free Abdomen |
| Persian Mix | No omental masses, overt lymphadenopathy or peritoneal effusion was present. |
| SEX | ULTRASONOGRAPHIC FINDINGS |
| FS | <ul style="list-style-type: none">• Overtly normal GI tract with minor anechoic pyloric fluid• Pinpoint to minor focal adrenal dystrophic mineral-incident• Mildly prominent left pancreas-potential mild pancreatitis vs patient variant |
| AGE | INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS |
| 3yr | Overall, no evidence of significant abdominal visceral pathology was present in this study. No overt neoplastic criteria, lymphadenopathy or significant GI mural changes were observed as an obvious cause of the patient's signs. Dietary indiscretion, occult parasitism, structurally insignificant inflammatory bowel of mild pancreatitis are all potentials. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. |
| WEIGHT | Correlation with pending hepatosplenic FNA is recommended although no evidence of obvious hepatosplenic neoplastic criteria was noted. |
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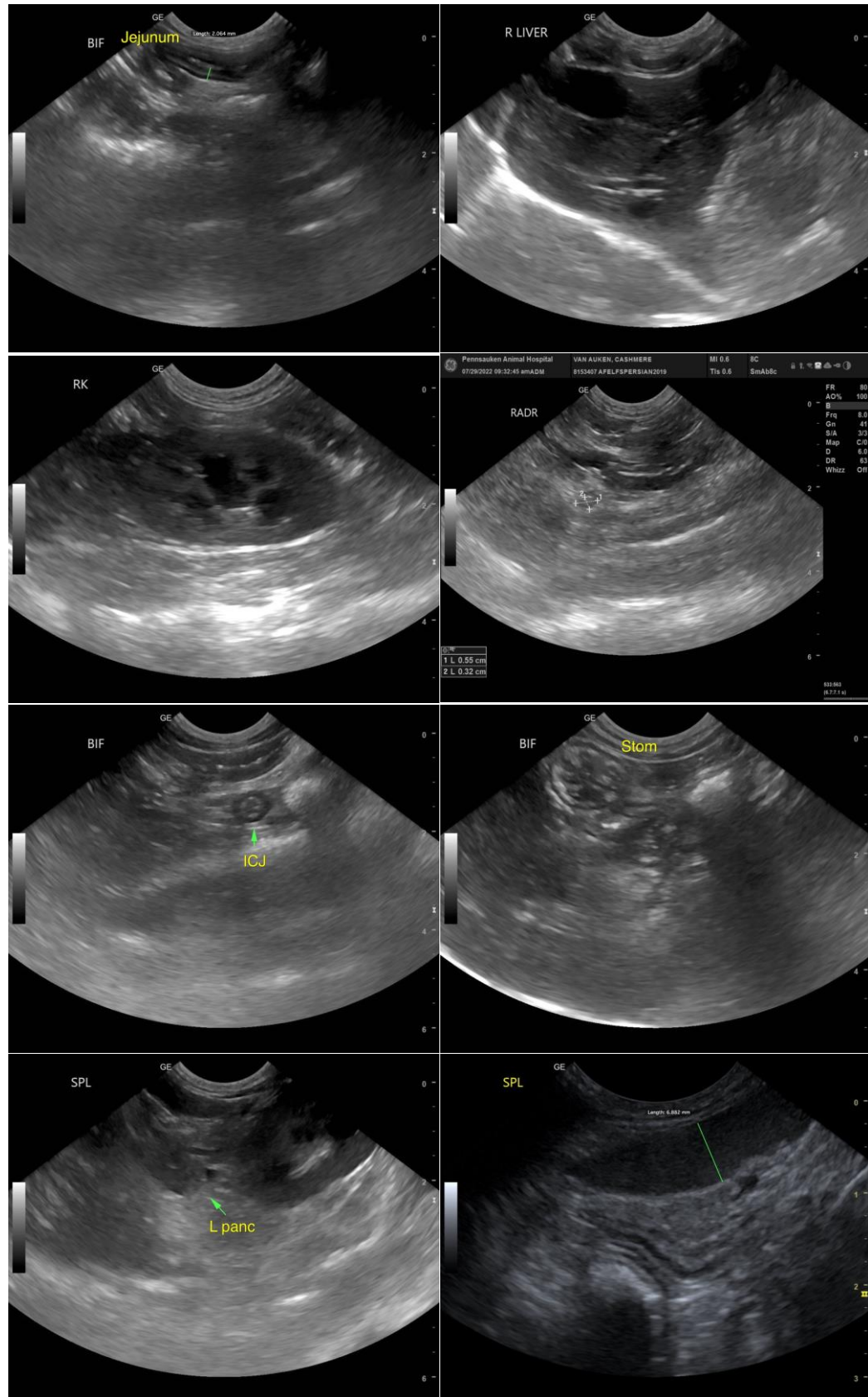
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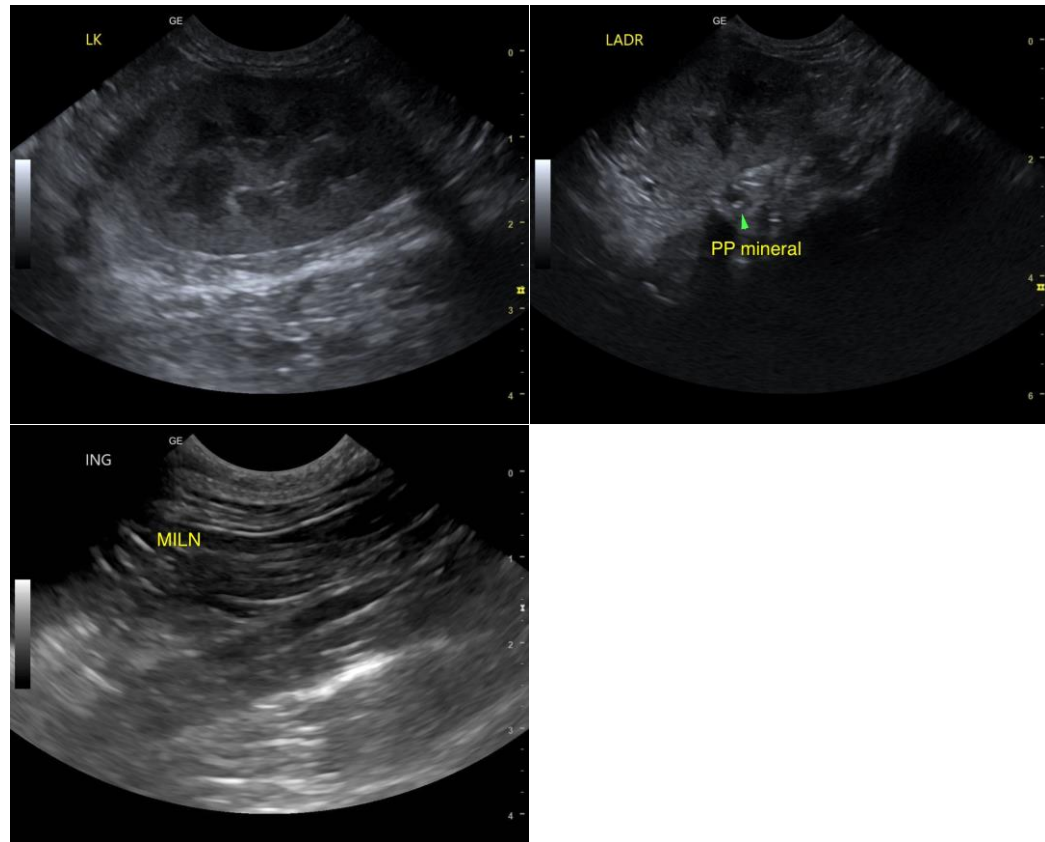
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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