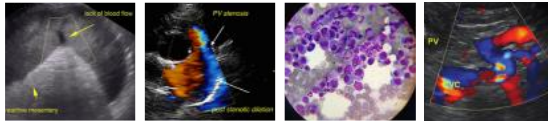




PATIENT	PRESENTING CLINICAL SIGNS
Dodger Alexander	very thin muscle mass Abnormal PE/Chem/CBC/UA Results: Anemia- non-regenerative Abdomen unremarkable Current Medications none
SPECIES	
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	The urinary bladder, trigone, cystourethral 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.
SEX	
MN	The area of the aortic trifurcation was free of pathology.
AGE	
11 years	Normal renal size with asymmetrical margination were present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The left kidney measured 5.3 cm in length. The right kidney measured 4.6 cm in length.
WEIGHT	
7.94 lbs	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 cm width.
IMAGING PERFORMED BY	Spleen
Sara Hansen	The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.
HOSPITAL NAME	Liver/ Gallbladder
Companion Pet Clinic	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.
REFERRING VET	
Dr. Mills	
INVOICE	
14574	
DATE	
8/11/22	Transdiaphragmatic view revealed a mild comet tail lung pattern, which is echogenic sound wave interface with microconsolidations within the caudal lung field. The lung field should not be visualized by sonogram unless pathology is present. Chest radiographs are recommended to rule out



PATIENT	alveolar/lung disease such as neoplasia, thromboembolic disease, chronic inflammatory disease with microconsolidation.
Dodger Alexander	
SPECIES	<i>Gastrointestinal</i>
Feline	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 0.25 cm.
BREED	<i>Pancreas</i>
DSH	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 0.30 cm width. The jejunum wall measured 0.23 cm width. No overt pathology was noted in the area of the ileocolic junction.
SEX	<i>Free Abdomen</i>
MN	Normal visible colon wall layers were present with apparent formed feces in lumen.
AGE	
11 years	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.
WEIGHT	
7.94 lbs	
INTERPRETED BY	No omental masses, lymphadenopathy, or peritoneal effusion were noted.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Sara Hansen	<ul style="list-style-type: none"> • Bilateral moderate chronic renal changes / chronic interstitial nephrosis • Mild nonspecific transdiaphragmatic comet tail artifact • Overtly normal gastrointestinal tract
HOSPITAL NAME	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
Companion Pet Clinic	The appearance of the bilateral kidneys was consistent with nonspecific chronic renal changes. Potential for emerging renal neoplastic criteria is considered a less likely differential diagnosis. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Assessment of systemic BP is suggested.
REFERRING VET	
Dr. Mills	No obvious evidence of structural gastrointestinal pathology was noted yet if decreased body condition or loss of muscle mass is noted, the possibility of underlying gastrointestinal disease, which may present as sonographically normal, cannot be excluded. Further assessment may include a GI panel to include PLI/TLI/Cobalamin/Folate. Three-view chest radiographs are suggested to assess for or rule out occult thoracic pathology. Serial monitoring of renal parameters going forward is suggested. CBC pathology review, given the anemia, could be considered.
INVOICE	
14574	
DATE	
8/11/22	



PATIENT

Dodger Alexander

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11 years

WEIGHT

7.94 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Companion Pet
Clinic

REFERRING VET

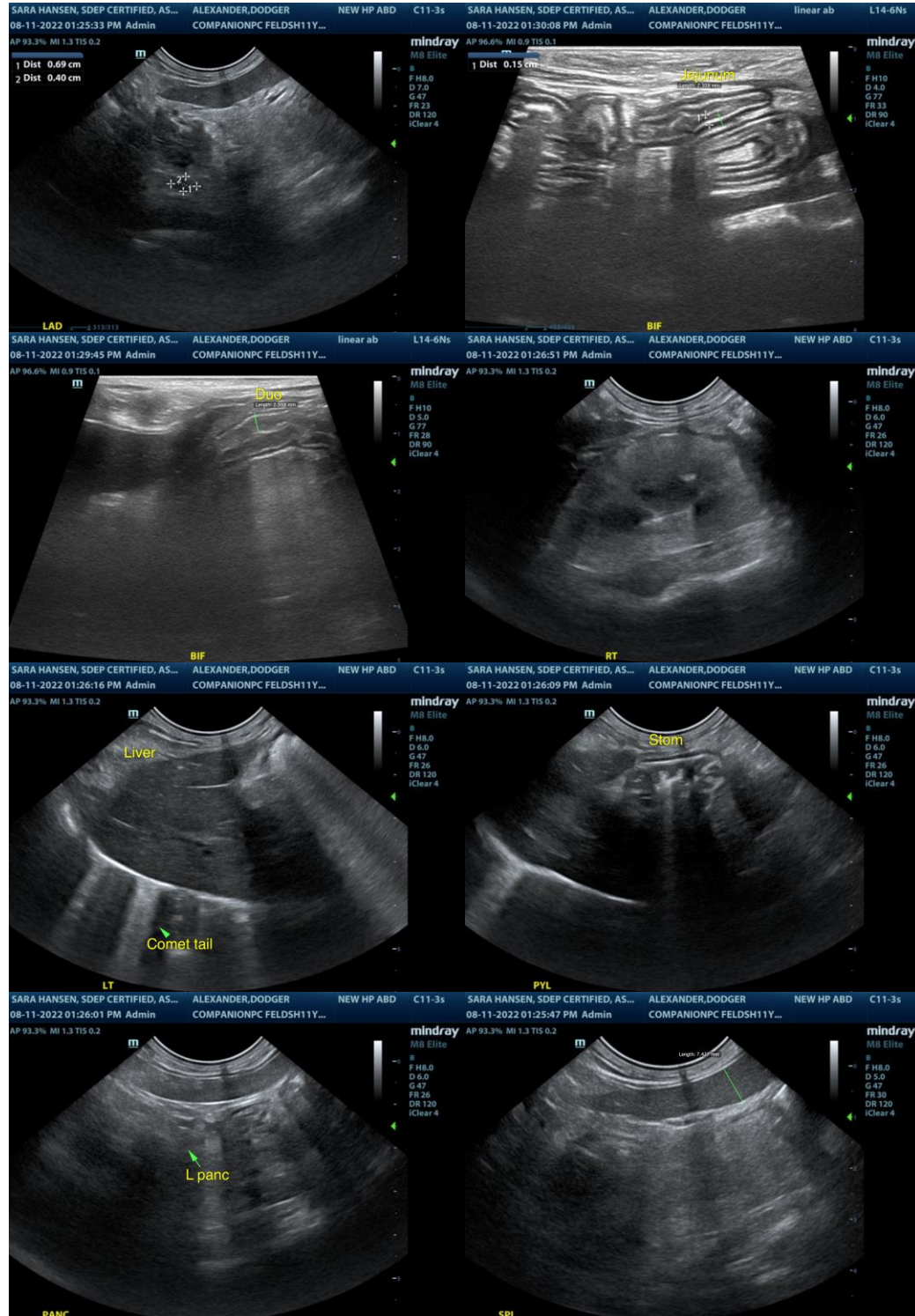
Dr. Mills

INVOICE

14574

DATE

8/11/22





PATIENT

Dodger Alexander

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11 years

WEIGHT

7.94 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Companion Pet
Clinic

REFERRING VET

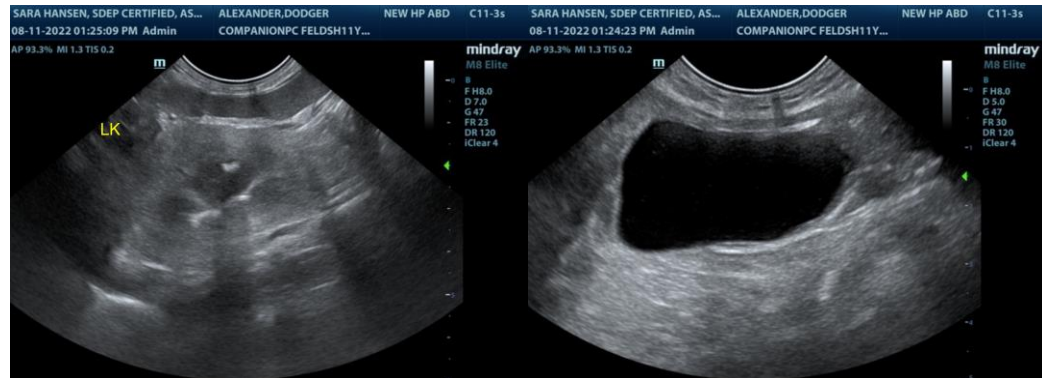
Dr. Mills

INVOICE

14574

DATE

8/11/22



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