



PATIENT

Mightie Cutchin
Dr. Pet

PRESENTING CLINICAL SIGNS

Mild partial anorexia, occasional vomiting,
Abnormal PE/Chem/CBC/UA Results: CBC, chems, ua, T4 wnl. GI labs pending

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.

BREED

DSH

SEX

Neutered Male

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.2 cm. The right kidney measured 3.4 cm.

AGE

8 Years

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.28 cm in width. The right adrenal gland measured 0.32 cm in width.

WEIGHT

14 Pounds

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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Dr. Trae Cutchin

Gastrointestinal

HOSPITAL NAME

Friendship Springs VC

The stomach presented intact wall layering with a normal wall layer ratio. The stomach was primarily empty with mild luminal gas with mildly prominent pyloric walls. Pylorus wall measured 0.35 cm.

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. Jejunum wall measured 0.25 cm. Duodenum wall measured 0.25 cm.

REFERRING VET

Dr. Trae Cutchin

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

INVOICE

24659

Pancreas

The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic inflammation. No overt evidence of neoplasia.

DATE

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Free Abdomen

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Associated pancreaticoduodenal lymph nodes were noted in the right cranial abdomen caudal to the pylorus. Example measured 0.5 cm diameter. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident.

SPECIES

Feline

Additional potential cranial omental to peripancreatic lymphadenopathy adjacent to the left pancreatic limb also present. The possibility of left pancreatic limb nodules versus focal areas of inflammation also possible. Example of potential pancreatic nodule measured 0.78 cm in diameter in the left pancreatic limb.

BREED

DSH

No effusion.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Active to chronic active pancreatitis with associated pancreaticoduodenal lymphadenopathy
- Possible left pancreatic limb nodule versus focal inflammation or associated peripancreatic cranial omental lymphadenopathy
- Mild age related kidneys
- Suspect mild, primarily pyloric gastritis

AGE

8 Years

WEIGHT

14 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assessment for evidence of cranial abdominal or subxiphoid discomfort on palpation is recommended. Subjectively, the degree of pancreatitis was mild to potentially moderate. Potential areas of left pancreatic limb nodular hyperplasia versus focal active pancreatic inflammation or associated left peripancreatic omental lymphadenopathy possible. No overt evidence of neoplastic criteria, which is considered unlikely. Correlation with pending GI panel recommended. Empirically, medical therapy for pancreatitis and as-needed gastrointestinal support would be appropriate.

INTERPRETED BY

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(Canine and Feline)

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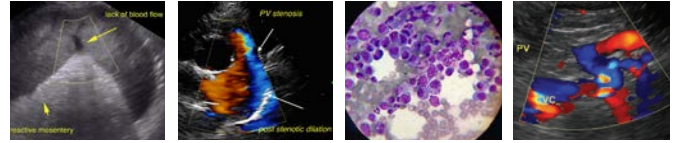


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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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