



PATIENT PRESENTING CLINICAL SIGNS

Finn Zensky
 History: History of chronic, intermittent constipation, weight loss
 Medication: Miralax

SPECIES
 Feline
 Unremarkable CBC. Spec fPL 4.3, T4 within normal limits.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED
 Domestic Shorthair
 The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild particulate non-dependent sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX
 Neutered Male
 The area of the aortic trifurcation was free of pathology.

AGE
 9 years
 Normal renal size with asymmetrical margination was 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 right kidney measured 4.1 cm. The left kidney measured 4.2 cm. Small cortical cysts noted in both kidneys.

WEIGHT
 12.4 Pounds
Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm in width. The left adrenal gland measured 0.40 cm in width.

INTERPRETED BY
Spleen

R. McKenzie Daniel,
 DVM, DABVP
 (Canine and Feline)
 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 0.99 cm in width.

IMAGING PERFORMED BY
Liver

Rebekah Jakum, CVT
 ARDMS/RVT
 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 mild, non-dependent, echogenic debris primarily with focal mildly congealed, non-obstructive debris noted in the gallbladder neck and cystic biliary duct, measuring 0.37 cm diameter. The common bile duct was normal.

HOSPITAL NAME
Gastrointestinal

Alburtis AH
 The stomach presented intact wall layering with a normal wall layer ratio. Minor retained anechoic pyloric fluid noted. Pylorus wall measured 0.30 cm. Gastric body wall measured 0.27 cm.

REFERRING VET
 Dr. Borrelli
 The small intestine presented intact wall layering with generalized propensity for mildly prominent muscularis layer. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Jejunum wall measured 0.29-0.30 cm.

INVOICE
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DATE
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 Normal visible colon wall layers were present with subjective minor distention with formed to shadowing feces.



PATIENT *Pancreas*

Finn Zensky 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

Domestic Shorthair

ULTRASONOGRAPHIC FINDINGS

- Mild particulate urinary bladder sediment
- Bilateral interstitial nephrosis renal pattern with small cortical cysts
- Mild focally congealed gallbladder and cystic bile duct debris
- Probable inflammatory bowel disease

SEX

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9 years

The appearance of the bilateral kidneys may indicate mild chronic renal changes with potential for interstitial nephritis. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

WEIGHT

12.4 Pounds

The presence of mild gallbladder debris, which appeared to be non-obstructive, is non-specific. Considerations may include non-clinical cholestasis, debris owing to fasting, or underlying hepatobiliary inflammatory process if previous history of hepatic enzyme elevation. This is likely incidental.

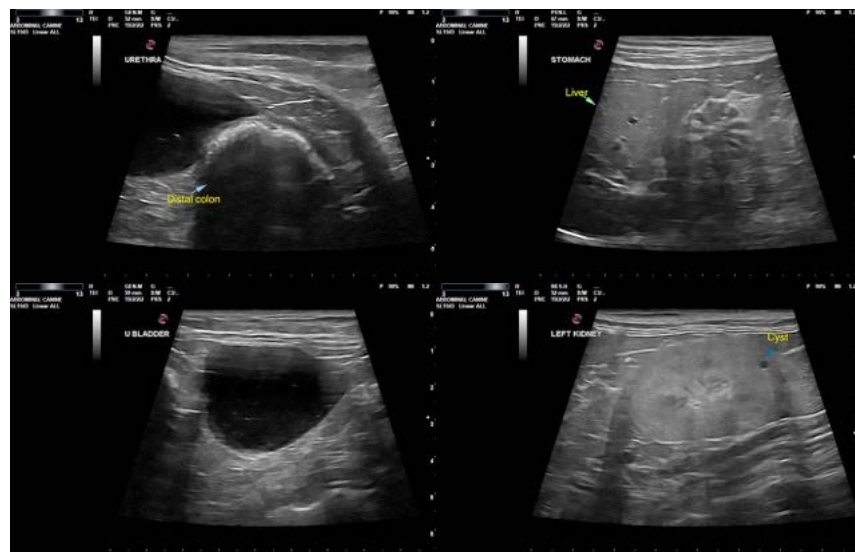
INTERPRETED BY

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

A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Intestinal biopsies would be required for definitive diagnosis. Empirically, hydrolyzed diet, empirical cobalamin supplementation +/- Prednisolone therapy at lowest effective does to control clinical signs, and as-needed gastrointestinal support may be considered.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT



HOSPITAL NAME

Alburtis AH

REFERRING VET

Dr. Borrelli

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PATIENT

Finn Zensky

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered Male

AGE

9 years

WEIGHT

12.4 Pounds

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IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Alburtis AH

REFERRING VET

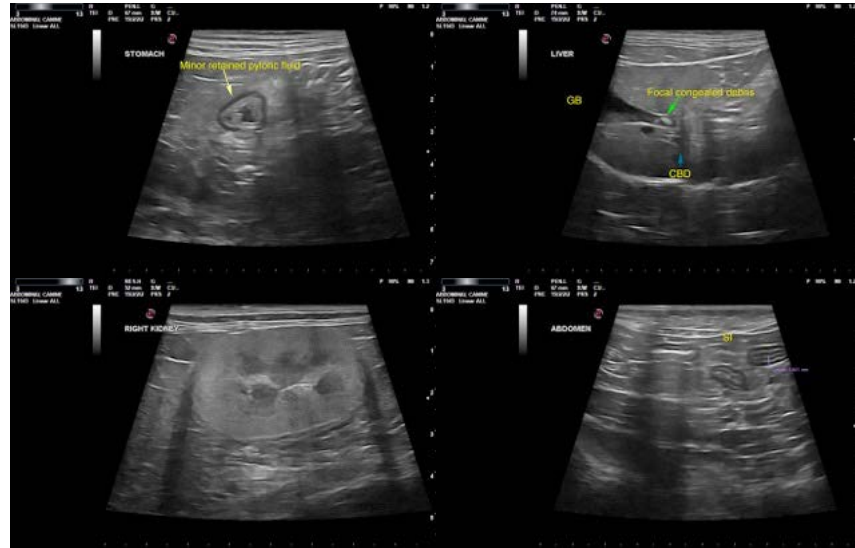
Dr. Borrelli

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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.

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.

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