



PATIENT

Marie Killam

PRESENTING CLINICAL SIGNS

Inappetence. Abdominal pain;. Concern for gastroenteritis, pancreatitis or FB.

SPECIES

Feline

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 mild non-dependent particulate 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

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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. Minor bilateral pyelectasia was present. The left kidney measured 3.6 cm in length. The right kidney measured 3.8 cm in length.

SEX

FS

AGE

10yr

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.48 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.53 cm width.

WEIGHT

5.5kg

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/Gallbladder

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and mild non-dependent non-organized sediment. The cystic and common bile ducts were normal.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

HOSPITAL NAME

Fish Creek Pet
Hospital

Gastrointestinal

The stomach presented intact borderline prominent wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate retained anechoic to echogenic fluid with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.29 cm.

REFERRING VET

Dr. E. Johnson

INVOICE

14645ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Focal segmentally prominent yet intact jejunum wall was present with jejunum measuring up to 0.29 cm in width. The duodenum wall measured 0.25 cm width. The ileocolic wall measured 0.28 cm width.

DATE

08/18/2023



PATIENT

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

Marie Killam

Pancreas

SPECIES

Feline

The parenchyma of the pancreas base and right pancreatic limb was hyperechoic to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. These changes may suggest chronic inflammation, fibrosis, or saponification if there is a previous history of pancreatitis. No overt signs of pancreatic neoplasia.

BREED

DSH

Free Abdomen

SEX

FS

Intermittent mildly prominent to enlarged mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 0.3 cm in diameter.

Intermittent scant pockets of peritoneal free fluid was present.

ULTRASONOGRAPHIC FINDINGS

AGE

10yr

- Mild hypomotile stomach with borderline prominent intact gastric wall layering.
- Overtly normal small bowel exhibiting minor focal to segmental prominent jejunal wall.
- Chronic pancreatitis pattern.
- Intermittent minor benign/reactive mesenteric lymph nodes.
- Scant pocket of peritoneal free fluid.

WEIGHT

5.5kg

Secondary

- Urinary bladder sediment.
- Minor bilateral pyelectasia.
- Mild gallbladder sediment.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, the GI appearance is most consistent with inflammatory gastroenteropathy criteria without overt evidence of infiltrative gastric or gastrointestinal neoplasia given maintained intact wall layering. Associated primary or secondary mild metabolic or functional gastric stasis is considered probable.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

Chronic pancreatitis may be a contributing factor which would be suspected if evidence of cranial abdominal/subxiphoid discomfort on palpation +/- abnormal spec fPL. No overt indication for immediate surgical intervention.

HOSPITAL NAME

Fish Creek Pet
Hospital

The mild gallbladder sediment is non-specific given no reported hepatic enzyme elevation yet at times has been associated with cholestasis or hepatobiliary inflammation. Correlation with evaluation of hepatic enzymes is suggested.

REFERRING VET

Dr. E. Johnson

Empirically hospitalization with 24-48 hour IVF and GI support and empirical therapy for non-specific gastroenteritis/chronic pancreatitis and clinical reassessment would be reasonable. Recheck sonogram may be considered if persistent/progressive clinical signs despite empirical therapy.

INVOICE

14645ag

DATE

08/18/2023



PATIENT

Marie Killam

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

10yr

WEIGHT

5.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

HOSPITAL NAME

Fish Creek Pet
Hospital

REFERRING VET

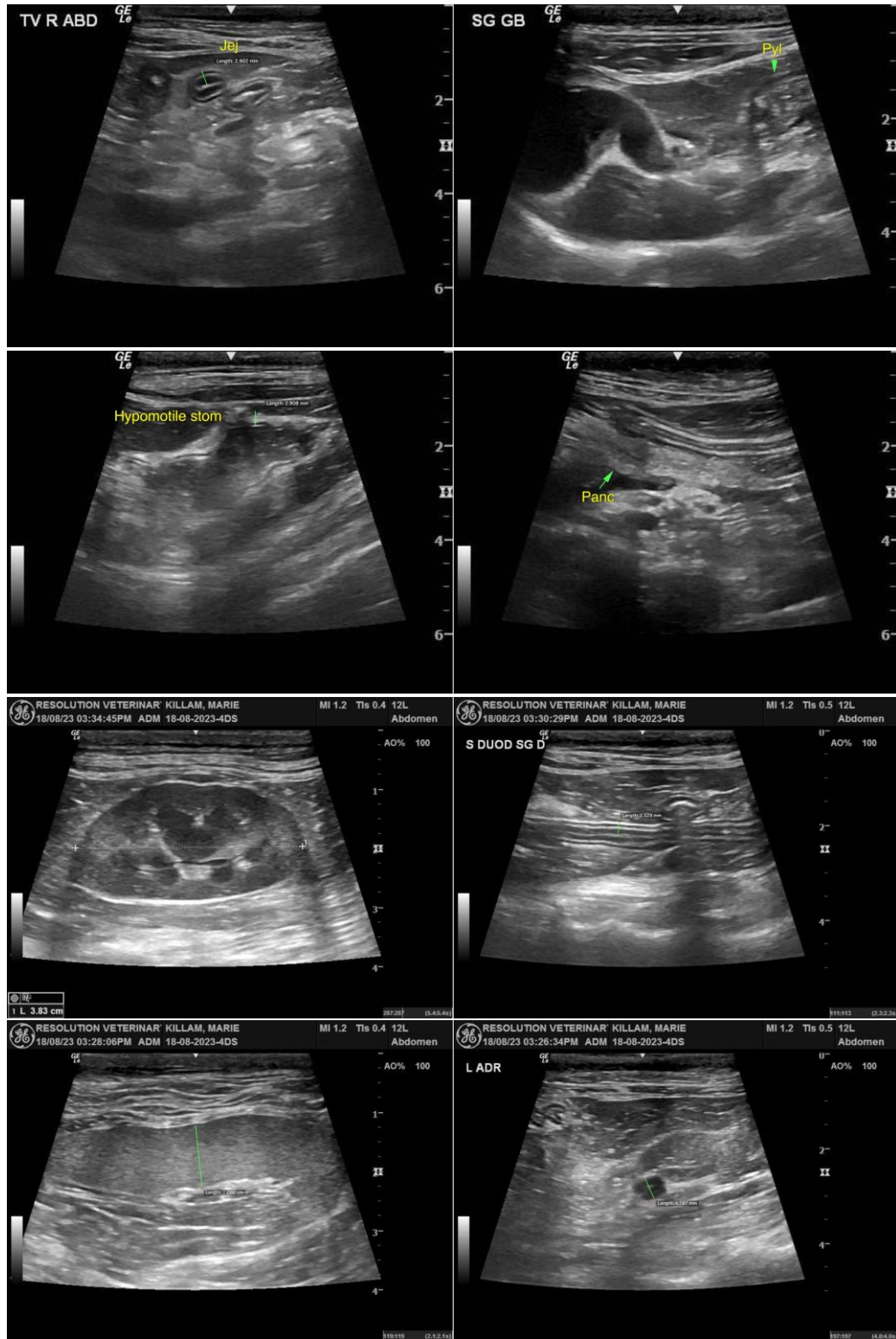
Dr. E. Johnson

INVOICE

14645ag

DATE

08/18/2023





PATIENT

Marie Killam

SPECIES

Feline

BREED

DSH

SEX

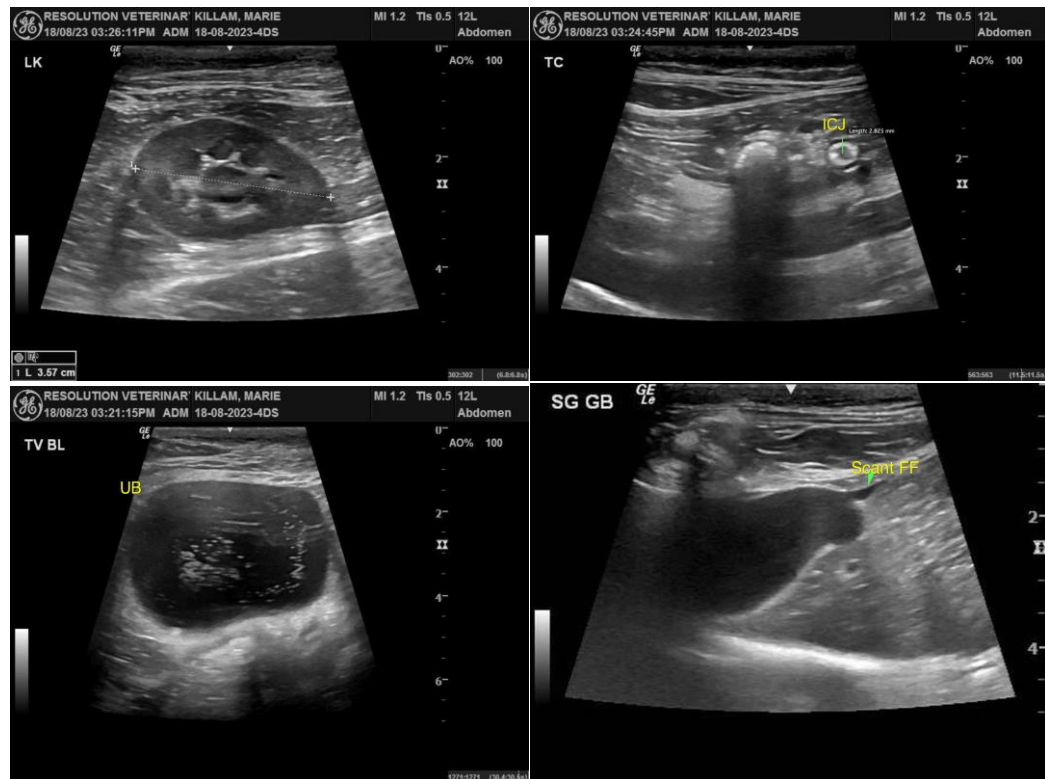
FS

AGE

10yr

WEIGHT

5.5kg



INTERPRETED BY

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

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

HOSPITAL NAME

Fish Creek Pet
Hospital

REFERRING VET

Dr. E. Johnson

INVOICE

14645ag

DATE

08/18/2023

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