



**PATIENT PRESENTING CLINICAL SIGNS**

Tiny Karageorgos

History: progressive inappetence and lethargy for 2 weeks with abdominal distention, pyrexia

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: HCT 0.37, WBC 14.0, lymphopenia, BUN 4.9, CREAT 67, PHOS 2.1, Ca 2.0, ALB 18, GLOB 49, ALP 11, ALT 10 please see BW, FeLV/FIV neg

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

DSH

**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.

**SEX**

FS

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 3.6 cm in length. The right kidney measured 4.0 cm in length.

**AGE**

14mo

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

4.3kg

**Adrenal Glands**

No overt pathology in the area of the left or right adrenal glands.

**Spleen**

**INTERPRETED BY**

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 1.0 cm in width at the level of the hilus.

**IMAGING PERFORMED BY**

Kelly Reschny

**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.

**HOSPITAL NAME**

Sixteen Mile VC

No overt pathology in the area of the gallbladder or common bile duct.

**REFERRING VET**

Dr. Bile

**Gastrointestinal**

The visualized segments of the gastrointestinal tract were sonographically normal exhibiting normal wall layering.

**INVOICE**

11422ag

**Pancreas**

The pancreas was indistinctly visualized owing to regional omental artefact.

**DATE**

08/19/2022

**Free Abdomen**

Moderate to severe volume peritoneal fluid exhibiting echogenic changes suggestive of cellularity. Generalized hyperechoic mesentery was noted.



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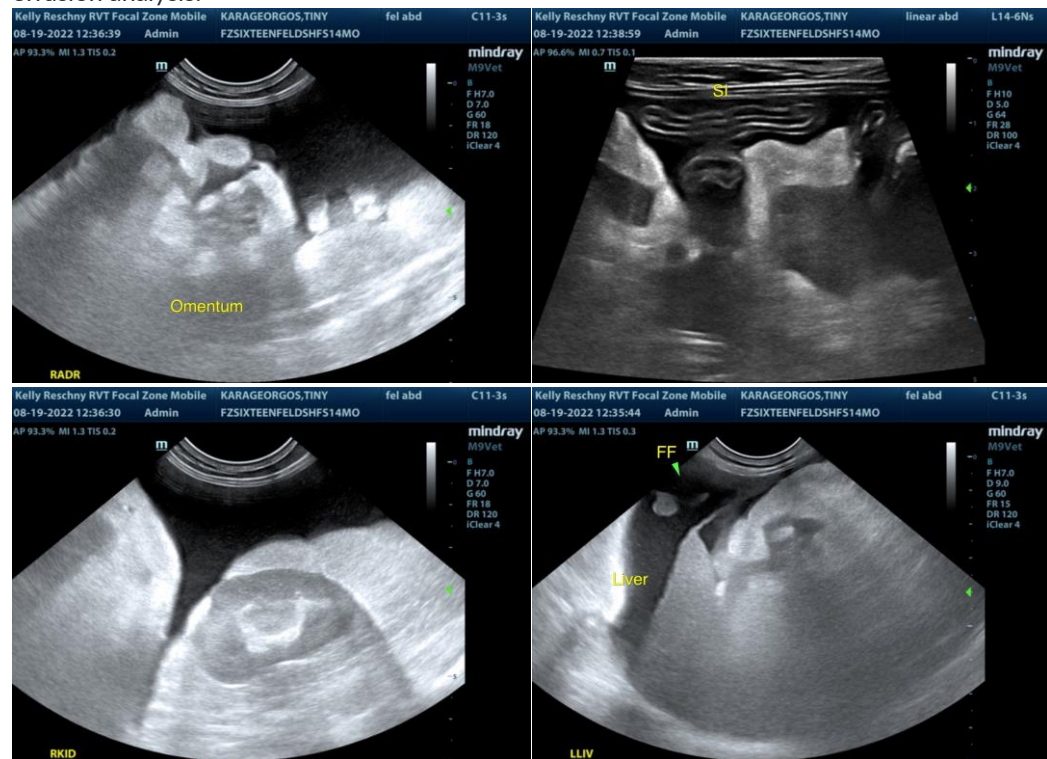
08/19/2022

**ULTRASONOGRAPHIC FINDINGS**

- Moderate to severe volume peritoneal fluid with mild echogenic changes
- Hyperechoic mesentery
- Overly normal bilateral kidneys, liver

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Abdominocentesis for fluid analysis +/- C/Sif evidence of inflammatory cells is recommended. Primary consideration in this case includes strong suspicion for FIP with potential for neoplastic disease or protein losing disease less likely. No evidence of structural pathology as a contributing factor to the peritoneal free fluid was observed. A very guarded to unfavorable prognosis is indicated pending effusion analysis.





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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

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