



PATIENT PRESENTING CLINICAL SIGNS

Molly Briggs Dx or RO GI Disease, wt loss and lethargy, lab work unremarkable

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

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 were noted.

BREED

DLH

SEX

Spayed Female

AGE

13 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

8.02

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm in width. The right adrenal gland measured 0.30 cm in width.

INTERPRETED BY

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

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. The spleen measured 0.8 cm in width.

IMAGING PERFORMED BY

Jenna Walsh

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.

HOSPITAL NAME

Willakenzie AC

Gastrointestinal

REFERRING VET

Dr. Stacy DeWall

The stomach presented intact yet subjective mild prominent wall layering (primarily in the area of the gastric antrum and pylorus) with minor retained anechoic fluid. No evidence of retained gastric ingesta or foreign material as well as no evidence of mechanical pyloric outflow obstruction. Pylorus wall measured 0.27 cm.

INVOICE

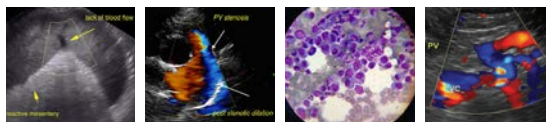
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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Duodenum wall measured 0.27 cm. Jejunum wall measured 0.21 cm.

DATE

8/23/21

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



PATIENT *Pancreas*

Molly Briggs 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 evidence of intraabdominal masses, lymphadenopathy or effusion.

BREED

DLH

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Mild retained pyloric fluid, potential mild gastritis
- Sonographically unremarkable small bowel
- Mild age related renal changes

AGE

13 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

8.02

Overall, no overt evidence of significant visceral pathology as an obvious cause for the patient's weight loss. The presence of minor retained anechoic fluid within the stomach may suggest some degree of gastric hypomotility and potential mild gastritis. Underlying intestinal disease without evidence of mural changes or low-grade pancreatitis (both of which may present sonographically unremarkable) may be possible.

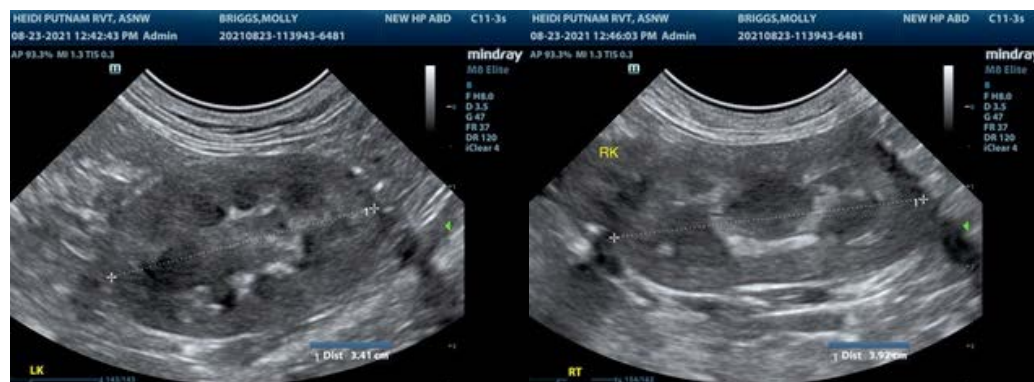
INTERPRETED BY

R. McKenzie Daniel,
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A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological examination are recommended to assess for or rule out occult disease which may cause weight loss. Empirically, continued gastrointestinal support is recommended.

IMAGING PERFORMED BY

Jenna Walsh



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PATIENT

Molly Briggs

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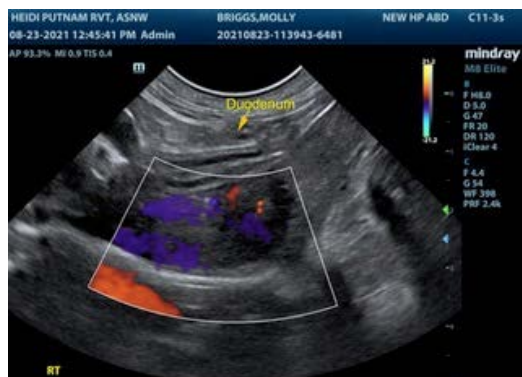
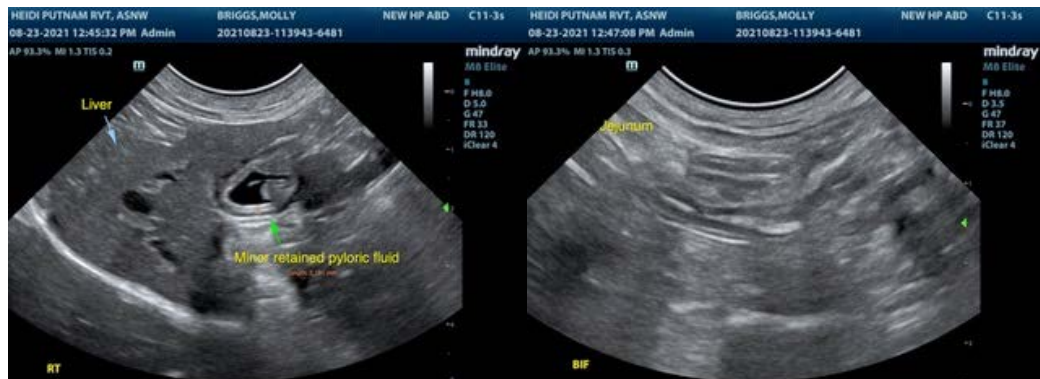
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PATIENT

Molly Briggs

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.

BREED

DLH

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SEX

Spayed Female

AGE

13 Years

WEIGHT

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