



PATIENT	PRESENTING CLINICAL SIGNS
Smooch Skillen	History: Diabetes and pancreatitis. CBC – Hct 29.1, suspected band neutrophils, Amylase 1647, Glucose 245, USG 1.019, negative glucose. Spec fPL 5.9, cobalamin >2000.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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.
Domestic Shorthair	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. The left kidney measured 3.9 cm. Mild pyelectasia noted in the left kidney. The right kidney measured 4.2 cm. Mild non-uniform cortex echogenicity present in both kidneys.
SEX	AGE
Spayed Female	The area of the aortic trifurcation was free of pathology.
WEIGHT	Adrenal Glands
14.7 Pounds	The adrenal glands were prominent in size with primarily uniform hypoechoic parenchyma and asymmetrical capsule margination. The left adrenal gland measured 0.69 cm in width. The right adrenal gland measured 0.60 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 0.89 cm 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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
Eastern AH	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material. Gastric body wall measured 0.25 cm.
REFERRING VET	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.
INVOICE	Normal visible colon wall layers were present with apparent formed feces in lumen.
24891	Pancreas
DATE	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
8/24/21	



PATIENT parenchymal swelling and mild peripancreatic inflammation. No overt evidence of neoplasia. Generalized pancreatic duct dilation was present.

Smooch Skillen

ULTRASONOGRAPHIC FINDINGS

SPECIES

Feline

- Possible enteropathy
- Chronic active pancreatitis pattern
- Bilateral chronic renal changes with minor left kidney pyelectasia
- Bilateral mildly prominent adrenal glands

BREED

Domestic Shorthair

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The small intestine exhibited subjective mural changes, potentially indicative of underlying infiltrative enteropathy. Considerations may include inflammatory infiltrative enteropathy/IBD, while the possibility of neoplastic infiltrative enteropathy with round cells (i.e., lymphoma) cannot be definitively excluded. The severely elevated cobalamin levels are non-specific, yet may potentially be associated with discreet neoplasia such as intestinal neoplasia, hepatopathy, nephropathies, or other. However, this is non-specific. Baseline renal staging to include urine culture and sensitivity (given the possibility of glucosuria) and baseline UPC may be considered.

SEX

Spayed Female

AGE

4/08

The bilateral prominent adrenal glands are of unclear clinical significance and may be a patient variant or possible stress hypertrophy. Adrenal workup may be considered if clinically indicated or if difficult to manage diabetes.

WEIGHT

14.7 Pounds

For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

INTERPRETED BY

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

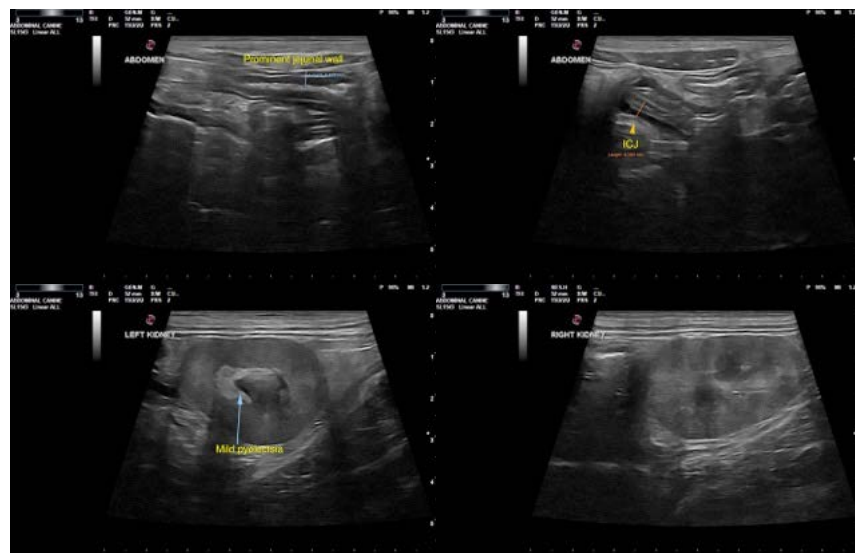
IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Eastern AH

REFERRING VET



INVOICE

24891

DATE

8/24/21



PATIENT

Smooch Skillen

SPECIES

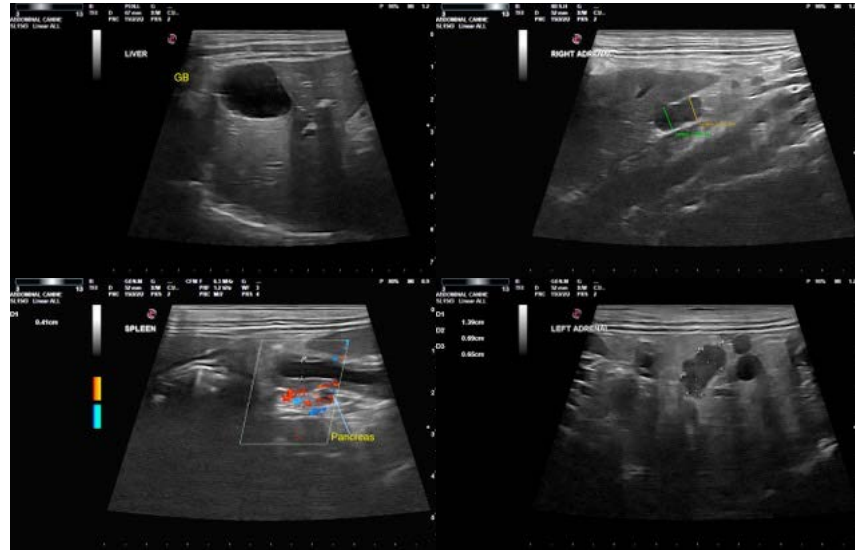
Feline

BREED

Domestic Shorthair

SEX

Spayed Female



AGE

4/08

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.

WEIGHT

14.7 Pounds

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)

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INTERPRETED BY

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