



PATIENT	PRESENTING CLINICAL SIGNS
PYewacket Gundy	P present July 29th for innappropriate urination- ultrasound guided csytocentesis revealed free abdominal fluid in caudal abdomen. Opaque free abdominal fluid aspirated 4pounds of wieght loss in 4 years noted- unintentional Mydriasis and Retinal Vascular Engorgement noted. Gallop rhythm noted
SPECIES	Abnormal PE/Chem/CBC/UA Results: 7/29/22 abodminal free fluid submitted for FLUA/Cyto, Senior BW panel also submitted WBC 31.5 (3.5-16) - neutrophils 26145 (2500-8500) - lymphocytes 315 (1200-8000) -monocytes 1575 (0-600) -eosinophilia 3465 (0-7000) RBC 5.8 (5.92-9.93) HgB 8.8 (9.3-15.9) HCT 26% (29-48); Chemistry profile - Superchem: wnl SDMA 15.4 (<15); Thyroid hormones - TT4 3.3 (0.8-4); Cytology - Microscopic Description: The sample is of low but adequate cellularity with a background of rare erythrocytes. It consists of few large mononuclears and macrophages, rare small lymphocytes, and a majority of non-degenerate neutrophils. No etiologic agents or overtly neoplastic cells seen
Feline	
BREED	
Domestic Shorthair	
SEX	
F/S	
AGE	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
13y, 2m	Urinary System
WEIGHT	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 was noted.
8.5 lbs.	The area of the aortic trifurcation was free of pathology.
INTERPRETED BY	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. No evidence of pelvic dilation was present. The left kidney measured 3.5 cm in length. The right kidney measured 3.6 cm in length.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Adrenal Glands
IMAGING PERFORMED BY	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.44 cm width.
Carly Pate	Spleen
HOSPITAL NAME	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 0.7 cm width at the level of the hilus.
VCA McKenzie AH	Liver/ Gallbladder
REFERRING VET	The liver exhibited generalized subjective mild enlargement with symmetrical to rounded hepatic contour. The parenchyma exhibited normal echogenicity with mild coarse echotexture. Evidence of hepatic vasculature congestion was present most notable at the level of the hepatic vein / caudal vena
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PATIENT	cava junction. No hepatic masses or nodules were noted. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
PYewacket Gundy	
SPECIES	Gastrointestinal
Feline	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. The gastric body wall width measured 0.24 cm.
BREED	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. The small intestinal wall width measured 0.24 cm.
Domestic Shorthair	
SEX	Normal visible colon wall layers were present with apparent formed feces in lumen.
F/S	
AGE	Pancreas
13y, 2m	The pancreas was mildly prominent in size yet maintained symmetrical capsule contour with isoechoic to mildly nonhomogeneous parenchyma with generalized moderate pancreatic duct dilation.
WEIGHT	Free Abdomen
8.5 lbs.	Intermittent midabdominal mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 0.5 cm diameter. No overt evidence of current peritoneal free fluid was noted.
INTERPRETED BY	Brief subjective cardiac assessment revealed evidence of LV myocardial remodeling with potential for hypertrophic changes, as well as subjective left atrium enlargement. Moderate volume pleural effusion was present along with scant pericardial effusion.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Carly Pate	<ul style="list-style-type: none"> • Hepatomegaly exhibiting evidence of hepatic congestion • Overtly normal gastrointestinal tract • Age-related pancreatic changes vs. chronic pancreatitis • Bilateral chronic renal changes • Subjective cardiomyopathy with moderate volume pleural and scant volume pericardial effusion • Intermittent nonspecific mildly enlarged mesenteric lymphadenopathy
HOSPITAL NAME	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
VCA McKenzie AH	Full echocardiogram along with thoracocentesis for pleural effusion analysis, cytology +/- C/S if evidence of inflammatory cells is suggested. The underlying cause of the effusion in this patient may be secondary to primary cardiac disease. Potential for non-exfoliating neoplastic process i.e., carcinomatosis or technically FIP may be considered alternative differential diagnoses.
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PATIENT

PYewacket Gundy

SPECIES

Feline

BREED

Domestic Shorthair

SEX

F/S

AGE

13y, 2m

WEIGHT

8.5 lbs.

INTERPRETED BY

R. McKenzie Daniel,
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IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

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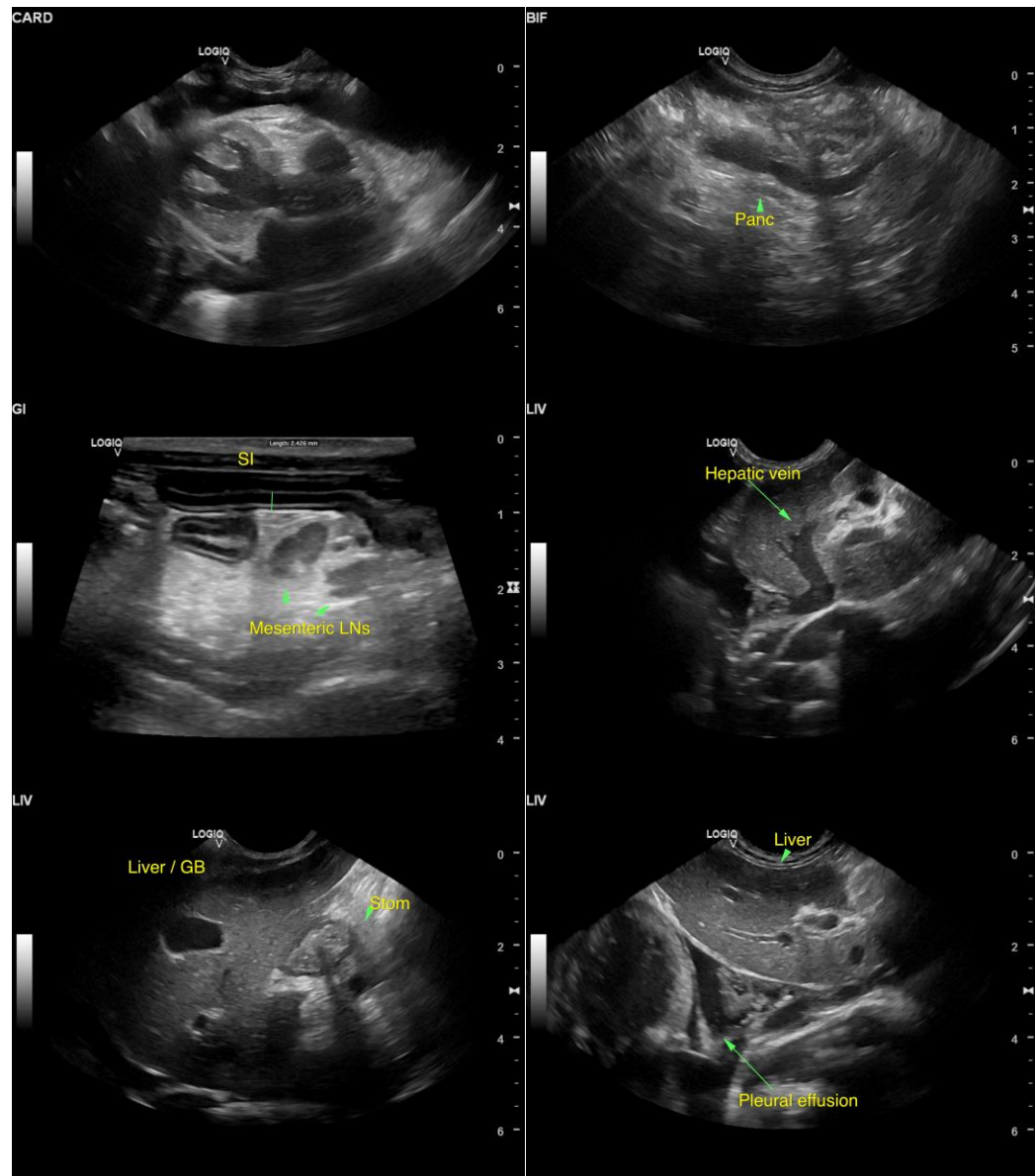
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A GI panel to include PLI/TLI/Cobalamin/Folate to assess for occult gastrointestinal or pancreatic disease as a contributing factor to the patient's weight loss is warranted. A very guarded long term prognosis pending echocardiographic assessment.





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Domestic Shorthair

SEX

F/S

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WEIGHT

8.5 lbs.

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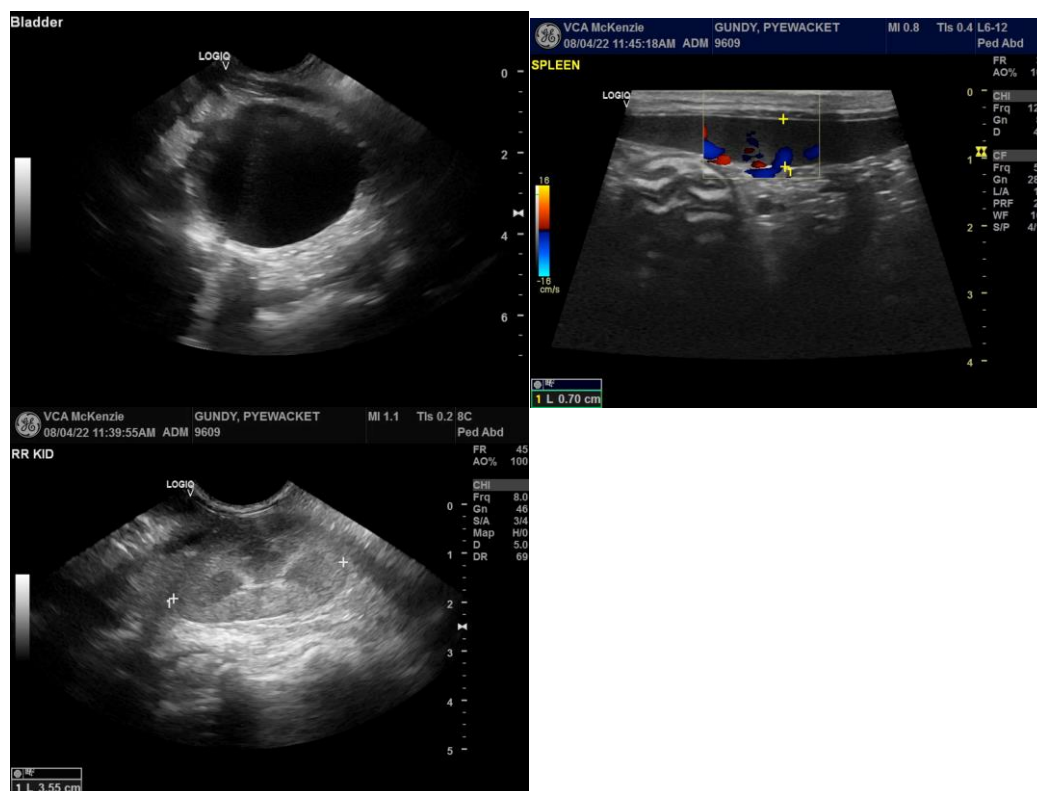
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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