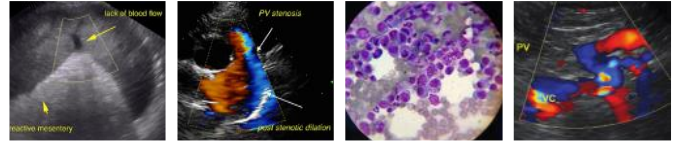




PATIENT	PRESENTING CLINICAL SIGNS
Jerry Mormando	constipated, straining to defecate
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was 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.
DSH	Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture and potential for emerging mineral. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. Mild bilateral pyelectasia was noted. The left kidney measured 3.7 cm in length. The right kidney measured 3.9 cm in length.
SEX	Adrenal Glands
MN	No overt pathology in the area of the left or right adrenal glands.
AGE	Spleen
16	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.
WEIGHT	Liver
12.9	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.
INTERPRETED BY	Gastrointestinal
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained ingesta exhibiting mild progressive distal acoustic shadowing with no signs of ileus, obstruction or foreign material.
IMAGING PERFORMED BY	Pancreas
Jenn	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 measured 0.25 cm in width.
HOSPITAL NAME	INVOICE
Rockaway Animal Hospital	Normal visible colon wall layers were present with apparent formed to semi-formed feces in lumen. No obvious obstructive mural pathology was present. The distal descending colon measuring 0.21 in wall width.
REFERRING VET	DATE
Dr. Maniar	09/19/2022



PATIENT

Jerry Mormando

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 overt lymphadenopathy or peritoneal effusion was present.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

Primary

- Overtly normal colon
- Sonographically unremarkable GI tract with mild gastric ingesta
- Non-specific chronic renal changes with mild bilateral pyelectasia

SEX

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obvious evidence of structural GI pathology was noted in this study. Sedated rectal palpation may be considered if not done. Empirically continued therapy for constipation would be reasonable.

AGE

16

The pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein: creatinine ratio on sterile urine sample is recommended. Baseline UPC level if evidence of proteinuria and assessment of systemic BP may be considered.

WEIGHT

12.9

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

INVOICE

11657ag

DATE

09/19/2022



PATIENT

Jerry Mormando

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

16

WEIGHT

12.9

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

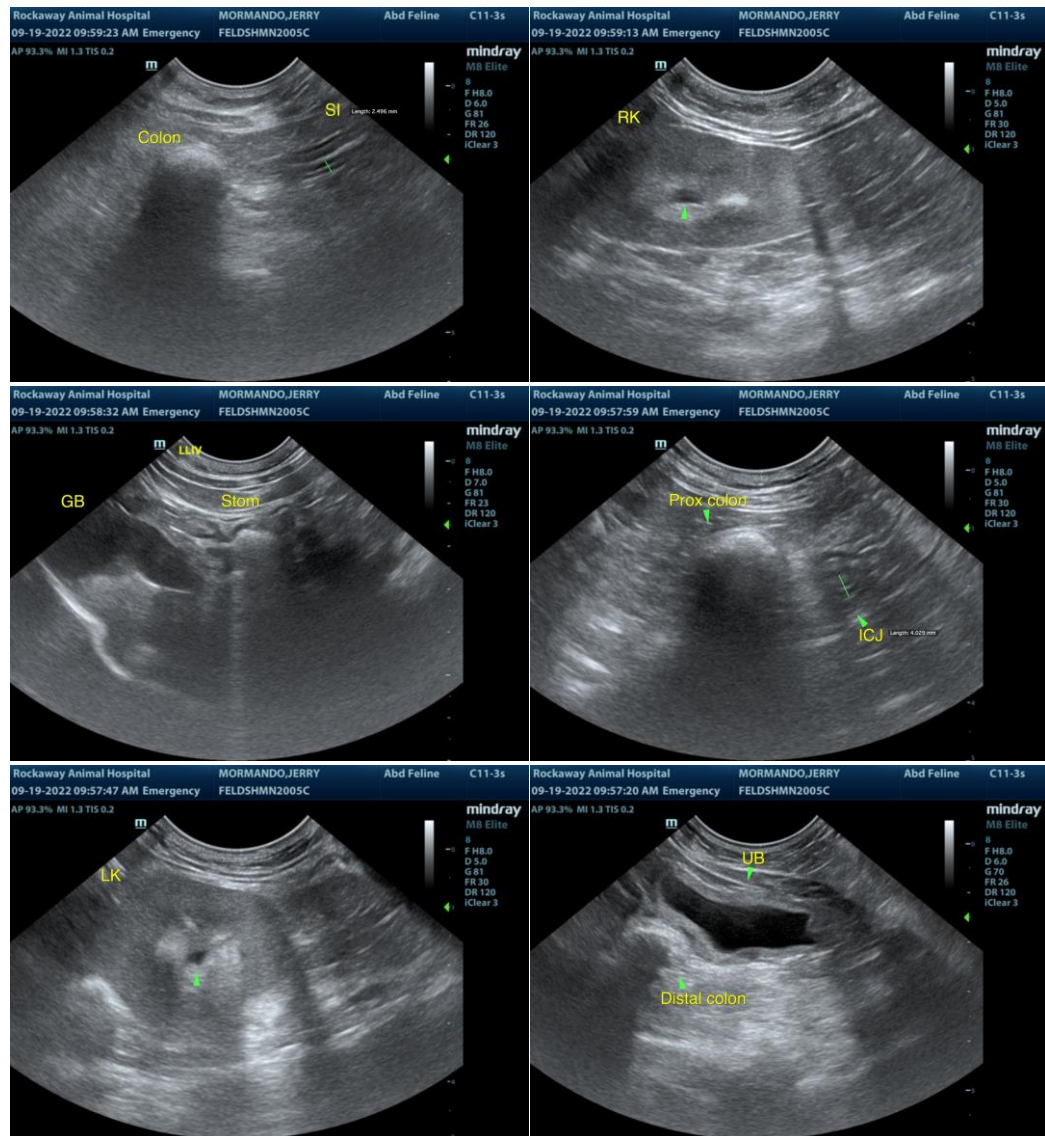
Dr. Maniar

INVOICE

11657ag

DATE

09/19/2022



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