



## PATIENT

Sweet Jane Miller

## SPECIES

Feline

## BREED

DSH

## SEX

Spayed Female

## AGE

8 Years

## WEIGHT

12 Pounds

## PRESENTING CLINICAL SIGNS

History: lethargy vomiting

Abnormal PE/Chem/CBC/UA Results:

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART & ABDOMEN

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	--	NM	0.46	1.5	0.46	60	94
FELINE CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Sisson)	LA 2D 4-chamber long axis AS to FW (Sisson) (cm)	LVOT VEL (m/s)	RVOT VEL (m/s)	IVRT (m/)	
NORMAL PARAMETER	<1.5	0.88-1.79	0.7-1.7	<1.6	<1.3	40-60	
PATIENT	--	1.3	1.3	1.0	0.9	NM	
Adapted from June Boon, Veterinary Echocardiography, 1998							
Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705							

### Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions and angles of the myocardium. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinetics. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx. 1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted or extra cardiac pathology in the visible planes. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.

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

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway AH

## REFERRING VET

Dr. Maniar

## INVOICE

13207

## DATE

9/21/21



<b>PATIENT</b>	evidence of pelvic dilation. The left kidney measured 3.9 cm in length. The right kidney measured 3.6 cm in length.
Sweet Jane Miller	
	<b><i>Adrenal Glands</i></b>
<b>SPECIES</b>	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width.
Feline	The right adrenal gland was not definitively visualized. No overt pathology.
	<b><i>Spleen</i></b>
<b>BREED</b>	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.
DSH	
<b>SEX</b>	Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.69 cm width.
Spayed Female	
	<b><i>Liver</i></b>
<b>AGE</b>	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.
8 Years	
	<b><i>Gastrointestinal</i></b>
<b>WEIGHT</b>	The stomach presented intact wall layering with a normal wall layer ratio. Minor non-specific echogenic ingesta was present in the stomach. The gastric body wall measured 0.29 cm.
12 Pounds	
<b>INTERPRETED BY</b>	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 jejunum wall measured 0.20 cm.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Normal visible colon wall layers were present with apparent formed feces in lumen.
<b>IMAGING PERFORMED BY</b>	<b><i>Pancreas</i></b>
Jenn	The left pancreatic limb was normal in size in contour with subtle uniform hypoechoic parenchyma compared to adjacent omentum.
<b>HOSPITAL NAME</b>	<b><i>Free Abdomen</i></b>
Rockaway AH	No evidence of intraabdominal masses, lymphadenopathy or effusion.
<b>REFERRING VET</b>	<b>ULTRASONOGRAPHIC FINDINGS</b>
Dr. Maniar	<ul style="list-style-type: none"> <li>• Normal echocardiogram</li> <li>• Subtly hypoechoic left pancreas</li> <li>• Sonographically unremarkable gastrointestinal tract with mild non-specific gastric ingesta</li> </ul>
<b>INVOICE</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
13207	Potential for low grade pancreatitis may be considered in this patient if evidence of cranial abdominal or subxiphoid discomfort on palpation, correlation with spec FPL may be considered. The presence of minor gastric ingesta was non-specific, may correlate with recent meal ingestion or if documented
<b>DATE</b>	
9/21/21	



**PATIENT**

Sweet Jane Miller

NPO, some degree of mild metabolic gastric stasis. Potential for mild non-obstructive hair within the stomach could not be excluded if history of hairballs. Correlation with full CBC, Chemistry panel, T4 and urinalysis recommended. Gastrointestinal supportive care with hairball therapy if clinically indicated should prove beneficial.

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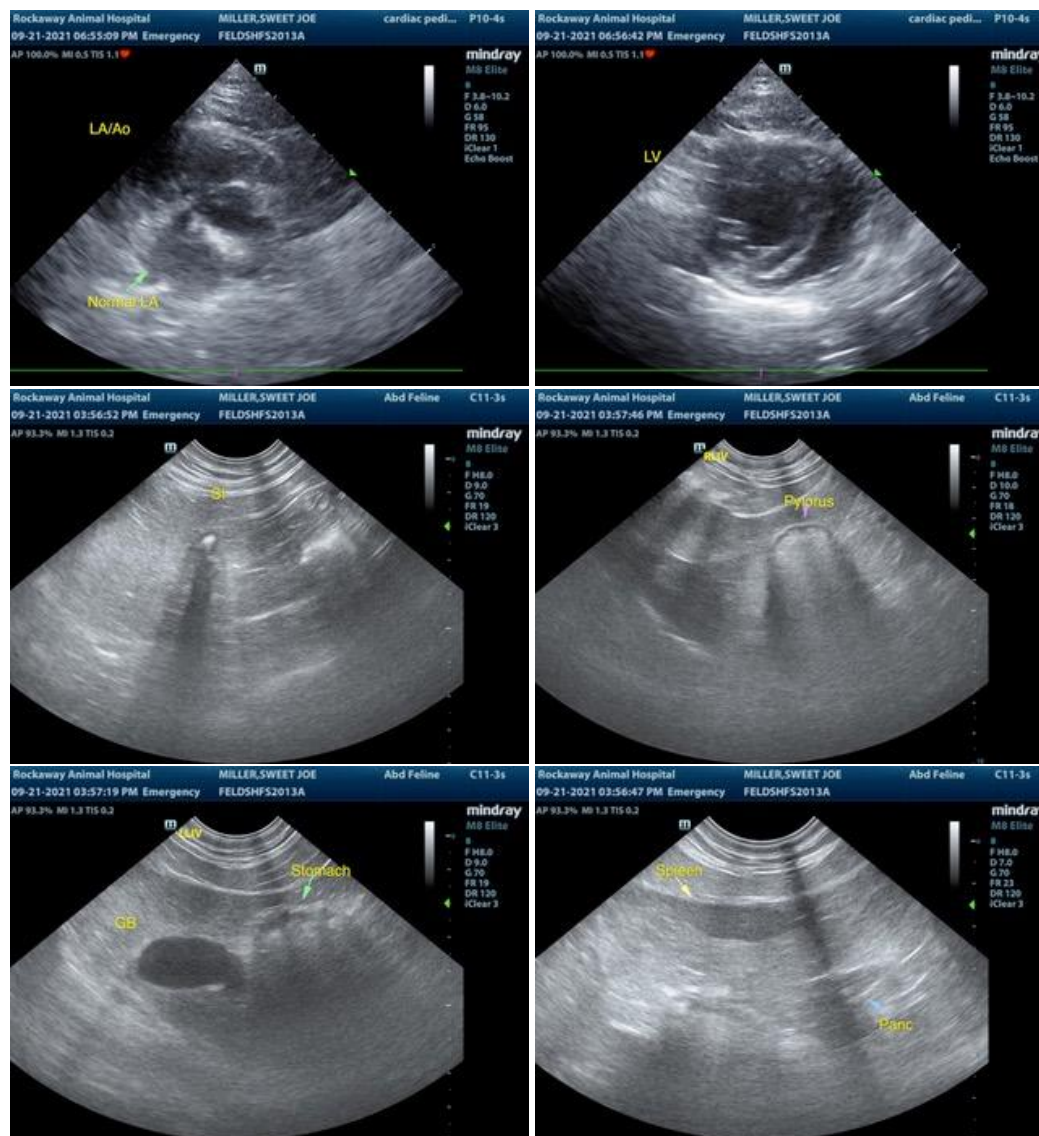
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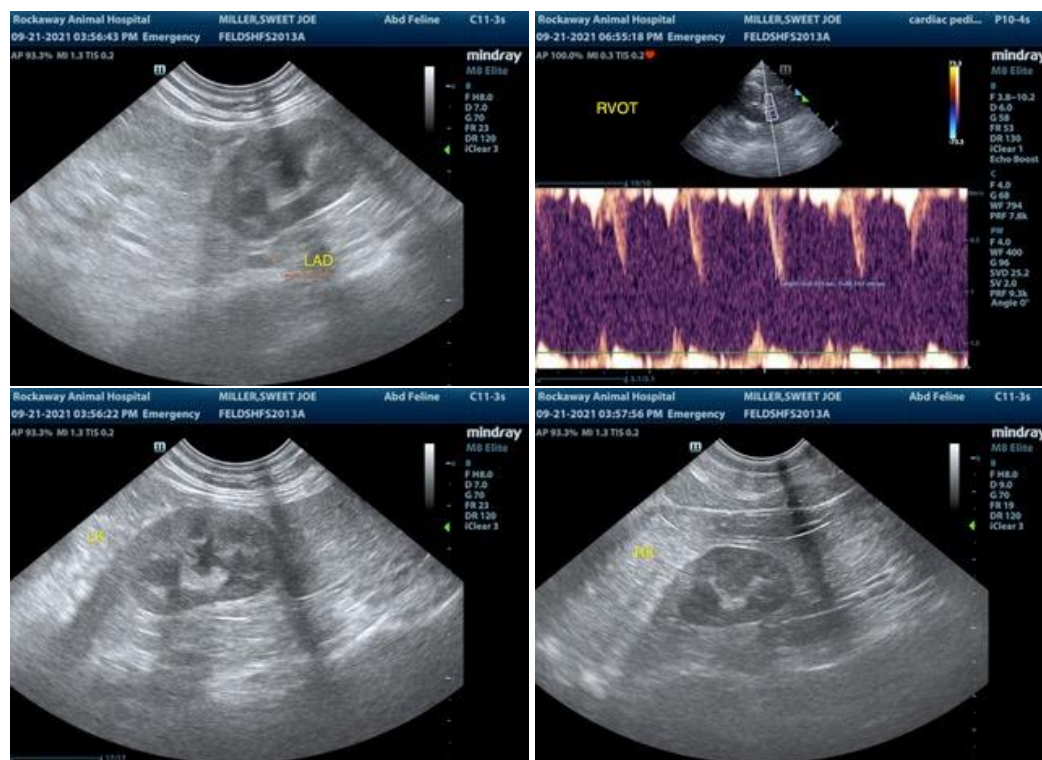
Dr. Maniar

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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.

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