



PATIENT

Jerry Randle

PRESENTING CLINICAL SIGNS

Chronic diarrhea, vomiting, good appetite/weight-loss, inappropriate urination/defecation Current meds: metronidazole, probiotic
Abnormal PE/Chem/CBC/UA Results: N/A

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

DSH

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Echogenic to particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX

Neutered Male

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. Maintained 1:3 cortex/medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The left kidney measured 4.1 cm. The right kidney measured 3.7 cm.

AGE

12 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

7.7 Pounds

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.27 cm. The left adrenal gland measured 0.31 cm.

Spleen

INTERPRETED BY

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

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the cranial to caudal 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

IMAGING PERFORMED BY

Jessica Miller

Liver

HOSPITAL NAME

Summit Dog & Cat
Hospital

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.

REFERRING VET

Dr. Lepkowski

Gastrointestinal

INVOICE

25940

The stomach presented intact wall layering with a normal wall layer ratio. The stomach contained a mild amount of retained anechoic fluid. Gastric body wall measured 0.24 cm.

The small intestine presented intact wall layering with segmental to generalized propensity for variably prominent muscularis layer. Minor segmental jejunal ileus was present. No evidence of loss of intestinal wall layering or intestinal masses. Jejunum wall measured 0.27 cm. Duodenum wall measured 0.33 cm. Ileocolic wall measured 0.34 cm.

DATE

9/29/21



PATIENT

Jerry Randle

The descending colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. Descending colon wall measured 0.28 cm. Nonformed to liquid fecal matter was present in the colon lumen with lumen dilation.

SPECIES

Feline

Pancreas

The pancreas was normal in size with mild asymmetrical contour and heterogeneous parenchyma. Minor pancreatic duct dilation noted.

BREED

DSH

Free Abdomen

Focally enlarged mid abdominal mesenteric lymph nodes were present. Example measured 0.4 cm in diameter. 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.

SEX

Neutered Male

PRIMARY FINDINGS

- Urinary bladder sediment
- Interstitial nephrosis renal pattern
- Minor retained gastric fluid, possible mild gastric stasis
- Chronic enteropathy with concurrent subjective mild colitis – suspect chronic IBD, potential for neoplastic infiltrative enteropathy i.e., lymphoma.
- Suspect mild chronic pancreatitis
- Associated mesenteric lymphadenopathy – lymphoid hyperplasia or mild reactive lymphadenitis suspected. Less likely potential for emerging neoplastic lymphadenopathy.

AGE

12 Years

WEIGHT

7.7 Pounds

SECONDARY FINDINGS

- Probable benign splenic nodules – suggestive of myelolipomas.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended. Fresh fecal analysis recommended to assess for parasitic ova/giardia as well as GI panel to include PLI, TLI, cobalamin and folate. Intestinal +/- lymphatic biopsies are required for definitive diagnosis. Empirically, appropriate IBD protocol (which may include hydrolyzed diet trial, cobalamin supplementation, continued high colony count probiotics, and as-needed antibiotics +/- Prednisolone trial at lowest effective dose to control clinical signs with as-needed gastrointestinal support) is recommended.

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Summit Dog & Cat
Hospital

REFERRING VET

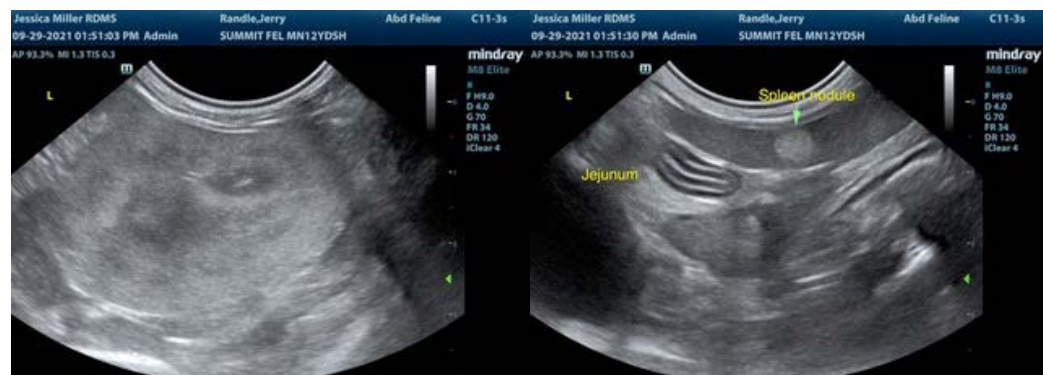
Dr. Lepkowski

INVOICE

25940

DATE

9/29/21





PATIENT

Jerry Randle

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.7 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Summit Dog & Cat
Hospital

REFERRING VET

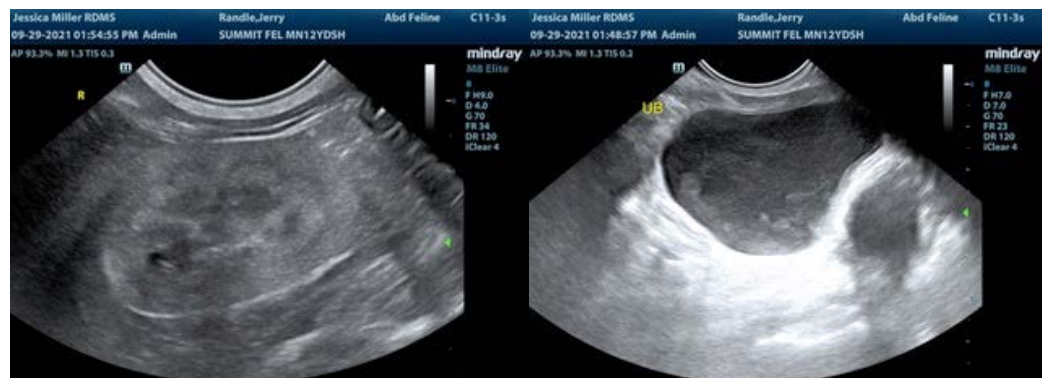
Dr. Lepkowski

INVOICE

25940

DATE

9/29/21





PATIENT

Jerry Randle

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.7 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Miller

HOSPITAL NAME

Summit Dog & Cat
Hospital

REFERRING VET

Dr. Lepkowski

INVOICE

25940

DATE

9/29/21