



PATIENT

Kami McClerin

PRESENTING CLINICAL SIGNS

SPECIES

Feline

Gender(altered?) FS Age: 7yrs Weight in #: 12.8 Breed: DSH Left sided unilateral mastectomy performed 6/28/21 due to mammary mass left caudal mammary gland. Biopsy revealed Mammary adenocarcinoma grade 1, complete excision, draining LN does not show any signs of metastasis. Blood panel and UA – alb 4.1 TG 222, PSL 27, CK 1041, proteinuria 2+ UPC WNL. Thoracic rads- Evidence mild chronic bronchitis/asthma. No indication of pulmonary metastasis.

BREED

DLH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Spayed Female

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 were noted.

AGE

7 Years

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 evidence of pelvic dilation. The kidneys measured 3.7 cm each.

WEIGHT

12.8 Pounds

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.33 cm in width. The right adrenal gland measured 0.44 cm in width.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

Spleen

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 0.99 cm in width at the level of the hilus.

IMAGING BY

Loetitia Saint-Jacques,
LVT

Liver

HOSPITAL NAME

Brighton Greens VH

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 common bile duct was dilated and tortuous without overt post hepatic obstruction.

REFERRING VET

Dr. Robin Janeway

Gastrointestinal

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.

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PATIENT

Kami McClerin 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. Duodenum wall measured 0.21 cm. Jejunum wall measured 0.20 cm.

SPECIES

Feline Ileocolic wall measured 0.33 cm. Normal visible colon wall layers were present with apparent formed feces in lumen.

BREED

Pancreas

DLH 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.

SEX

Free Abdomen

Spayed Female A focal pocket of scant free fluid was noted adjacent to and lateral to the spleen. No other evidence of peritoneal effusion noted. No evidence of intraabdominal lymphadenopathy or masses.

AGE

7 Years Sonographic assessment of the ventral subcutaneous space revealed a minor pocket of subcutaneous fluid in the area of the incision for mastectomy. This subcutaneous fluid did not appear to be significant.

WEIGHT

12.8 Pounds

ULTRASONOGRAPHIC FINDINGS

- Overall sonographically unremarkable abdomen
- Focal scant pocket of perisplenic free fluid – suspect incidental.
- Minor non-obstructive proximal common bile duct dilation

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The common bile duct dilation may suggest age related changes or secondary to underlying cholangitis / cholangiohepatitis especially if previous or current liver enzymes elevations have been noted.

IMAGING BY

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LVT

The focal scant pocket of peritoneal free fluid was not overtly suggestive of pathological free fluid, and is likely incidental given the lack of visceral pathology or lymphadenopathy. No overt evidence of intraabdominal metastasis from mammary adenocarcinoma.

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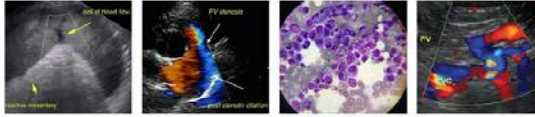
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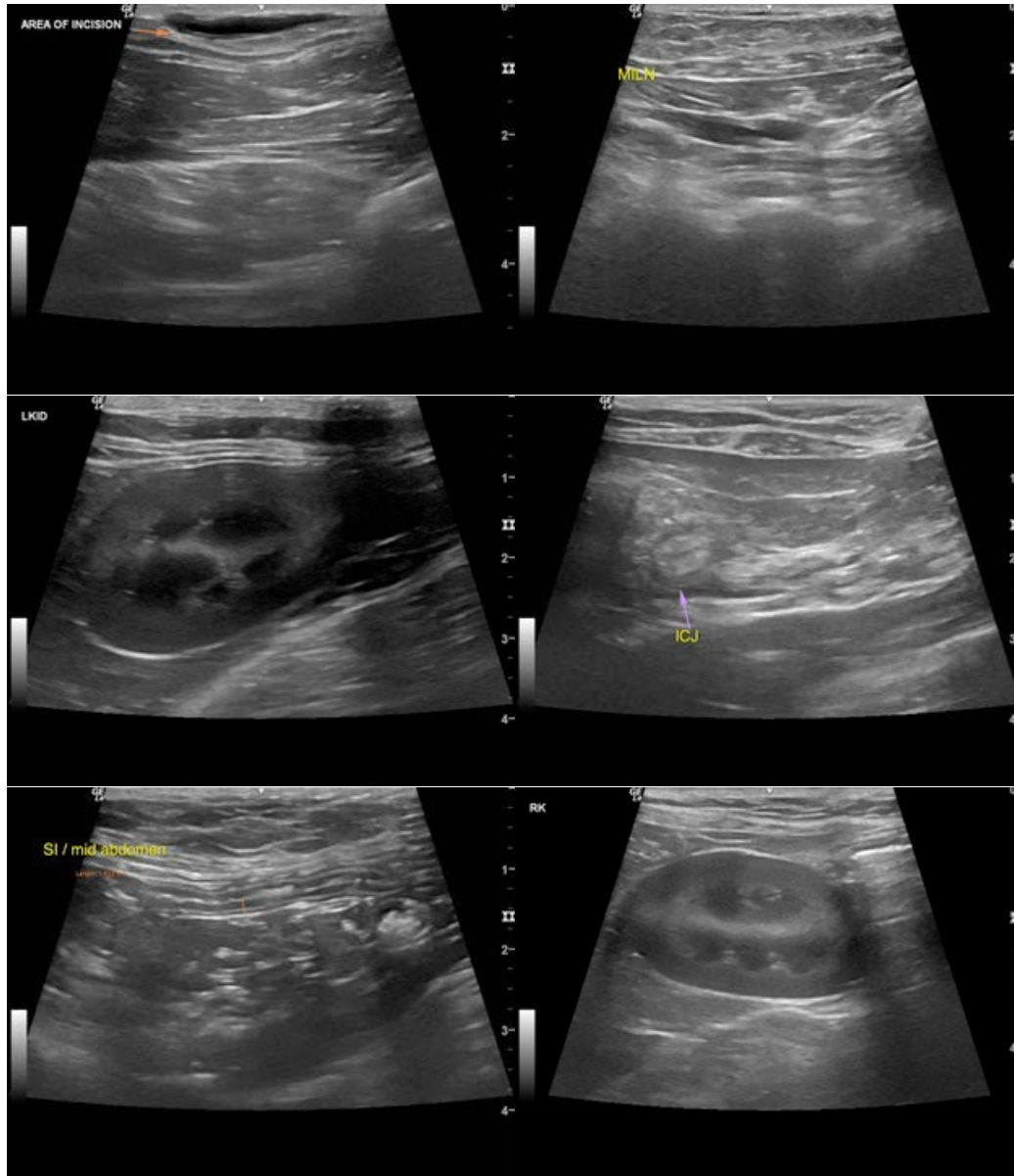
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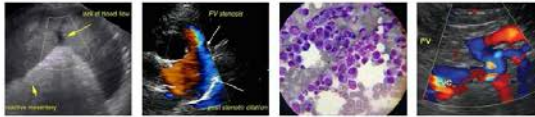
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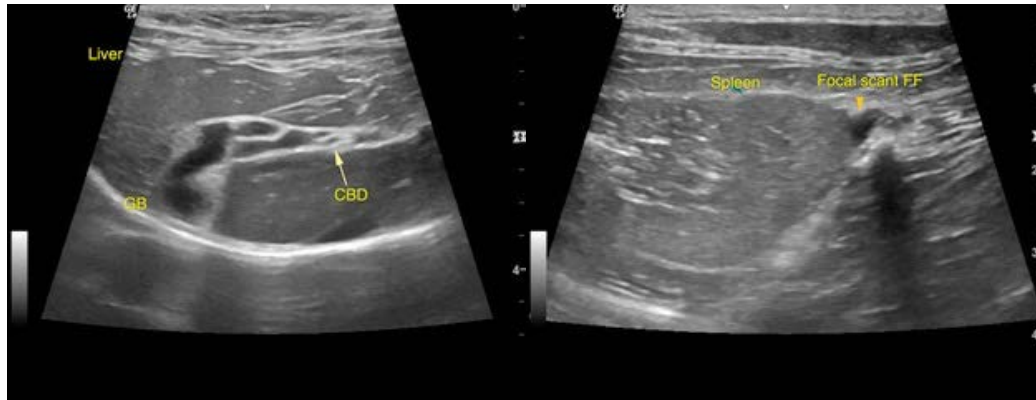
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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