



PATIENT PRESENTING CLINICAL SIGNS

Annie McNeff History: Losing weight, but just diagnosed with hyperthyroidism. Want to make sure no other pathology prior to pursuing I-131 therapy. Other labs unremarkable except mild renal disease.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline **Urinary System**

The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted. Urethra visualized to 3.0 cm.

BREED

DSH

Both kidneys are hyperechoic and exhibit mildly decreased cortico-medullary differentiation. There is no evidence of nephrolithiasis, mineralization, pyelectasia or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 3.8 cm in length. The right kidney is 3.9 cm in length.

SEX

Spayed Female

Adrenal Glands

The adrenal glands are both identified in their normal locations. They are normal in size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The left adrenal gland height is 3.7 mm at the caudal pole. The right adrenal gland height 3.5 mm at the caudal pole.

AGE

16 years

Spleen

There are multiple hyperechoic masses within the splenic parenchyma, with no visible deviation of the splenic capsule. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal. The spleen measures 9.20 mm at the hilus.

WEIGHT

9.4 lbs

Liver

The liver is of appropriate size and shape, with sharp borders and a mildly coarse parenchymal echotexture that is hypoechoic to the spleen. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

INTERPRETED BY

Tam Mengine, DVM,
DABVP (canine/feline
practice)

The gallbladder is moderately distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

IMAGING PERFORMED BY

Dr. Tam Mengine

Gastrointestinal

The stomach is moderately distended with normal ingesta. The gastric wall is 2.2 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.

HOSPITAL NAME

West Chester VMC

The visualized portions of the duodenum, jejunum, and ileum are at the upper limits of normal thickness with intact wall layering that exhibit the appropriate 1:3 muscularis to mucosa ratio. There is focal mucosal fogging noted within the small bowel. Intestinal motility appears normal. The duodenal wall measures 2.4 mm. The jejunal wall measures urinary tract to 2.7 mm.

REFERRING VET

Dr. Alicia Smith

The visible portions of the colon are of normal thickness, up to 1.0 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

Pancreas

The areas of the limbs and body of the pancreas are isoechoic to the surrounding mesenteric fat, with normal capsular appearance. There is no evidence of peripancreatic inflammation. The pancreatic duct appears normal.

INVOICE

13522

DATE

6.28.23



PATIENT *Free Abdomen*

Annie McNeff

There is no evidence of free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are of appropriate echogenicity. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis.

SPECIES **ULTRASONOGRAPHIC FINDINGS**

Feline **Primary Findings**

BREED

- Small intestinal mucosal fogging, which can be a normal variation, but may also be associated with inflammation.

DSH

Secondary Findings

SEX

- Chronic renal changes

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

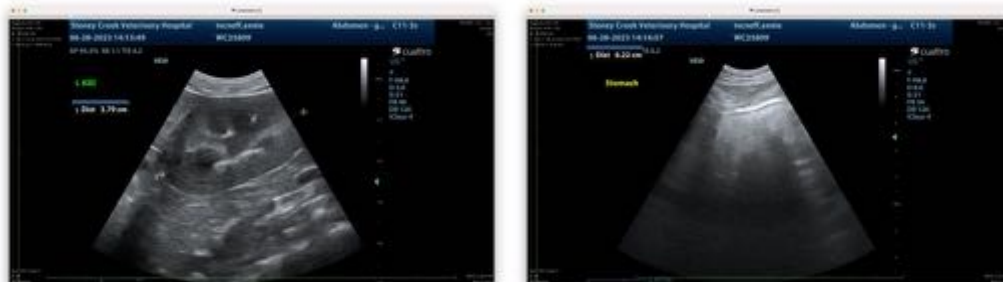
AGE

16 years

The changes to the small intestines are mild and may be an incidental finding. However, if the patient continues to lose weight even after treatment of the thyroid disease, then a GI panel would be recommended to rule out the possibility of inflammatory bowel disease or exocrine pancreatic insufficiency.

WEIGHT

9.4 lbs



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**IMAGING
PERFORMED BY**

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HOSPITAL NAME

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PATIENT

Annie McNeff

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.

Tam Mengine, DVM, DABVP (canine/feline practice) info@SonoPath.com

BREED

DSH

SEX

Spayed Female

AGE

16 years

WEIGHT

9.4 lbs

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