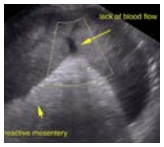
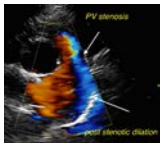
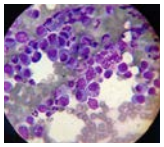
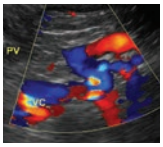
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Pouf Ohlerking

SPECIES
Feline

BREED
Siamese

SEX
Neutered Male

AGE
5 Years

WEIGHT
13 Pounds

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

IMAGING PERFORMED BY
Dr. Tam Mengine

HOSPITAL NAME
Stoney Creek VH

REFERRING VET
Dr. Tam Mengine

INVOICE
40189

DATE
8/4/22

PRESENTING CLINICAL SIGNS

Seen 5/22 for vomiting and weight loss - CBC / Chem / T4 unremarkbale except creat 2.2, U/A showed SpGr 1.058, marked hematuria / pyuria, negative culture. Since that visit, has gained weight back and stopped vomiting, but continues to have stranguria / hematuria, no improvement with urinary diet, onsior dasuquin, amitryptiline, pred trial. Recheck U/A showed cocci so received convenia - still no improvement.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. There is a small amount of suspended echogenic sediment The mucosa is focally irregular with a small amount of mineralized sediment adhered to the wall. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses or calculi are noted.

The kidneys are of normal size and shape and exhibit appropriate corticomedullary differentiation with a normal 1:3 cortex to medulla ratio. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureter is not visible (normal). The left kidney measures 3.9 cm. The right kidney measures 3.9 cm.

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 measures 2.0 mm at the cranial pole and 2.7 mm at the caudal pole. The right adrenal gland measures 3.3 mm at the cranial pole and 3.2 mm at the caudal pole.

Spleen

The spleen is of appropriate size (7.8 mm at the hilus) and has a normal, homogenous parenchyma with a smooth, continuous capsular surface. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.

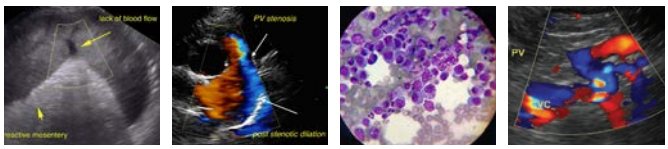
Liver

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.

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.

Gastrointestinal

The stomach is empty except for a trace amount of hair density material. The gastric wall is normal (2.5 mm thick) with deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Pouf Ohlerking

SPECIES

Feline

BREED

Siamese

SEX

Neutered Male

AGE

5 Years

WEIGHT

13 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Tam Mengine

HOSPITAL NAME

Stoney Creek VH

REFERRING VET

Dr. Tam Mengine

INVOICE

40189

DATE

8/4/22

The small bowel has focal changes to the normal 1:3 muscularis to mucosa ratio. Wall measurements are slightly increased up to 3.0 mm. Overall wall layering is preserved. The visualized portions of the duodenum appear normal with a wall thickness of 2.7 mm.

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

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.

Free Abdomen

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.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS:

- Mild inflammatory change in the urinary bladder

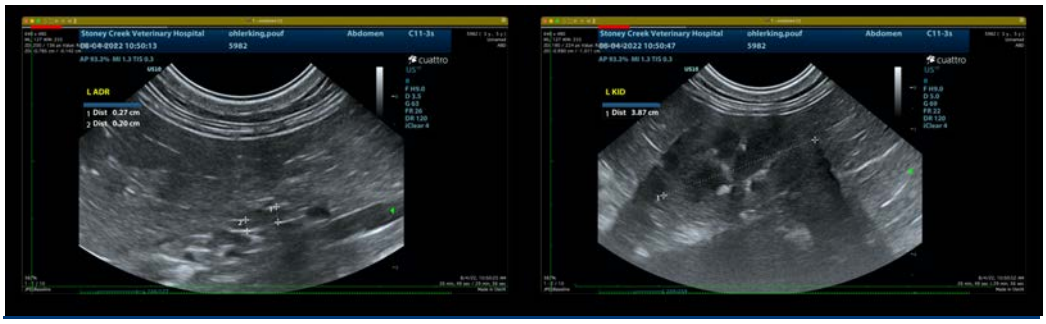
SECONDARY FINDINGS:

- Mild small intestinal changes – consistent with inflammatory bowel disease.

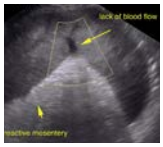
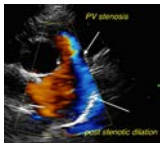
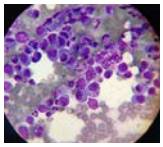
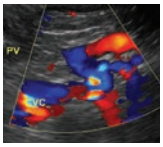
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes in the bladder are most consistent with feline lower urinary tract disease. Numerous appropriate therapies have been tried without response. Dietary modification to dilute the urine may be of benefit. Given the prior history of bacteriuria, a follow up urine culture is also recommended.

The changes in the small bowel are of uncertain significance. Given the prior history of vomiting and weight loss, a hydrolyzed diet trial could be considered. If gastrointestinal signs recur or progress, then additional workup such as a GI panel and fecal parasite testing are recommended. A biopsy would be needed to definitively diagnose any intestinal disease.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Pouf Ohlerking

SPECIES

Feline

BREED

Siamese

SEX

Neutered Male

AGE

5 Years

WEIGHT

13 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Tam Mengine

HOSPITAL NAME

Stoney Creek VH

REFERRING VET

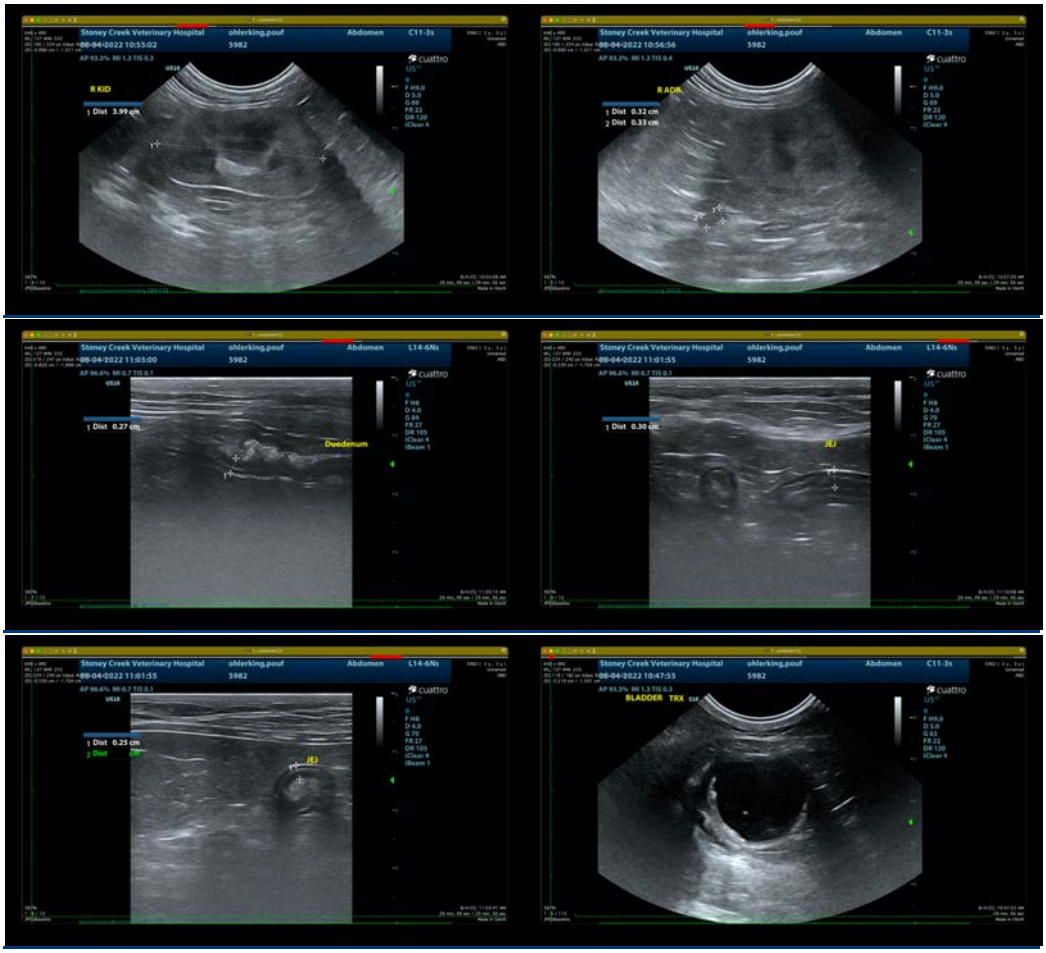
Dr. Tam Mengine

INVOICE

40189

DATE

8/4/22



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.

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

info@SonoPath.com