

**PATIENT PRESENTING CLINICAL SIGNS**

Murple Lupinaccio History: Hx IBD, continued vomiting and weight loss on steroid.  
Current meds: last dose Pred 5mg/ml 8/2 PM  
**SPECIES** Abnormal PE/Chem/CBC/UA Results: Mono 1132, K 5.3, TLI 96.4, B12 171

Feline **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED** *Urinary System*

Siamese The urinary bladder is moderately distended with anechoic urine. A large amount of echogenic luminal sediment is present, which is freely-movable. 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.

**SEX**

Neutered Male

**AGE**

10 years

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 is 3.9 cm in length. The right kidney is 4.3 cm in length.

**WEIGHT**

6.7 lbs

*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 2.8 mm at the caudal pole. The right adrenal gland height 5.3 mm at the caudal pole.

**INTERPRETED BY**

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

*Spleen*

The spleen is of appropriate size 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. Thickness at the splenic hilus is normal at 5.5 mm.

**IMAGING PERFORMED BY**

Jessica Miller, RDMS

*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.

**HOSPITAL NAME**

The Gentle Vet

The gallbladder is moderately distended with anechoic contents and a small amount of freely-moveable echogenic sludge. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

**REFERRING VET**

Dr T

*Gastrointestinal*

The stomach is empty. The gastric wall is subjectively normal in thickness, and exhibits appropriate wall layering, but cannot be accurately measured due to normal deviations of the rugal folds. The pylorus is of normal appearance.

**INVOICE**

13968

The small bowel has diffuse changes to the normal 1:3 muscularis to mucosa ratio, with a focal loss of wall layering. Wall measurements are increased, up to 2.4 mm for duodenum and 3.6 mm for jejunum. Intestinal motility appears normal.

**DATE**

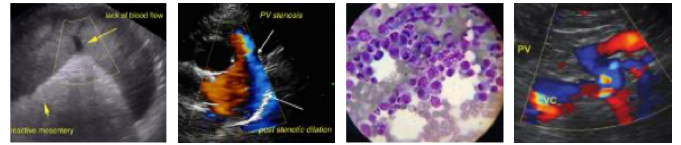
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The visible portions of the colon are of normal thickness, up to 1.5 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

*Pancreas*

Both limbs of the pancreas is swollen and hypoechoic, surrounded by hyperechoic mesenteric fat. The pancreatic duct appears normal.





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**SPECIES**

Feline

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Siamese

**SEX**

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**AGE**

10 years

**WEIGHT**

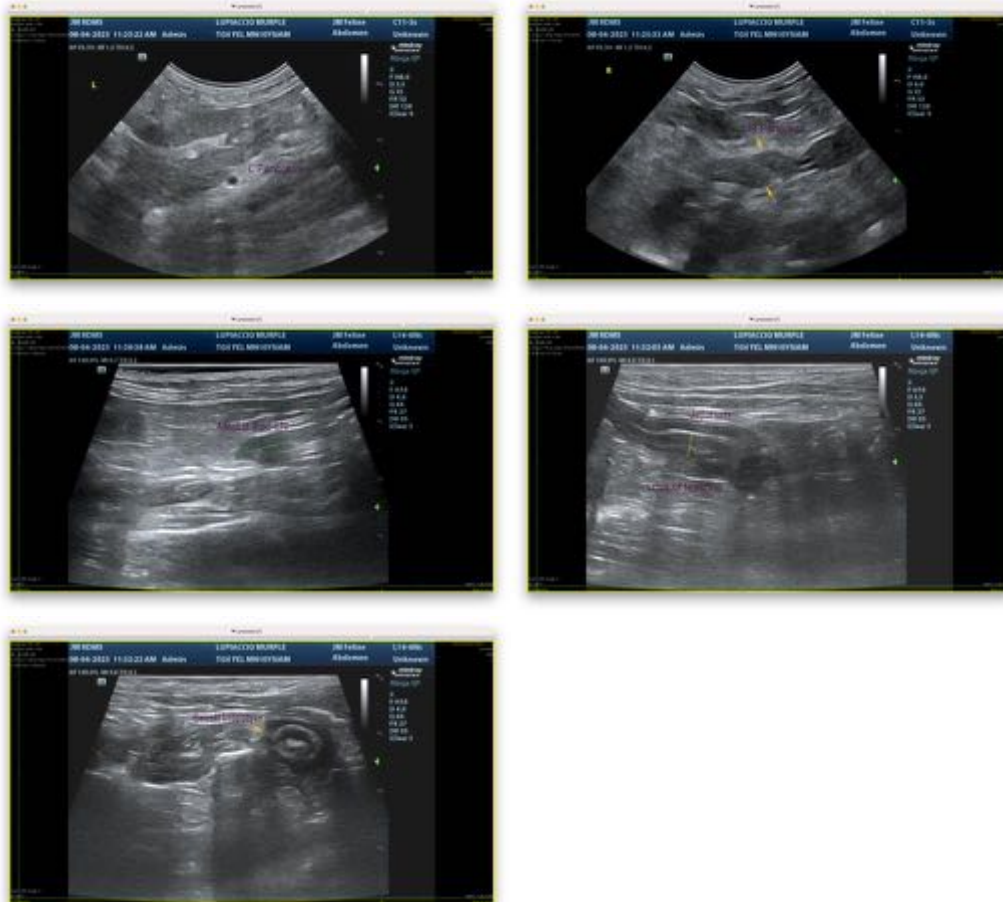
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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