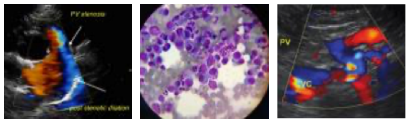
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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**DATE**

12.27.2022

**PATIENT**

Old Cat Johnson

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

10/15/2010

**WEIGHT**

6.7 lbs

**INTERPRETED BY**

Andrea Nicastro, DMV, Diplomate DACVIM (Small Animal Internal Medicine)

**HOSPITAL NAME**

Timonium Animal Hospital

**REFERRING VET**

Dr. Stephens

**INVOICE**

11939

## PRESENTING CLINICAL SIGNS

Chronic diarrhea. Thin despite great appetite.

Current Medications: None listed.
Lab Results: T4 high/normal 3.4, Neutrophilia (improving since dental with many extractions) 21.7k/uL, FIV+

Date of Previous IntraPet Ultrasound: No previous.
Sedation: Declined.
Stat Report: Not requested.
Imaging Performed By: Andi Parkinson, BS, RDMS.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. The region of the trigone is normal.

The left kidney is normal size (4.31 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild to moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

The right kidney is normal size (3.78 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild to moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

### *Adrenal Glands*

The left adrenal gland is normal size (0.41 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.48 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

### *Spleen*

The spleen is normal in size (0.95 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

### *Liver*

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen. A 1.08 cm multiseptated cystic nodule is observed deep on the left side adjacent to the gall bladder. The remaining parenchyma is homogenous. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal.

### *Gastrointestinal*

The gastric lumen is mildly distended with ingesta. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally dilated with chyme. The small

intestinal wall is normal to mildly thickened (up to 0.38 cm) with retention of the normal layering pattern. There is disruption in the normal 1:3 muscularis: mucosal ratio in several segments. Discreet masses are not identified. The ileocecocolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

***Pancreas***
The pancreas is diffusely enlarged with slightly irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat and homogenous in appearance. No focal lesions are observed. The pancreatic duct is dilated (0.31 cm in diameter).

***Free Abdomen***
There is no evidence of free fluid. A few prominent mesenteric lymph nodes are visualized (the largest measuring 1.30 cm in length). The nodes are normal in shape and echogenicity. Surrounding mesentery is slightly hyperechoic.

## ULTRASONOGRAPHIC FINDINGS

### Primary Findings

- The pancreatic changes are most consistent with chronic pancreatitis.
- The small intestinal wall changes are consistent with inflammatory bowel disease with potential for emerging lymphoma.

### Secondary Findings

- The abdominal lymphadenopathy is most consistent with reactive change, with a lower possibility of emerging neoplasia.
- The cystic hepatic nodule is most consistent with a biliary cystadenoma with a lower possibility of biliary cystadenocarcinoma.
- Bilateral chronic age-related renal changes with dystrophic mineralization

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Given the patient's clinical history and sonographic changes, consider the following:

    1. Fecal evaluation for ova and Giardia
    2. Fecal PCR infectious disease panel
    3. Prophylactic deworming with Fenbendazole
    4. Malabsorption panel, including serum cobalamin and folate, TLI and PLI
    5. Limited antigen or hydrolyzed protein diet trial
    6. Consider initiation of a probiotic and fiber supplement.
    7. Depending on the results of the above diagnostics/therapeutics, endoscopic or surgical GI biopsies may be necessary to get a definitive diagnosis. Thoracic radiographs should be performed prior to anesthesia.


IntraPet Imaging APILLC
johnson,old cat
IntraPet linear
L14-6Ns
12-27-2022 09:01:58 AM Admin
TAHpjfeldshfs2010
mindray
Dist 0.28 cm


IntraPet Imaging APILLC
johnson,old cat
IntraPet linear
L14-6Ns
12-27-2022 09:02:15 AM Admin
TAHpjfeldshfs2010
mindray
Spleen


IntraPet Imaging APILLC
johnson,old cat
IntraPet abd...
C11-3s
12-27-2022 08:56:59 AM Admin
TAHpjfeldshfs2010
mindray
Liver
Dist 0.76 cm


TIS 0.3
mindray
ICC,I


IntraPet Imaging APILLC
johnson,old cat
IntraPet abd...
C11-3s
12-27-2022 08:57:35 AM Admin
TAHpjfeldshfs2010
mindray
Cranial
Stomach


IntraPet Imaging APILLC
johnson,old cat
IntraPet abd...
C11-3s
12-27-2022 08:57:59 AM Admin
TAHpjfeldshfs2010
mindray
Pancreas


IntraPet Imaging APILLC
johnson,old cat
IntraPet abd...
C11-3s
12-27-2022 08:59:10 AM Admin
TAHpjfeldshfs2010
mindray
RT
Dist 0.48 cm
Rt adr


IntraPet Imaging APILLC
johnson,old cat
IntraPet abd...
C11-3s
12-27-2022 08:59:59 AM Admin
TAHpjfeldshfs2010
mindray
LT
Dist 0.41 cm
Lt adr


**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.

**Andrea Nicastro**, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com