


PATIENT PRESENTING CLINICAL SIGNS

Bandit Kasowska
 History: Not eating, vomiting, hiding and lethargic. IV fluids, Ampicillin, Metronidazole and Cerenia.
 Abnormal PE/Chem/CBC/UA Results: ALT greater than 2000, GGT high, Bilirubin high, xrays NSF.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline *Urinary System*

BREED
 Himalayan
 The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of aggregated echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

SEX
 Male, neutered
 The left kidney is normal size (3.83 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE
 4 Yrs.
 The right kidney is normal size (4.28 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT *Adrenal Glands*

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

INTERPRETED BY
 The right adrenal gland is normal in size (0.37 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Andrea Nicastro, DVM,
 Diplomate ACVIM
 (Small Animal Internal
 Medicine)

Spleen

The spleen is normal to slightly prominent in size (1.00 cm in width at the level of the hilus) with normal curvilinear peripheral contours. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

IMAGING PERFORMED BY

Crystal Hill

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The portal vein: caudal vena cava ratio is approximately 1:1. The gall bladder lumen is moderately distended. The wall is normal in thickness. A small amount of gravity-dependent mineralized debris +/- tiny choleliths are observed within the lumen. The cystic and common bile ducts are visible but not overtly dilated. The common bile duct measures 0.20 cm in diameter. There is no obvious evidence of an intraluminal obstruction.

HOSPITAL NAME

Dog and Cat Clinic of
 Niagara

REFERRING VET

Dr. Habib

Gastrointestinal
INVOICE

12303

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall

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thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

Pancreas

SPECIES

Feline

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated (0.14 cm in diameter). There is no evidence of peripancreatic inflammation or effusion.

BREED

Himalayan

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

SEX

Male, neutered

ULTRASONOGRAPHIC FINDINGS

AGE

4 Yrs.

Primary Findings:

- An obvious cause for the elevated liver enzymes is not identified in the study. However, a microscopic hepatopathy (i.e., bacterial cholangiohepatitis, lymphoplasmacytic hepatitis, hepatic lipidosis, infiltrative neoplasia (less likely)) cannot be excluded.
- Gallbladder sand +/- tiny choledocoliths - incidental.

WEIGHT

10.2 lbs.

Secondary Findings:

- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended.

INTERPRETED BY

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(*Small Animal Internal
Medicine*)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Fine needle aspirate of the liver is recommended (if clotting status is normal). A 25-gauge needle should be used. If cytologic evaluation is inconclusive and an aggressive approach is desired, consider a surgical liver biopsy with aerobic and anerobic bile cultures. In the meantime, empirical treatment for bacterial cholangiohepatitis/hepatic lipidosis is recommended, including broad spectrum antibiotic therapy (i.e., amoxicillin clavulanic acid +/- Metronidazole), hepatic antioxidants and supportive care. Nutritional support (i.e., via temporary feeding tube) is also strongly recommended to help prevent/treat hepatic lipidosis.
- Three-view thoracic radiographs should also be considered to evaluate cardiopulmonary status.
- Consider a malabsorption panel to assess for concurrent pancreatic and microscopic small intestinal disease.

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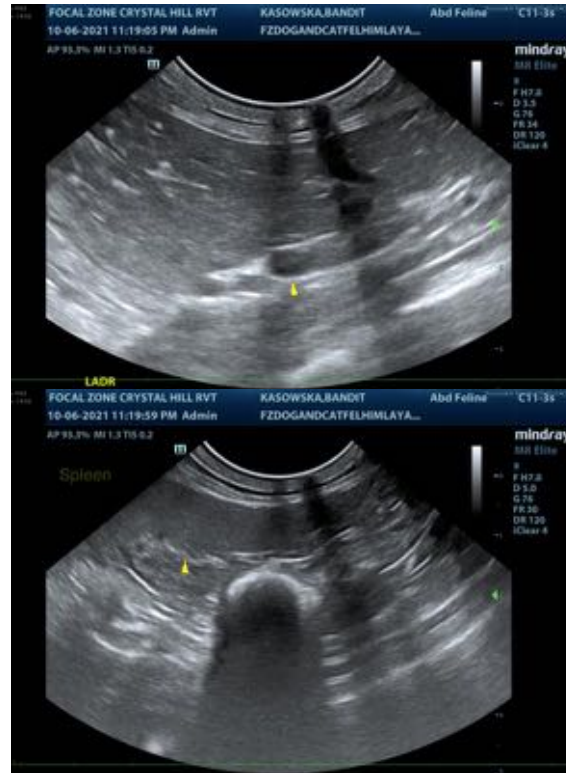
Dr. Habib

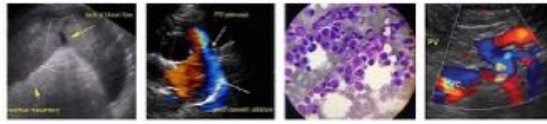
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

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