



PATIENT	PRESENTING CLINICAL SIGNS
Boo Hurst	Presented for wellness exam - o mentioned that Boo has had increased appetite at home in addition to increased urination with no straining noted. Senior bloodwork recommended at that time and sent to Idexx. No suggestion of thyroid or renal disease - recommended abdominal U/S as next step.
SPECIES	Abnormal PE/Chem/CBC/UA Results: CBC - nsf Chem - nsf T4 - 3.9 (0.8-4.7) *previously 2.9 Free T4 (ng/dL): < 0.3 (0.7-2.6) Free T4 (pmol/L): < 3.9 (9.0-33.5) U/A: UsG -1.018, pH - 7.5, prot - trace, RBC - 6-10/hpf, WBC - 0-2/hpf, no bacteria or crystals
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Domestic Shorthair	Urinary System
SEX	Urinary bladder is moderately distended with anechoic contents. It has normal uniform wall thickness (< 0.2 cm). No masses or cystoliths are observed.
Spayed Female	
AGE	Left kidney is normal in size (3.5 cm), shape and echogenicity. It has smooth peripheral margination and appropriate corticomedullary distinction. There is no pyelectasia noted. No mineral is observed.
17 years	Right kidney is normal in size (3.9 cm), shape and echogenicity. It has smooth peripheral margination and appropriate corticomedullary distinction. There is no pyelectasia noted. No mineral is observed.
WEIGHT	Adrenal Glands
8.44 lbs	Bilaterally uniformly plump egg-shaped adrenals and hypoechoic in echogenicity. The left adrenal gland measured 1.0 x 0.5 cm and the right adrenal gland measures 0.97 x 0.42 cm.
INTERPRETED BY	Spleen
Beth Johnson, DVM DACVIM	Spleen is subjectively normal in size with normal smooth margins. Parenchyma is normal in echogenicity and echotexture. No focal nodules or masses are observed. Splenic vasculature appears normal.
IMAGING PERFORMED BY	Liver
Jack Reese	Liver is subjectively enlarged. Margins are smooth but round. It has a normal homogenous echotexture. Parenchyma is diffusely hyperechoic characterized by less prominent than normal portal vein walls and increased echogenicity relative to the spleen. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.
HOSPITAL NAME	REFERRING VET
Willow Run VC	Dr. Leppien
INVOICE	Gallbladder is mildly distended with anechoic contents. The wall is smooth without visible thickening. There is no evidence of common bile duct dilation.
95211	Gastrointestinal
DATE	The visible gastric wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm). The stomach is empty.
1/12/22	



PATIENT

Boo Hurst

The small intestines are normal in layering except for a diffusely disproportionately thick muscularis layer relative to mucosa. Small intestinal motility appears adequate (1-3 contractions per min). There are no luminal contents noted within small intestines.

SPECIES

Feline

Colon is normal in wall thickness (< 0.2 cm) and layering.

Pancreas

BREED

Domestic Shorthair

Pancreas has normal homogenous echotexture and is normal in echogenicity and smooth margination. There is no evidence of peripancreatic inflammation.

SEX

Spayed Female

Free Abdomen

Lymph nodes are normal with no observed enlargement.

AGE

17 years

ULTRASONOGRAPHIC FINDINGS

Primary Findings

WEIGHT

8.44 lbs

- Feline age related adrenomegaly – likely a benign age-related change. This change can be caused by chronic stress/disease, so investigation for/management of other disease (chronic kidney disease, hyperthyroidism, etc.) is recommended.
- Hyperechoic hepatomegaly feline – consistent with benign hepatic lipodosis. Infiltrative disease such as amyloidosis or neoplasia, such as mast cell tumor or less likely, lymphoma, is also possible.
- Feline thick muscularis– This finding has been reported in cats with infiltrative bowel disease including both benign inflammatory disease as well as infiltrative neoplasia such as lymphoma.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Willow Run VC

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the increased appetite, but rule out of diabetes mellitus and hyperthyroidism so far include: a gastrointestinal malabsorption panel including TLI, PLI, folate and cobalamin to Texas A&M GI laboratory. Other recommendations given the thick muscularis and hepatomegaly include a FNA of the liver to rule out lymphoma, if the patient's coagulation status is appropriate. Given that the T4 is at the high end of normal range recommendations include rechecking a T4 in 3 months in case these clinical signs are due to early hyperthyroidism. In the meantime, empirical therapy with a diet change to a hydrolyzed or novel protein diet as well as possible cobalamin supplementation may be considered.

REFERRING VET

Dr. Leppien

INVOICE

95211

DATE

1/12/22



PATIENT

Boo Hurst

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

17 years

WEIGHT

8.44 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

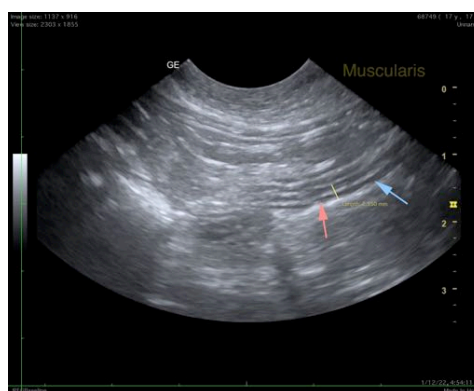
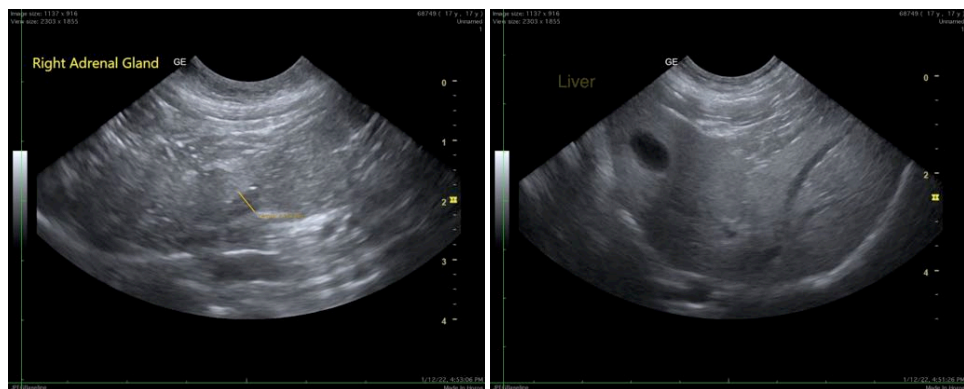
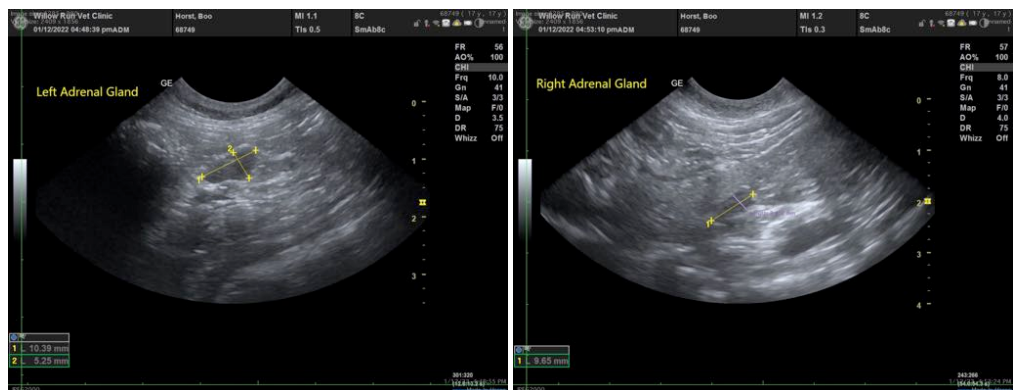
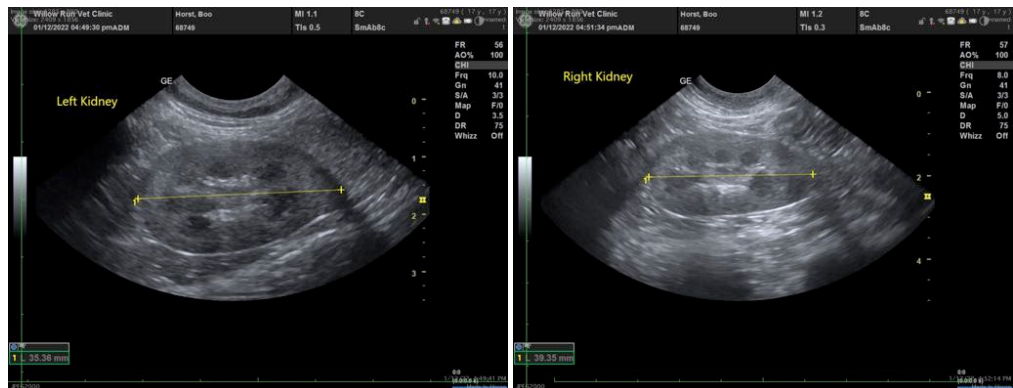
Dr. Leppien

INVOICE

95211

DATE

1/12/22





PATIENT

Boo Hurst

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.

BREED

Domestic Shorthair

Beth Johnson, DVM DACVIM

Beth.Johnson@SonoPath.com

SEX

Spayed Female

AGE

17 years

WEIGHT

8.44 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

**IMAGING
PERFORMED BY**

Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

Dr. Leppien

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