



PATIENT	PRESENTING CLINICAL SIGNS
Kai Deitrich	10 yo MN Siamese, history of elevated ALT (>2,000 in August of 2021), greatly improved to WNL with course of metro and baytril. 3/22/2022 ALT: 240. AUS from August 2021 Polypoid cystitis pattern • Age-related renal changes • Cholangiohepatitis liver pattern with minor biliary dilation
SPECIES	Abnormal PE/Chem/CBC/UA Results: chemistry panel pending Liver aspirates done at RBVH: Cytology (liver FNA): uniform hepatocytes with mild lipid vacuolar change, probable fibrosis. Moderate lymphocyte predominant mixed inflammation. - May indicate lymphocytic cholangitis or a reactive hepatitis associated with other underlying visceral inflammation such as pancreatitis, enteritis, triaditis.
Feline	
BREED	
Siamese	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
	Urinary System
SEX	The urinary bladder presents similar appearing apical polypoid changes without evident luminal debris.
Neutered Male	The right kidney is normal in size (4.43 cm) and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased echogenicity and mild loss of corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
AGE	
10 Years	The left kidney is normal in size (4.29 cm) and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased echogenicity and mild loss of corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
WEIGHT	
16 Pounds	Adrenal Glands
	There is no evident pathology in the area of the adrenal glands.
INTERPRETED BY	Spleen
Beth Johnson, DVM DACVIM	Spleen is subjectively enlarged in size with rounded margins but intact capsule. Parenchyma is homogenously coarse/mottled in echotexture and normal to hypoechoic in echogenicity. No focal nodules or masses are observed. Splenic vasculature appears normal.
IMAGING PERFORMED BY	Liver
Dr. Elaina Petrone	The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.
HOSPITAL NAME	
Long Branch AH	The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. The cystic duct and common bile duct are tortuous and thickened, and mildly dilated, measuring 0.43 cm with no overt obstruction noted all the way to the duodenal papilla.
REFERRING VET	Gastrointestinal
Dr. Elaina Petrone	The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.
INVOICE	
36788	The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions
DATE	
4/6/22	



PATIENT

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per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

SPECIES

Feline

Pancreas

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

BREED

Siamese

Free Abdomen

Reactive mesenteric lymphadenopathy is present around the ileocecolic junction. No other lymphadenopathy and/or free fluid noted in these images.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

AGE

10 Years

- The findings in this study are similar to the previous report with a thick, dilated biliary system, most consistent with cholangiohepatitis and no overt obstruction present.

WEIGHT

16 Pounds

- Polypoid cystitis

- Age related renal changes

- Coarse splenomegaly – can be associated with congestion caused by sedation (if sedated) but can also be associated with diffuse infiltrative disease. Both benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis as well as infiltrative neoplastic diseases such as round cell neoplasia should be considered.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

- Reactive mesenteric lymphadenopathy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Dr. Elaina Petrone

Further diagnostic recommendations could include a fine needle aspirate of the spleen if patient's coagulation status is appropriate. Premedication with Benadryl is recommended in case mast cell tumor is present.

HOSPITAL NAME

Long Branch AH

Urinalysis and urine culture are recommended if not recently evaluated.

REFERRING VET

Dr. Elaina Petrone

Given the recurrence of suspected cholangiohepatitis as well as the lymphadenopathy in the area of the ileocecolic junction, concurrent gastrointestinal disease and/or even pancreatitis contributing to "Triaditis" is likely, and a gastrointestinal malabsorption panel including TLI, PLI, folate and cobalamin to Texas A&M GI laboratory is recommended for further assessment of the gastrointestinal tract and pancreatitis. If there is evidence of gastrointestinal disease and/or dysbiosis, management of that may prevent ascending bacterial cholangiohepatitis flare ups.

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In the meantime, medical management of cholangiohepatitis with broad-spectrum antibiotics +/- Denamarin and Ursodiol is recommended. A probiotic could also be considered long-term with the goal of preventing these episodes.

DATE

4/6/22



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SPECIES

Feline

BREED

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AGE

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IMAGING PERFORMED BY

Dr. Elaina Petrone

HOSPITAL NAME

Long Branch AH

REFERRING VET

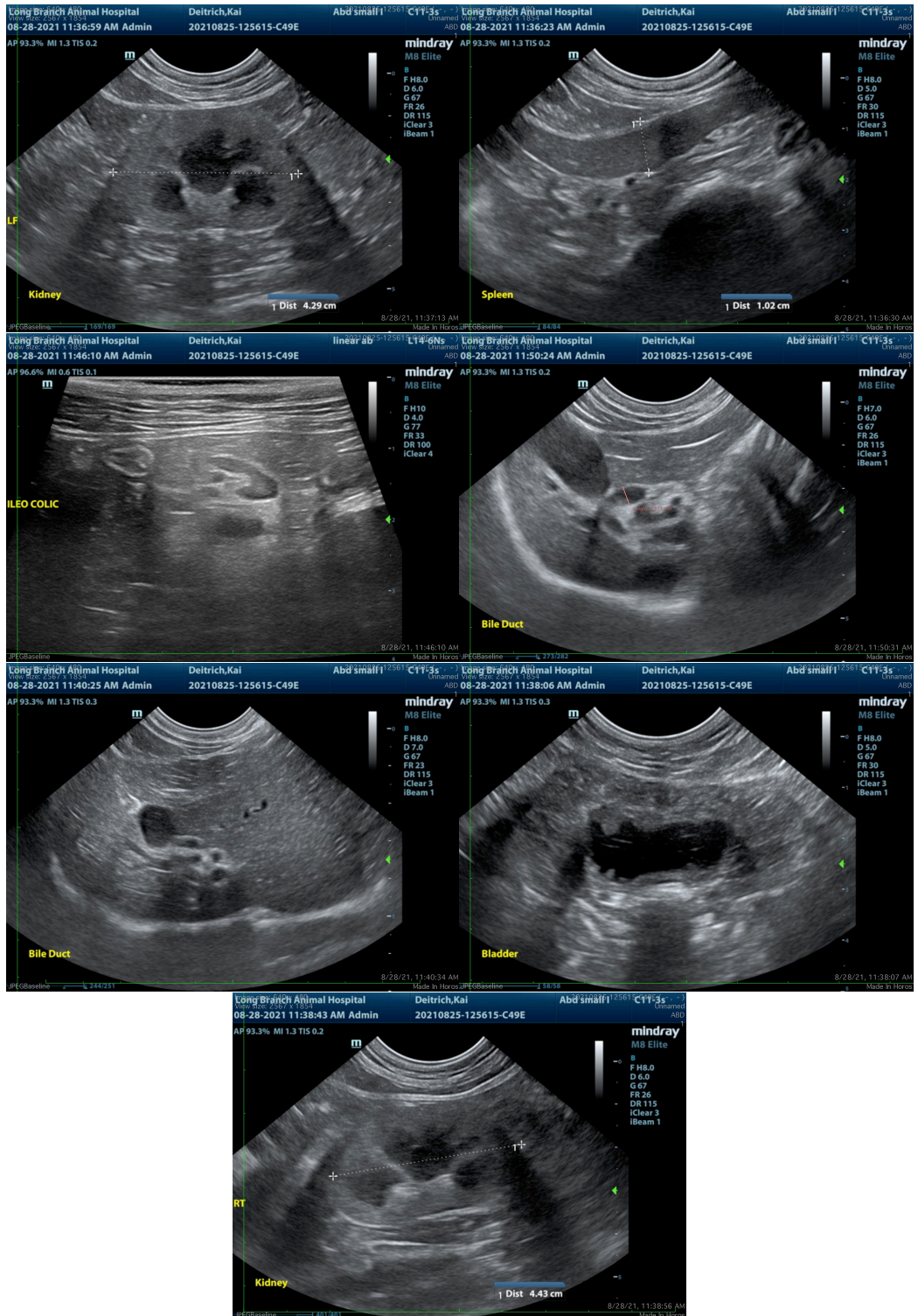
Dr. Elaina Petrone

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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.

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.

Beth Johnson, DVM, DACVIM

Beth.Johnson@sonopath.com

BREED

Siamese

SEX

Neutered Male

AGE

10 Years

WEIGHT

16 Pounds

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