



PATIENT

Bailey Valent

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

8 Years

WEIGHT

9 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Adrienne Ligenza

HOSPITAL NAME

Rush Vet Urgent Care

REFERRING VET

Dr. Taylor Urban

INVOICE

33434

DATE

12/15/21

PRESENTING CLINICAL SIGNS

suspected hemobartonellosis by rDvm, decreased appetite prior to visit, now eating on Mirtazapine, VERY jaundice
Abnormal PE/Chem/CBC/UA Results: Bilirubin was 27 now today 25

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Corticomedullary calculi noted, non-obstructive. The left kidney measured 4.58 cm. The right kidney measured 4.26 cm. Cortical infarcts noted in both kidneys. Blood flow to the kidneys appeared to be adequate.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.31 cm. The right adrenal gland measured 0.34 cm.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver & Pancreas

A complex 5.0 cm mixed hypoechoic and cystic mass was noted at the termination of the common bile duct, deriving either from the **liver** or the **pancreas**. Regional inflammation obscured complete visibility. The gallbladder was thickened and echogenic with calculi. Lobar biliary duct dilation noted, consistent with post-hepatic obstruction.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.



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ULTRASONOGRAPHIC FINDINGS

- Renal dystrophy with calculi, infarcts, interstitial nephrosis pattern
- Hepatic or pancreatic mass

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Biliary carcinoma suspected. Abscessation or granulomatous disease possible, yet less likely. FNA could be considered or surgical intervention. Prognosis is guarded to poor.

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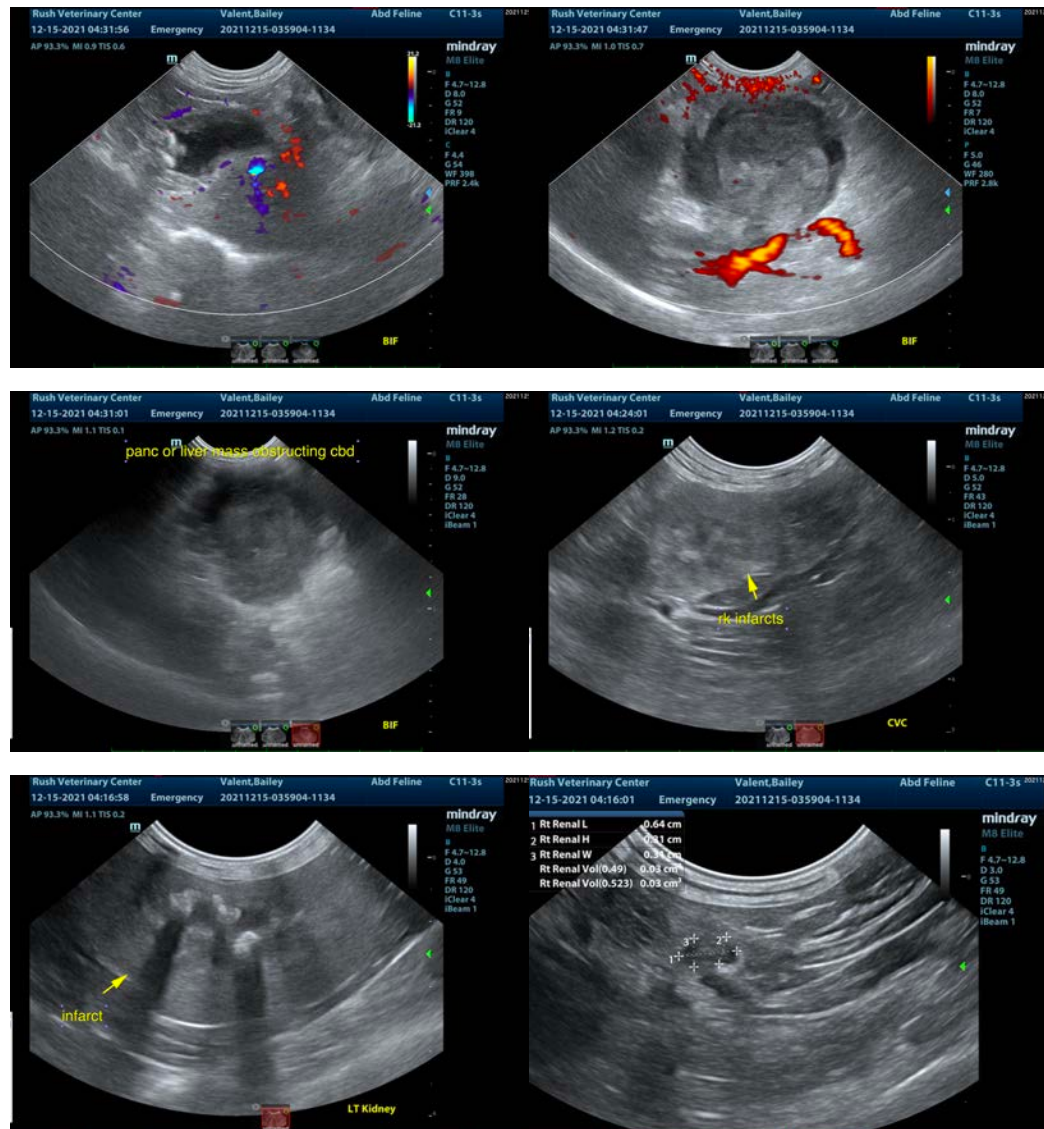
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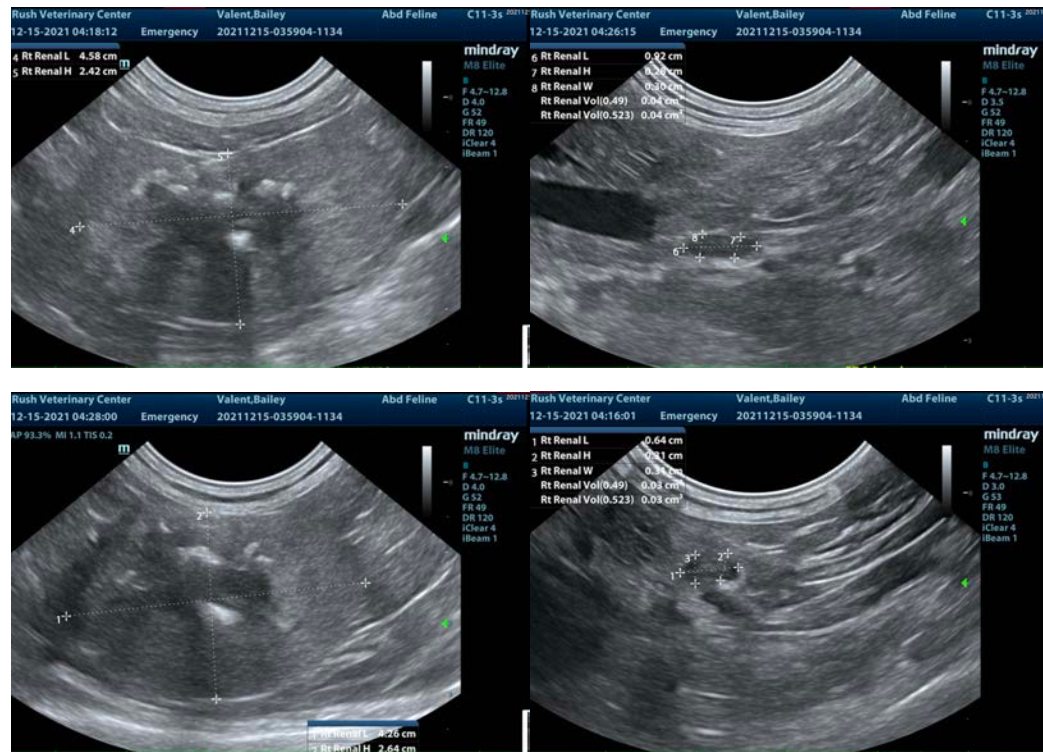
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com