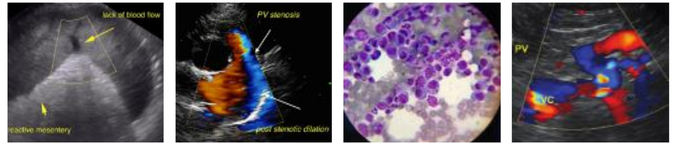
# SonoPath

Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™





SonoPath.com

1-800-838-4268 info@sonopath.com


**PATIENT**

Velcro Cannon

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Spayed Female

**AGE**

3 Years

**WEIGHT**

10.25 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Tranquility VC

**REFERRING VET**

Dr. Christensen

**INVOICE**

15993

**DATE**

6/10/22

## PRESENTING CLINICAL SIGNS

History: Vomiting and anorexia. Current meds: Metronidazole, Mirataz.

Abnormal PE/Chem/CBC/UA Results: Elevated ALT, ALKP, TBIli

## 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** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.27 cm. The right kidney measured 3.54 cm.

### *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 right adrenal gland measured 0.33 cm. The left adrenal gland measured 0.3 cm.

### *Spleen*

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

### *Liver*

The **liver** was diffusely hyperechoic to falciform fat. The gallbladder and common bile duct were unremarkable.  The common bile duct measured 2.0 mm.

### *Gastrointestinal*

The **stomach** in this patient presented a minor amount of ingesta with a 1.5 cm shadowing artifact, it appeared to be persistent in multiple views. Concern for hard-shelled nut or similar material. The pylorus was patent at the time of the sonogram. The small intestine and colon were unremarkable.

### *Pancreas*

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

### *Free Abdomen*

Variable areas of **mesenteric** remodeling were present.

## ULTRASONOGRAPHIC FINDINGS

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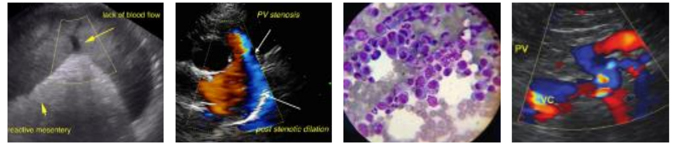


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## Primary Findings

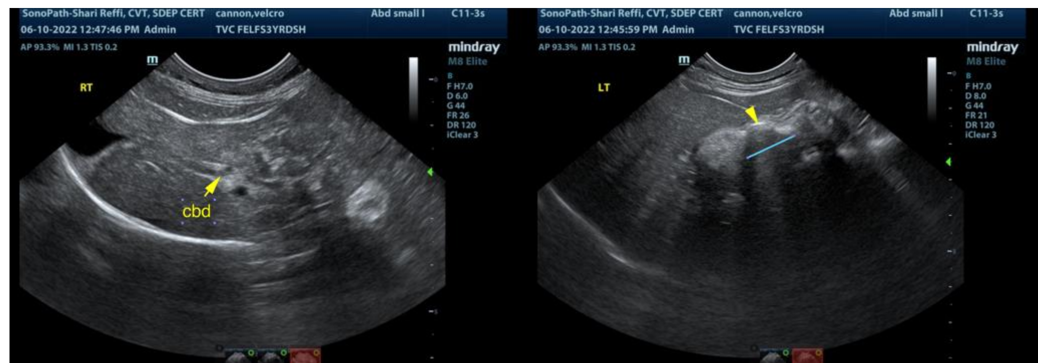
- Hepatic lipidosis pattern with probable underlying inflammatory hepatopathy
- Shadowing gastric structure, possible nut ingestion or similar

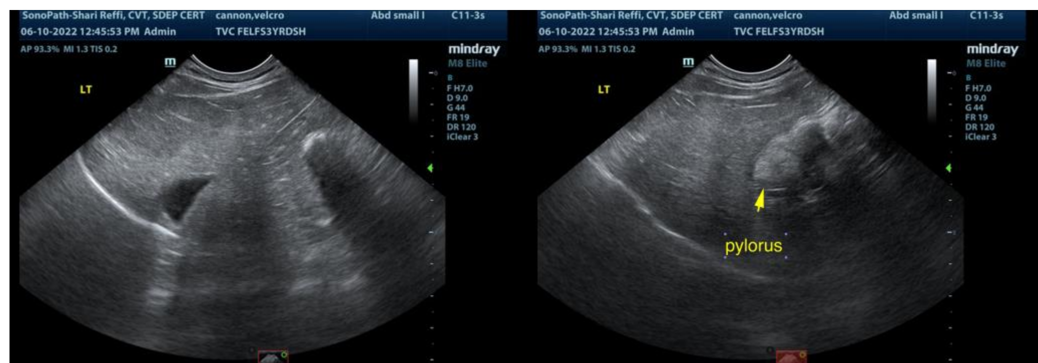
## Secondary Findings

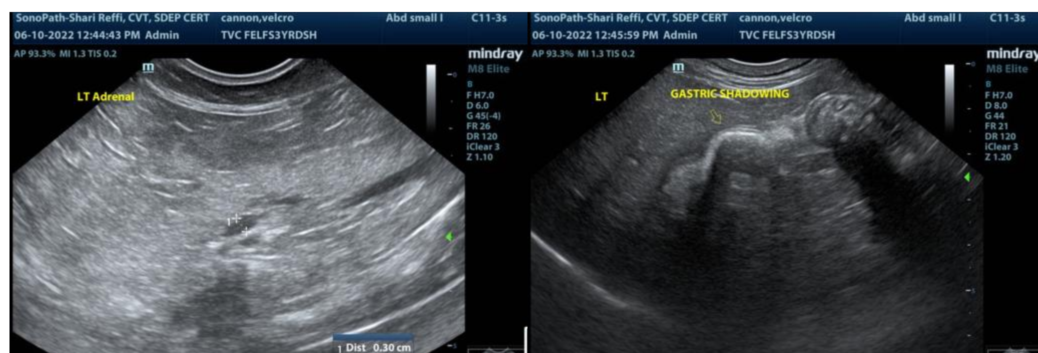
- Volume contracted spleen

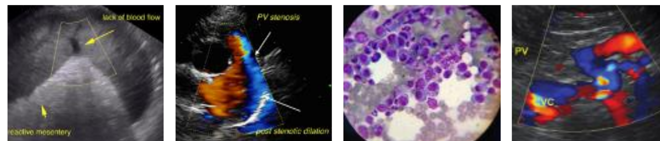
## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend coagulation panel and ultrasound guided FNA of the liver for further definition of the liver enzyme presentation, as well as recheck of the stomach at complete NPO status. If the gastric structure is confirmed, it does not appear to be fully obstructive yet likely partially obstructive and irritated. Guarded prognosis depending upon cytology results.





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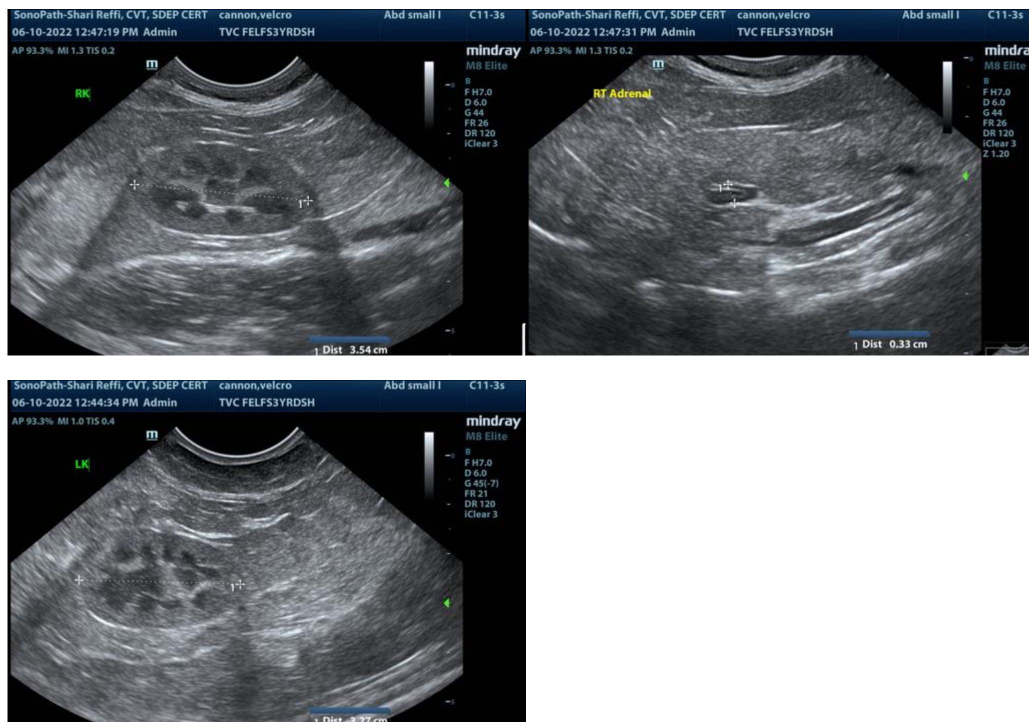


**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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