



PATIENT PRESENTING CLINICAL SIGNS

Luna Beyer

History: BCS 6/9 Acute vomiting/ diarrhea for 3 days. Liver appeared large on radiographs, extending past the ribs. Vomiting has stopped with maropitant given yesterday, p eating well. No previous history of GI upset P was on Atopica for skin problems, taken off due to elevated ALT
Abnormal PE/Chem/CBC/UA Results: ALT 225IU/L (10-100) on 6/09/2022 ALT 177 on 2/10/2023.
Rest of chem and cbc normal.

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

3 years

WEIGHT

10.2 lbs

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Moon

HOSPITAL NAME

Shiloh VH

REFERRING VET

Dr. Herr

INVOICE

42701

DATE

2/10/23

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder mucosa, trigone, and visible urethra are normal in thickness and there is no evidence of mucosal irregularities. There is a moderate amount of suspended echogenic debris observed within the lumen. This is likely lipid. The bladder had a moderate amount of urine.

The left kidney is normal in size, shape and architecture with smooth peripheral margins and measures 3.7 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 4.0 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is normal in size at 0.36 cm. The left adrenal gland has normal shape and it is normal in appearance and echogenicity.

The right adrenal gland is normal in size at 0.32 cm. The right adrenal gland has normal shape and it is normal in appearance and echogenicity.

Spleen

The splenic echotexture is homogeneous with parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule is smooth with no irregularities. The splenic vasculature is normal without signs of congestion or thrombosis.

Liver

The liver is subjectively mildly enlarged and mildly heterogenous in echotexture. No overt evidence of inflammatory, infiltrative or regenerative pathology is evident. The visible portions of the vasculature and biliary tract appear normal. No pathological hepatic lymphadenopathy observed.

The gallbladder lumen is mildly distended. The wall is a normal thickness and smooth. There is a small volume of anechoic bile. The cystic and common bile ducts are normal/not visible.



PATIENT

Gastrointestinal Tract

Luna Beyer

The gastric lumen contained a small volume of ingesta. The stomach wall is of normal wall thickness with some variability due to rugal folds. There is normal gastric wall layering. There are no masses or focal lesions observed and the pyloric outflow tract appears normal.

SPECIES

Feline

While many loops of bowel measured normal overall, several loops measured mildly thick and measured 0.27 (normal is up to 0.24 cm). The duodenum measures normal at 0.22 cm with distinct wall layering. The jejunum had many loops with thick muscularis and almost a 1:1 ratio with the mucosa. The layer was preserved in all loops. There was a longitudinal mucosal stripe in many loops of jejunum. The lumen of the small intestine was mostly empty, yet a few loops of bowel had a small volume of ingesta. There was no evidence of ileus, obstruction or foreign material. No focal lesions are observed.

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The section of colon are visualized with formed fecal material and gas shadowing distally.

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Pancreas

AGE

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The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

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Peritoneum

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The omentum is of normal uniform echogenicity. There was one prominent lymph node that measured 0.53 x 0.39 cm. This is considered reactive.

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ULTRASONOGRAPHIC FINDINGS

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Primary Findings

- Thickened intestines, consistent with chronic enteropathy.
- Mild heterogenous hepatomegaly. Rule out reactive hepatopathy.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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While much of the small intestines measure normal overall there were several loops that measure mildly thick. Similarly the thickened muscularis and mucosal stripe (typically representative of mid mucosal fibrosis, change often associated with eosinophilic inflammatory bowel disease) are changes consistent with chronic enteropathy such as food allergy or inflammatory bowel disease. Given the subtle changes to the liver and the rise in ALT a reactive hepatopathy secondary to intestinal inflammation is suspected. Consider a diet trial with a novel protein or hypoallergenic diet if not contraindicated in this patient. Further primary intestinal work-up can be considered as well as a GI panel and intestinal biopsies if the patient does not respond to a diet trial. Serial monitoring of the ALT is recommended. If it remains increased then consider intestinal and liver biopsies to evaluate for other hepatic pathology.

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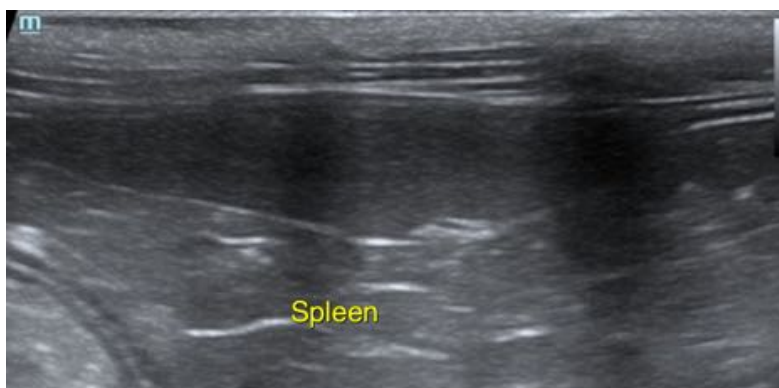
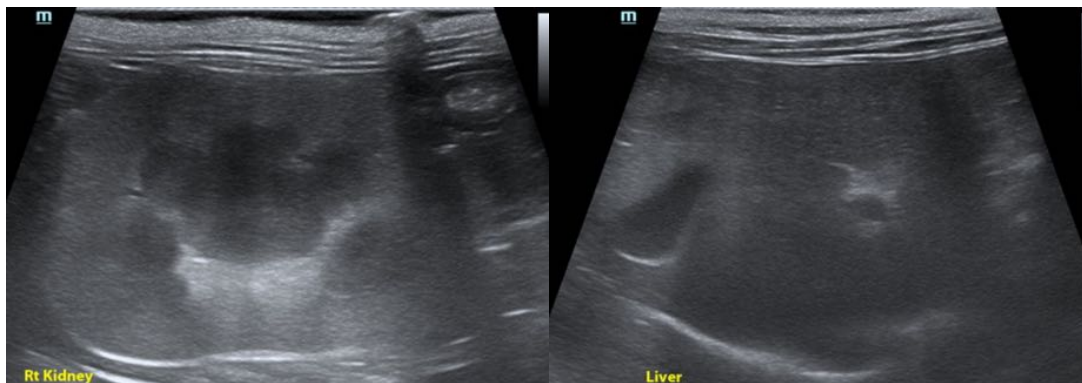
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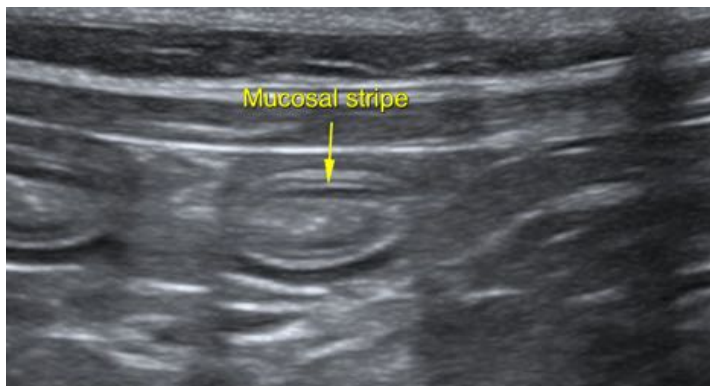
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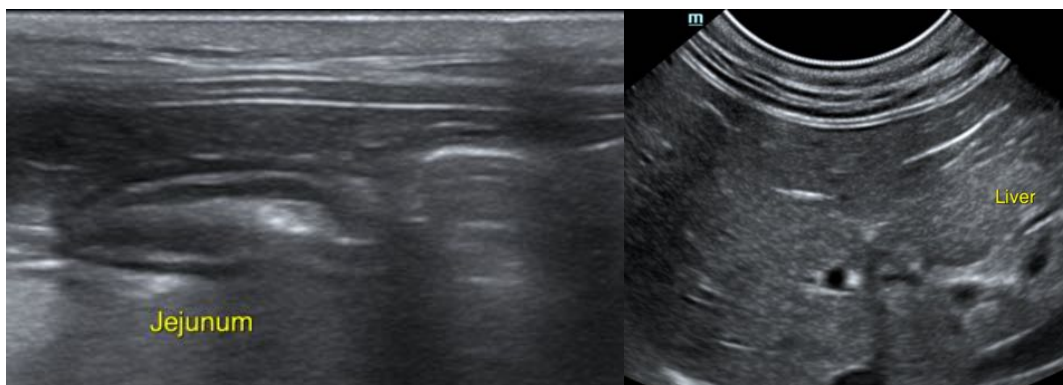
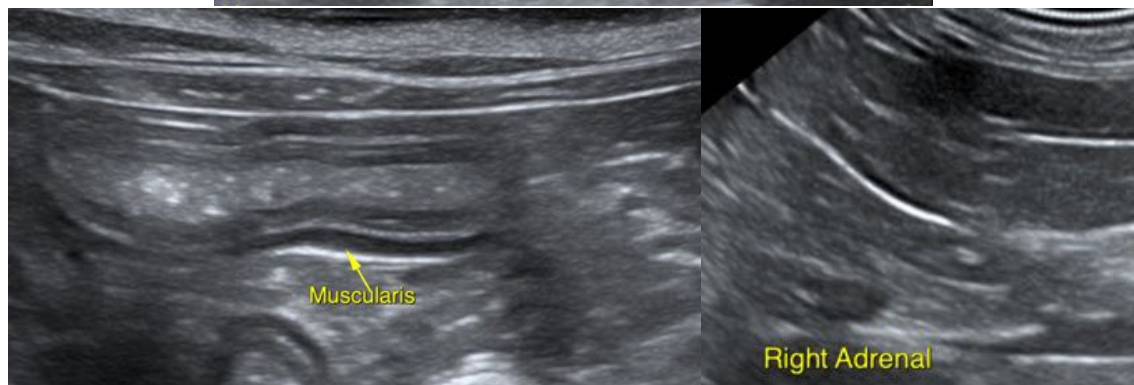
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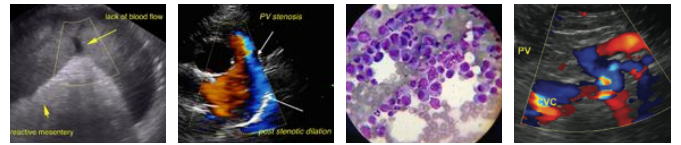
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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