



**PATIENT PRESENTING CLINICAL SIGNS**

Brinkley Steiner

History: Patient presented for weight loss and agitation. Complete Blood Count, blood chemistry, total T4 and UA were carried out.

Abnormal PE/Chem/CBC/UA Results: Elevated: ALT (361) AST (123) ALP (116) Total Bilirubin (0.8)

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Domestic Shorthair

**Urinary System**

The urinary bladder mucosa, trigone, and visible urethra are normal in thickness and there is no evidence of mucosal irregularities. The bladder lumen is mildly distended with anechoic urine and bladder thickness is considered normal for volume of urine.

**SEX**

Neutered male

The left kidney is slightly small and slightly rounded in shape, but otherwise has normal architecture with smooth peripheral margins and measures 3.6 cm. There is a slight decreased corticomedullary distinction, yet normal echogenicity. Hyperechoic, speckles are noted in the cortex, which is consistent with degenerative changes. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

**AGE**

14 years

The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 3.4 cm. There is a slight decreased corticomedullary distinction, yet normal echogenicity. A 0.2 cm, shadowing, non-obstructive nephrolith is noted in the renal pelvis. There is no evidence of pyelectasia, infarcts or hydronephrosis.

**WEIGHT**

9.9 lbs

**Adrenal Glands**

The left adrenal gland is normal in size at 0.38. The left adrenal gland has normal shape and it is normal in appearance and echogenicity.

The right adrenal gland is slightly enlarged in size at 0.5. The right adrenal gland has normal shape and it is normal in appearance and echogenicity.

**INTERPRETED BY**

Jessica Midence, DVM, DACVIM (SAIM)

**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.

**IMAGING PERFORMED BY**

Dr. Lucas

**HOSPITAL NAME**

Taylorsville VC

**Liver**

The liver is subjectively mildly enlarged in size with slightly rounded contours; however, the structure is normal and there are smooth peripheral margins. The echogenicity appears normal with normal portal markings. The visible portion of the vasculature and biliary tract appear normal. There is a very mildly enlarged hepatic lymph node that measured 0.37 cm x 0.66 cm. The lymph node is hypoechoic. The portahepatis and fat surrounding the liver are hyperechoic.

**REFERRING VET**

Dr. Bray

**INVOICE**

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**DATE**

3/10/23

The gallbladder lumen is significantly distended. The wall is a normal thickness and smooth. There is a large volume of non-dependent echogenic debris that is organized into a round structure that is almost



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Brinkley Steiner

mass like. The echogenic bile does extend into the neck of the gallbladder. There is no associated inflammation surrounding the gallbladder. The cystic and common bile ducts are normal.

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**Gastrointestinal Tract**

The gastric lumen is empty and measures normal at 0.24 cm. 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.

**BREED**

Domestic Shorthair

The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The duodenum is normal with distinct wall layering. A few loops of jejunum measured thick at 0.26 cm (normal is up to 0.24 cm) and the muscularis was subjectively thickened. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. No focal lesions observed.

**SEX**

Neutered male

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

**AGE**

14 years

**Pancreas**

The pancreas is diffusely enlarged and hypoechoic. There is some subtle mottling likely from prior pancreatitis. The mesentery surrounding the pancreas is hyperechoic. There is no evidence of fluid or effusion. The visible pancreatic duct was normal, but prominent, yet this can be normal in older cats.

**WEIGHT**

9.9 lbs

**Peritoneum**

The peritoneum is mild to moderately hyperechoic and worse cranially. There is a hypoechoic, enlarged pancreatic lymph node that measured 0.56 x 0.78 cm and a hypoechoic, mildly enlarged hepatic lymph node.

**INTERPRETED BY**

Jessica Midence, DVM,  
DACVIM (SAIM)

**ULTRASONOGRAPHIC FINDINGS**

**IMAGING PERFORMED BY**

Dr. Lucas

**Primary Findings**

1. Moderate acute pancreatitis.
2. Significant volume of organized gallbladder sludge, rule out cholecystitis.

**HOSPITAL NAME**

Taylorville VC

**Secondary Findings**

1. Chronic degenerative renal changes.
2. Mildly thickened intestines, consistent with chronic enteropathy.

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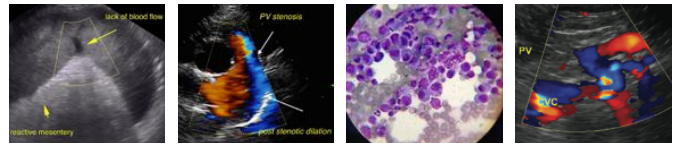
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is moderate, acute pancreatitis in this patient that could explain the high liver values. I recommended to consider supportive care including hydration support, anti-emetics and appetite stimulants to encourage ongoing caloric intake. The gallbladder contains a significant amount of

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echogenic debris that is non-dependent and appears to be organizing and almost has a mass like appearance in some loops. Echogenic gallbladder debris in cats is more likely to be associated with bactibilia/cholecystitis. Cholecystocentesis can be considered for cytology and culture if coagulation times are normal. Otherwise, empirical antibiotic therapy such as Marvofloxacin and Metronidazole can be considered as well if appropriate for this patient. The changes to the intestines are very mild and subtle. If there is no history of chronic intestinal issues such as vomiting, diarrhea or weight loss then they are considered incidental and perhaps a variation of normal. This should be correlated with the patient's history.

**BREED**

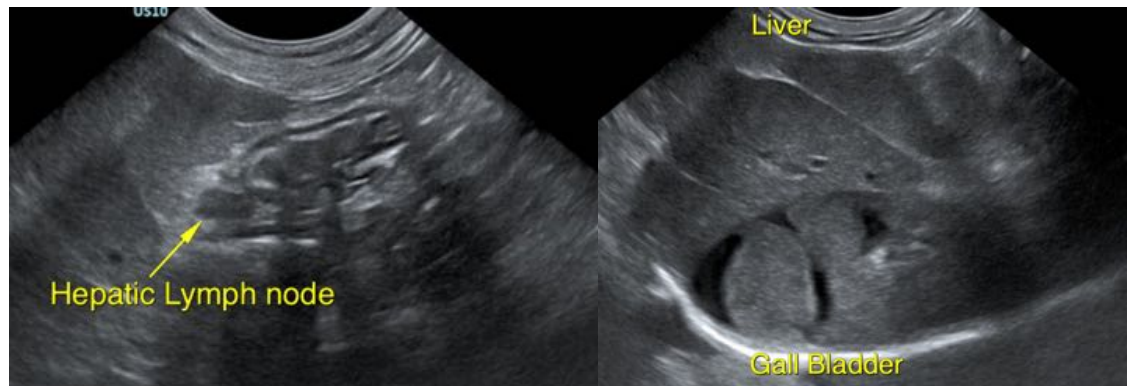
Domestic Shorthair

**SEX**

Neutered male

**AGE**

14 years

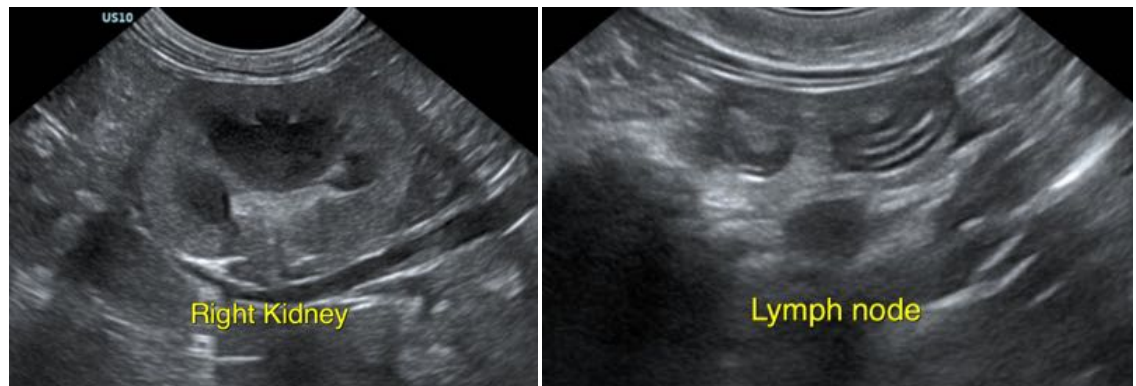


**WEIGHT**

9.9 lbs

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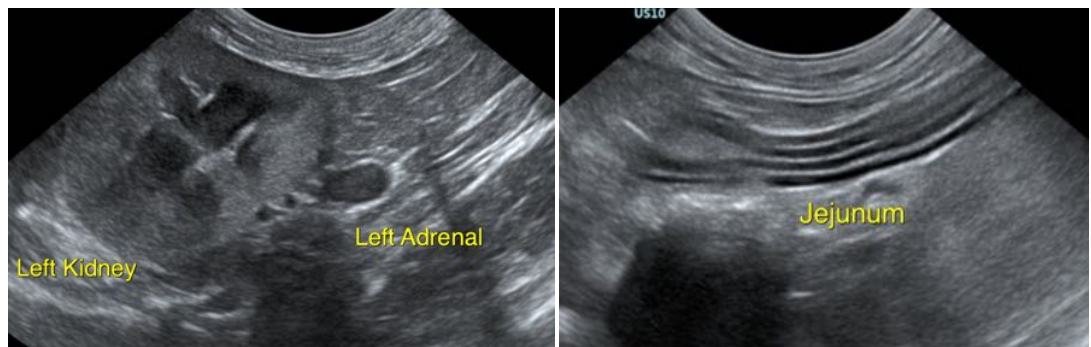
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**HOSPITAL NAME**

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**REFERRING VET**

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**BREED**

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**SEX**

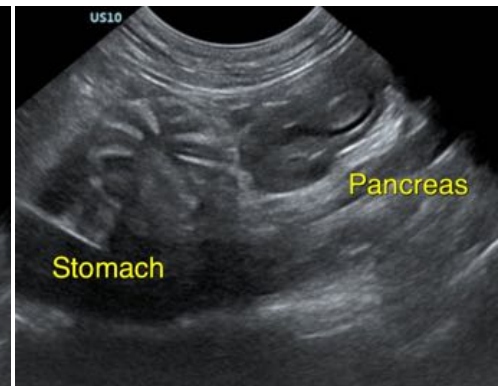
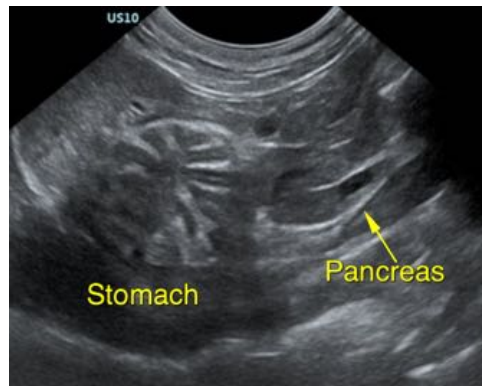
Neutered male

**AGE**

14 years

**WEIGHT**

9.9 lbs



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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.

**DATE**

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