



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Maya Heinze
HISTORY: History of elevated ALT=1457 on 1/27/22; 940 today(12-130). Patient receives depo-medrol for allergy symptom relief. Patient is clinically normal--no vomiting, diarrhea, weight loss, has a normal appetite. Screening for hepatitis.

SPECIES Abnormal PE/Chem/CBC/UA Results: Elevated ALT listed above.

FELINE RADIOGRAPHS: Hepatomegaly is evident on lateral and VD views. Hepatomegaly is displacing the stomach and kidneys caudally. The right kidney is at the low end of the reference range. No other abnormalities are observed other than the high body condition score.

BREED

Bengal

SEX

Spayed Female

AGE

6 years

WEIGHT

13.67 lbs

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

IMAGING PERFORMED BY

M Kermendy CVT

HOSPITAL NAME

Wauwatosa Vet

REFERRING VET

Dr. Haynes

INVOICE

96934

DATE

3/16/22

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is adequately filled. The wall is smooth and regular. No abnormalities are present with the trigone or proximal urethra, and there is no evidence of sediment, cystoliths, polyps or a mass.

The left kidney is within normal limits in size for the patient's weight and measured 4.14 cm. The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. Accumulation of fat is noted in the pelvis. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

The right kidney is within normal limits in size for the patient's weight and measured 4.29 cm. The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. Accumulation of fat is noted in the pelvis. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

Adrenal Glands

The left adrenal gland measures 0.35 cm. No abnormalities are noted with the gland's shape, overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

The right adrenal gland is not visualized.

Spleen

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. It is hyperechoic to both the liver and renal cortex. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified. The spleen measures 10.1 mm.

Liver

The liver is diffusely hyperechoic. It is isoechoic to the spleen and moderately to markedly hyperechoic to the falciform fat. The borders are rounded. It is homogeneous. Perivascular cuffing of multiple vessels was noted due to fat. Overt signs of an inflammatory, infiltrative or regenerative process are not evident.



PATIENT	The gall bladder wall appears within normal limits in thickness and echogenicity. There is no evidence of echogenic material (sludge) within the GB or edema surrounding it. The cystic and common bile ducts are not dilated or tortuous.
Maya Heinze	
SPECIES	Gastrointestinal
Feline	The gastric wall and pylorus are normal in thickness. There is no loss of definition of the normal architecture of the layers of the stomach wall. No obvious abnormalities are observed with its peristalsis.
BREED	
Bengal	The small intestinal wall thickness is within normal limits and there is no evidence of dilation. The definition of the wall layers is preserved. The ileo-cecal-colic junction reveals no abnormalities. The colonic wall is not thickened and mural detail is considered normal. There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction.
SEX	
Spayed Female	
AGE	Pancreas
6 years	Within normal limits regarding echogenicity and echotexture. There is no evidence of hyperechogenicity of the mesenteric fat; active pancreatitis is considered unlikely.
WEIGHT	Left limb: No overt abnormalities are observed with regard to the pancreas' echogenicity or echotexture. There is no evidence of hyperechogenicity of the surrounding mesenteric fat.
13.67 lbs	Right limb: No overt abnormalities are observed with regard to the pancreas' echogenicity or echotexture. There is no evidence of hyperechogenicity of the surrounding mesenteric fat.
INTERPRETED BY	Other
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	Lymph nodes: No abnormalities are observed.
IMAGING PERFORMED BY	Abdominal effusion is not visualized.
M Kermendy CVT	An elliptical shaped structure with a hyperechoic capsule measuring 5.4 mm in length x 10 mm in diameter is noted. It is localized in the mid dorsal abdomen medial to the spleen. It is not associated with a specific organ and is most likely due to early development of a Bates body, which is not considered pathological.
HOSPITAL NAME	
Wauwatosa Vet	
REFERRING VET	ULTRASONOGRAPHIC FINDINGS
Dr. Haynes	<ul style="list-style-type: none"> A specific cause for the elevated ALT was not identified on the abdomen ultrasound. The cause for hepatocellular damage may be due to chronic use of Depo-Medrol
INVOICE	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
96934	<ul style="list-style-type: none"> A FNA of the liver is a diagnostic option, however, a tissue biopsy is required to evaluate the hepatic architecture.
DATE	A component of the diffuse hyperechogenicity is most likely due to the chronic use of Depo-Medrol, which could also cause immunosuppression and a secondary ascending bacterial infection. Cholecystitis, cholangitis/cholangiohepatitis cannot be excluded despite the absence
3/16/22	



PATIENT

Maya Heinze

of abnormalities with the gallbladder and bile ducts. Although indiscriminate use of antibiotics is not recommended, one could start with broad-spectrum antibiotics and reassess the ALT in a few weeks. A GGT is also suggested.

SPECIES

Feline

An hepatoprotectant can also be prescribed.

BREED

Bengal

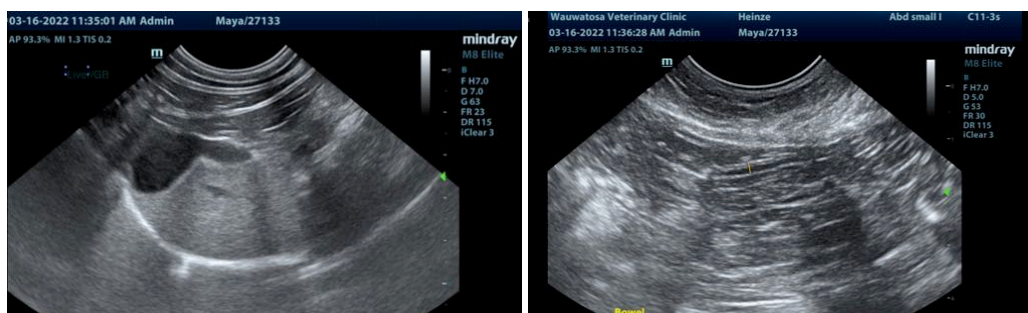
Depending on the type of allergies Maya is suffering from, a diet trial or topical treatments to help decrease her pruritus may be pursued. I am assuming she is receiving Depo Medrol because it is too difficult to administer oral medication. If the latter is the case; although not ideal, cefovecin (Convenia) can be administered 10-12 days apart for 2-3 doses to treat cholecystitis, cholangitis/cholangiohepatitis.

SEX

Spayed Female

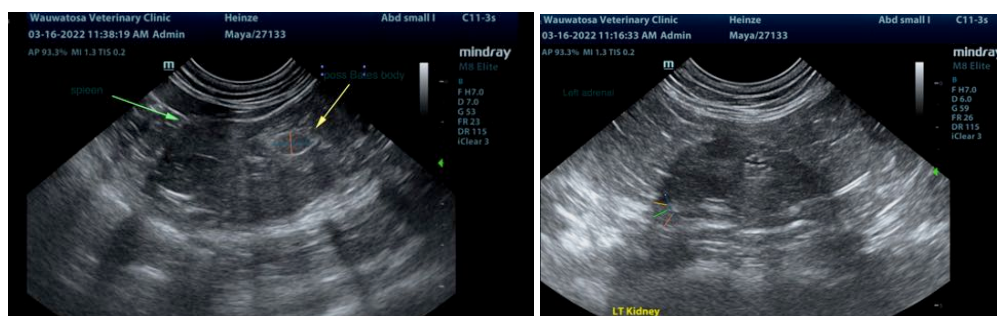
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INTERPRETED BY

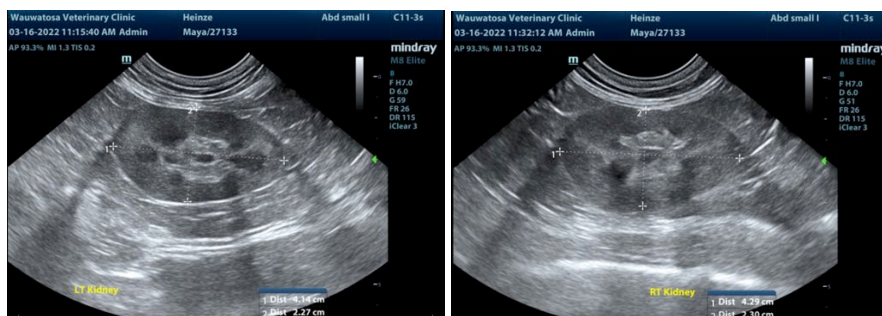
Lisa Carioto, DVM, DVSc, Diplomate ACVIM

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REFERRING VET

Dr. Haynes

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.

INVOICE

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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.

Lisa Carioto, DVM, DVSc, Diplomate ACVIM

DATE

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3/16/22