**PATIENT**

Pepper Jutson

PRESENTING CLINICAL SIGNS

constipated, eating less and drinking lots of water
 Abnormal PE/Chem/CBC/UA Results: increased bilirubin

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder is well filled. The wall is smooth and regular. There is no evidence of cystoliths, polyps or a mass. A large amount of free floating sediment is observed. No abnormalities are observed with the trigone or urethra, including the prostatic urethra. The prostate is homogeneous, measuring 1.2 cm, and is unremarkable.

BREED

DSH

SEX

Neutered Male

The left kidney measures 4.08 cm (within normal limits; (3.80-4.40 cm)). The capsule is smooth. The normal definition of the cortico-medullary junction well preserved for a cat of Pepper's age. There is no evidence of nephrolithiasis, pyelectasia, or hyperechogenicity of the surrounding mesentery.

AGE

10 Years

The right kidney measures 4.16 cm (within normal limits). The capsule is smooth. The capsule is smooth. The normal definition of the cortico-medullary junction well preserved. There is no evidence of nephrolithiasis, pyelectasia, or hyperechogenicity of the surrounding mesentery.

Adrenal Glands**WEIGHT**

13 Pounds

The left adrenal gland measures 0.40 cm. No abnormalities are noted with the gland's echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

The right adrenal gland measures 0.43 cm. No abnormalities are noted with the gland's echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

INTERPRETED BY

Lisa Carioto, DVM,
 DVSc, Diplomate
 ACVIM

Spleen

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

IMAGING PERFORMED BY

Sarah Pender, CVT

Liver

There are no obvious signs of hepatomegaly. Its borders are smooth and sharp. The liver's echotexture is homogeneous, however, it is mildly hyperechoic, i.e. it is isoechoic to the falciform fat. No abnormalities are observed with the hepatic vessels. The diffuse hyperechogenicity of the liver is suggestive of hepatic lipidosis, however, cholangitis/cholangiohepatitis cannot be excluded.

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Dr. Mike White

The gall bladder wall appears to be 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. Signs of cholecystitis are not appreciated.

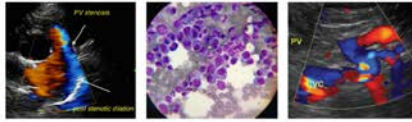
Gastrointestinal**INVOICE**

36713

The gastric wall and pylorus are within normal limits in thickness. There is no loss of definition of the normal architecture of the wall layers. The stomach is filled with ingesta and gas. Although no overt abnormalities are observed with peristalsis, delayed gastric emptying cannot be excluded if Pepper was fasted.

DATE

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**PATIENT**

Pepper Jutson

The overall thickness of the small intestines, including the duodenum, is within normal limits, however, the muscularis is thicker than what is considered normal. The definition of the wall layers is well preserved. A few loops of loops of bowel, including the duodenum and transverse colon, are dilated with a large amount of ingesta and gas. Decreased and ineffective peristalsis is observed, i.e., a “to and fro” motion is noted. The mesentery surrounding the loops of bowel in the right cranial quadrant is severely hyperechoic. The ileo-cecal-colic junction does not show any abnormalities.

SPECIES

Feline

A very large amount of formed stools are present within the colon. The wall is not thickened and mural detail is considered normal. There are no obvious signs of a foreign body or an obstruction.

BREED

DSH

Pancreas

No overt abnormalities are observed with the left limb, however the right limb is enlarged and diffusely hypoechoic. The surrounding mesenteric fat is markedly hyperechoic. These findings are highly suggestive of pancreatitis. There are no overt signs of neoplasia.

SEX

Neutered Male

Other

Lymph nodes: Mesenteric lymph nodes are within normal limits in size, architecture, echotexture, and echogenicity.

AGE

10 Years

Abdominal effusion is not visualized.

ULTRASONOGRAPHIC FINDINGS**WEIGHT**

13 Pounds

The liver is mildly, but diffusely hyperechoic, which may be due to subclinical hepatic lipidosis due to hyporexia. However, cholangitis/cholangiohepatitis cannot be excluded.

Active pancreatitis is suspected based on the abnormalities observed with the right limb and the surrounding region.

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

History of constipation with subtle gastrointestinal changes, which may be consistent with inflammation, for example, inflammatory bowel disease (IBD). There are no obvious signs of neoplasia. Constipation may be a sign of IBD, as well as subclinical dehydration.

Triaditis is suspected based on today’s sonographic abnormalities and Pepper’s history.

IMAGING PERFORMED BY

Sarah Pender, CVT

Sediment in the urinary bladder is most likely clinically insignificant, however, a urinalysis and culture and sensitivity are suggested to exclude early renal disease and secondary subclinical pyelonephritis, as both diseases may predispose an older cat to malaise, dehydration and constipation. The latter may also cause polydipsia.

HOSPITAL NAME

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A urinalysis and urine culture and sensitivity are recommended to exclude pyelonephritis.

REFERRING VET

Dr. Mike White

Treatment for pancreatitis is recommended, including analgesics, such as buprenorphine.

PEG 3350 is excellent for the treatment of constipation, in addition to Royal Canin GI Fibre Response. It may be purchased over the counter at any pharmacy; brand names include Restoralax or Lax-A-Day, etc. It is important not to purchase generics, as they do not tend to be as effective.

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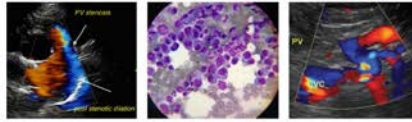
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If deworming, PEG 3350, a hypoallergenic diet and a fibre supplement (in addition to the RC GI Fibre Response diet), are unsuccessful, further diagnostics may be pursued.

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If further diagnostics are not pursued, empirical treatment for inflammatory bowel disease with corticosteroids may be considered, but only after the above treatment recommendations have been exhausted.



PATIENT

Pepper Jutson

An internal medicine consult may be requested to describe all possible options in further detail.

SPECIES

Feline

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Neutered Male

AGE

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WEIGHT

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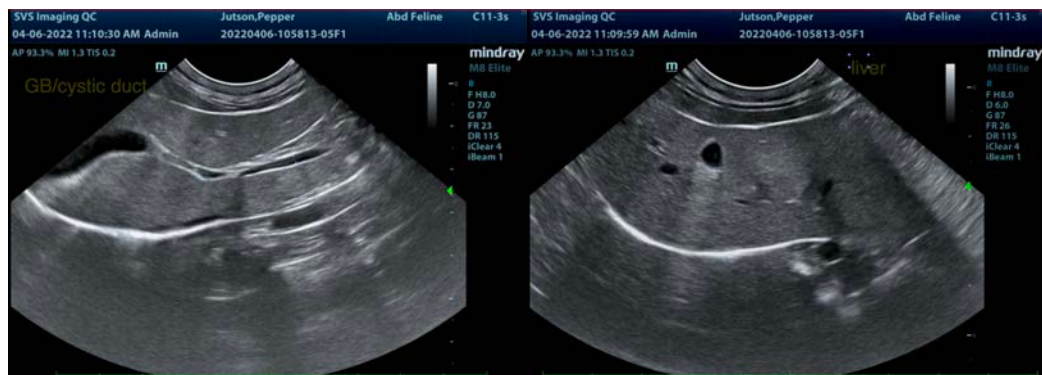
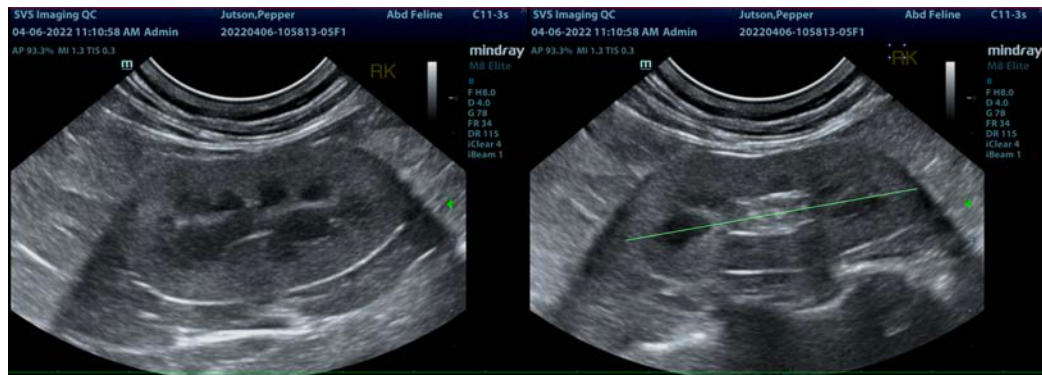
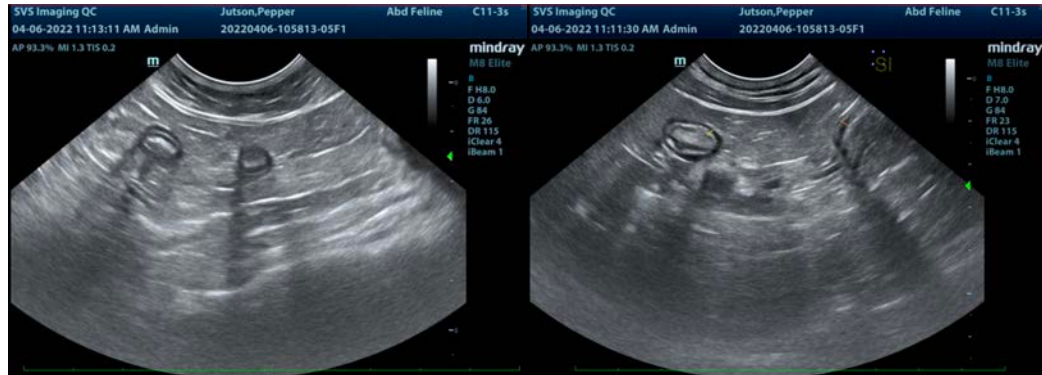
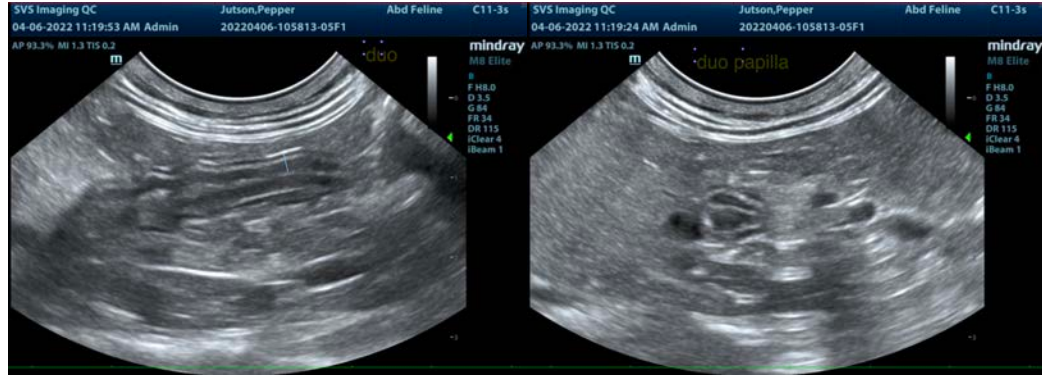
Dr. Mike White

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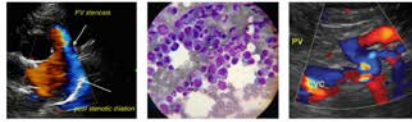
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PATIENT

Pepper Jutson

SPECIES

Feline

BREED

DSH

SEX

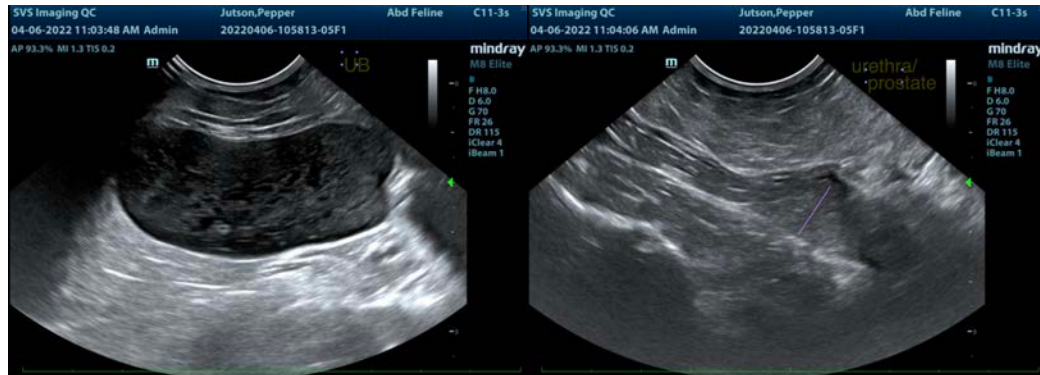
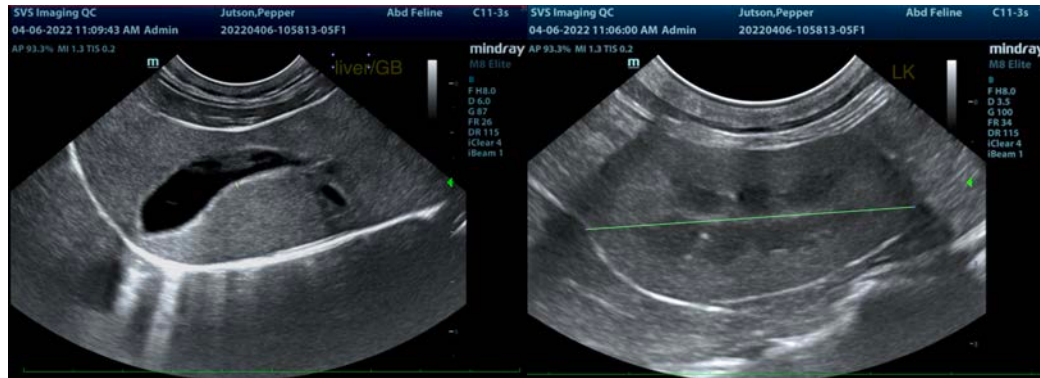
Neutered Male

AGE

10 Years

WEIGHT

13 Pounds



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**IMAGING
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HOSPITAL NAME

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REFERRING VET

Dr. Mike White

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DATE

4/6/22

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.

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

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