



PATIENT

Nebraska Bustillo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

10 Years

WEIGHT

9.1 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

IMAGING PERFORMED BY

Dr. Mayra Sanchez

HOSPITAL NAME

Sunset AH

REFERRING VET

Dr. Mayra Sanchez

INVOICE

36754

DATE

4/7/22

PRESENTING CLINICAL SIGNS

Hx of chronic eosinophilic granuloma complex and chronic neutropenia Recent decrease in appetite; no v/d Senior blood work performed 03/31/22 and showed elevated liver enzyme Values rechecked today and improved with SQ fluids owner has been giving Patient is now anorectic for 5 days with no response to appetite stimulants and GI protectants

Abnormal PE/Chem/CBC/UA Results: PE: EGC lesions on abdomen CBC: mild lymphopenia Chem (03/31): ALT 203, AMY 1585, ALB 4.7, CA 12.1 Chem (04/07): ALT 99 (N), AMY 1234, ALB 3.0 (N), CA 10.6 (N)

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 trivial amount of free floating sediment is observed. No abnormalities are observed with the trigone or proximal urethra.

The left kidney measures 3.81 cm (low end of normal reference range; (3.80-4.40 cm)). The capsule is smooth. The normal definition of the cortico-medullary junction is well preserved for a cat of Nebraska's age. Accumulation of fat is present within the pelvis. There is no evidence of mineralization, nephrolithiasis, pyelectasia, or hyperechogenicity of the surrounding mesentery.

The right kidney measures 4.12 cm (within normal limits). Findings are similar to the left kidney.

Adrenal Glands

The left adrenal gland measures 0.41 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 0.54 cm at its cranial pole, 0.43 cm at its caudal pole and 1.54 cm in length. No abnormalities are noted with the gland's echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

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.

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 in certain views. 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.

The gall bladder wall is 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.



PATIENT	<i>Gastrointestinal</i>
Nebraska Bustillo	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. No overt abnormalities are observed with peristalsis.
SPECIES	The duodenum is filled with ingesta. It is within normal limits in thickness and wall definition. There are no obvious abnormalities with peristalsis. The overall thickness of the small intestines is within normal limits. The definition of the wall layers is well preserved, however, mild fogging of a few loops of bowel is observed. The ileo-cecal-colic junction is not visualized. The mesentery surrounding a few loops of bowel cranial to the urinary bladder is moderately hyperechoic.
Feline	
BREED	
DSH	A large amount of ingesta and gas are present within the transverse colon. A very large amount of formed and very firm 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.
SEX	<i>Pancreas</i>
Spayed Female	The left limb is very mildly hypoechoic to the surrounding mesentery, but remains homogeneous. The mesentery is very mildly hyperechoic. These findings may be suggestive of mild pancreatitis. There are no overt signs of neoplasia.
AGE	
10 Years	An in-depth evaluation of the right limb is not possible due to the gas in the surrounding gastrointestinal tract. The portions observed do not show obvious abnormalities.
WEIGHT	<i>Other</i>
9.1 Pounds	Lymph nodes: A moderately enlarged, hypoechoic, lymph node is noted in the region of the stomach. It measures 1.12 mm in diameter x 8.20 mm in length.
INTERPRETED BY	Abdominal effusion is not visualized.
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	ULTRASONOGRAPHIC FINDINGS
IMAGING PERFORMED BY	The liver is very mildly, but diffusely hyperechoic, which may be due to subclinical hepatic lipidosis due to hyporexia. However, cholangitis/cholangiohepatitis cannot be excluded.
Dr. Mayra Sanchez	Although the changes observed with the left limb of the pancreas are subtle, active pancreatitis is suspected.
HOSPITAL NAME	Constipation is also suspected based on the large amount of firm stools present in the colon. This could explain the hyperechoic mesentery in the caudal abdomen. Inflammation secondary to underlying inflammatory bowel disease (IBD) must also be considered. Constipation may be a sign of IBD, as well as subclinical dehydration. There are no obvious signs of neoplasia.
Sunset AH	Nebraska may also be suffering from triaditis given her elevated ALT enzyme activity. The latter may also be due to ascending inflammation from the pancreas and/or gastrointestinal tract.
REFERRING VET	Sediment in the urinary bladder is most likely clinically insignificant, however, a urinalysis is suggested.
Dr. Mayra Sanchez	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
INVOICE	A urinalysis is suggested to complete the minimum database and exclude dehydration, which could predispose an individual to constipation.
36754	Treatment for pancreatitis is recommended, including analgesics, such as buprenorphine, SQ fluids, and possibly, anti-emetics.
DATE	
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PATIENT

Nebraska Bustillo

If Nebraska is constipated, PEG 3350 is an excellent treatment. 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.

SPECIES

Feline

A hypoallergenic diet may be worthwhile administering due to Nebraska's history of eosinophilic granuloma complex. A fibre supplement may be required if a hydrolyzed diet is given as the latter tend to be low in fibre.

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DSH

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.

SEX

Spayed Female

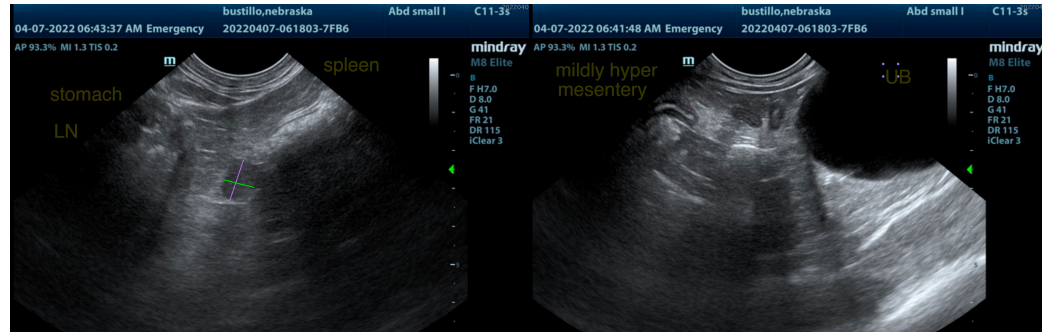
Finally, a broad spectrum antibiotic may be considered for the treatment of cholangitis/cholangiohepatitis.

AGE

10 Years

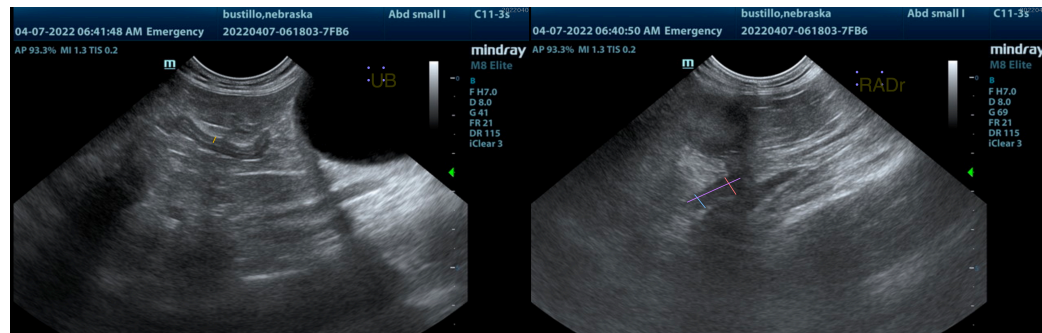
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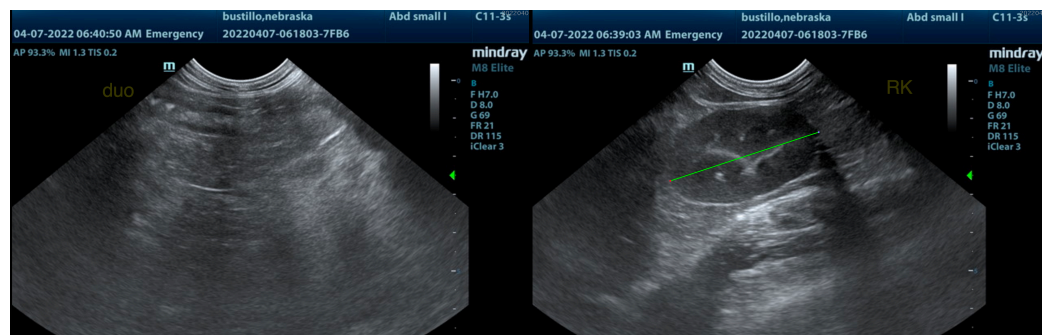


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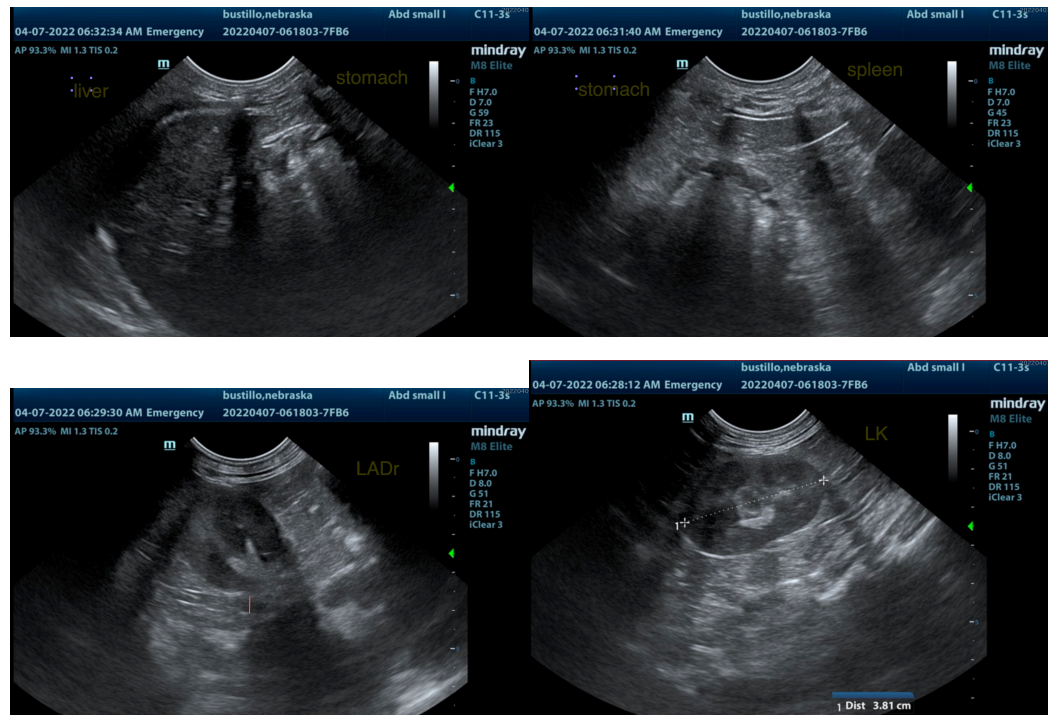
Dr. Mayra Sanchez

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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.

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

Lisa.Carioto@sonopath.com