



PATIENT PRESENTING CLINICAL SIGNS

Joe Joe Hauser

History: History of pancreatitis, asthma, hyperthyroidism but now has elevated liver values despite well-regulated hyperthyroidism. Vomits digested food, bile at least once weekly. He has one retained testicle SC, R side in area of inguinal canal, palpable. Prednisolone 2.5mg Q48hrs for asthma; Methimazole 2.5mg PO q12 hrs for hyperthyroidism, Mirtazapine ointment Q48hr on pinna to control nausea and drive appetite. Prednisolone 2.5mg Q48hrs for asthma; Methimazole 2.5mg PO q12 hrs for hyperthyroidism, Mirtazapine ointment Q48hr on pinna to control nausea and drive appetite.

SPECIES

Feline

BREED

Abnormal PE/Chem/CBC/UA Results: ALT 824H, AST 273H proBNP: 346H

Domestic Shorthair

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Neutered Male

The urinary bladder exhibited mild distention yet subjectively normal tone. The urethra was normal to a depth of 2.0 cm. Mild non-dependent particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

AGE

10 Years

Both kidneys were normal in size and margination. Increased corticomedullary border echogenicity with mild to moderate loss of corticomedullary border demarcation. Both kidneys exhibited minor pyelectasia. The left kidney measured 4.4 cm. The right kidney measured 4.4 cm.

WEIGHT

9.68 Pounds

Adrenal Glands

The left adrenal gland was mildly prominent in size. The left adrenal gland measured 0.61 cm width.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.43 cm width.

INTERPRETED BY

R. McKenzie Daniel, DVM,
DABVP (Canine and Feline)

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 1.0 cm width at the level of the hilus.

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

Liver

HOSPITAL NAME

Falmouth AH

The liver exhibited mild expansive non-homogeneously echogenic mass, occupying the majority of the mid to caudal aspect of the right to mid liver, measuring approximately 6.2 cm x 4.5 cm. The mass appeared to potentially displace the gallbladder dorsally. The gallbladder was non-distended in size. The common bile duct was normal. The normal appearing deep hepatic parenchyma exhibited minor parenchymal remodeling.

REFERRING VET

Dr. Lilan Hauser

Gastrointestinal

INVOICE

13770

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid or foreign material. Potential for minor gastric displacement owing to the hepatic mass possible. The gastric body wall measured 0.26 cm.

DATE

10/14/21



PATIENT

Joe Joe Hauser

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The jejunum wall measured 0.27 cm.

SPECIES

Feline

Normal visible colon wall layers were present with apparent formed feces in lumen. The ileocolic wall measured 0.37 cm. No lymphadenopathy noted.

BREED

Domestic Shorthair

Pancreas

The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Liver mass
- Chronic to chronic active pancreatitis
- Moderate chronic renal changes with minor pyelectasia
- Sonographically unremarkable gastrointestinal tract-potential for minor gastric displacement owing to liver mass or structurally insignificant inflammatory gastroenteropathy possible
- Mildly prominent left adrenal gland- non-specific

AGE

10 Years

WEIGHT

9.68 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver mass is likely consistent with neoplastic criteria such as adenocarcinoma or other. Potential for non-neoplastic etiologies such as hyperplasia, granuloma or similar possible yet considered less likely.

INTERPRETED BY

R. McKenzie Daniel, DVM,
 DABVP (Canine and Feline)

Assuming normal clotting status, hepatic mass FNA for screening cytology may be considered. 3 view chest radiographs recommended. Continued gastrointestinal support suggested.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

The prominent left adrenal gland is non-specific yet not overtly consistent with neoplastic criteria and potential for patient variant. Assessment of systemic blood pressure and potassium levels may be considered.

HOSPITAL NAME

Falmouth AH



REFERRING VET

Dr. Lilan Hauser

INVOICE

13770

DATE

10/14/21



PATIENT

Joe Joe Hauser

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered Male

AGE

10 Years

WEIGHT

9.68 Pounds

INTERPRETED BY

R. McKenzie Daniel, DVM,
 DABVP (Canine and
 Feline)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Falmouth AH

REFERRING VET

Dr. Lilan Hauser

INVOICE

13770

DATE

10/14/21



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



PATIENT

Joe Joe Hauser

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.

SPECIES

Feline

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

BREED

Domestic Shorthair

SEX

Neutered Male

AGE

10 Years

WEIGHT

9.68 Pounds

INTERPRETED BY

R. McKenzie Daniel, DVM,
DABVP (Canine and
Feline)

**IMAGING
PERFORMED BY**

Pamela Harrigan, RDCS

HOSPITAL NAME

Falmouth AH

REFERRING VET

Dr. Lilan Hauser

INVOICE

13770

DATE

10/14/21