

PATIENT PRESENTING CLINICAL SIGNS

Yvette McGeary Doing well clinically, elevated ALT (123). Creatinine 1.7. On Ursodiol 100mg/ml 0.3 ML BID.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline Urinary System

Feline

BREED

DSH

SEX

Intact Female

AGE

14 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

HOSPITAL NAME

East Boston AH

REFERRING VET

Dr. Raman Chopra

INVOICE

42121

DATE

10/15/22

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. Mild to moderate pyelectasia noted in the right kidney without evidence of right ureter dilation. The left kidney measured 3.7 cm. The right kidney measured 3.5 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm. The right adrenal gland measured 0.45 cm.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The spleen measured 0.73 cm in width at the level of the hilus. 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.

Liver

The liver presented normal size and contour. The parenchyma of the liver was uniform, exhibiting mild increased echogenicity and moderate coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. No evidence of gallbladder or peripheral gallbladder inflammation. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

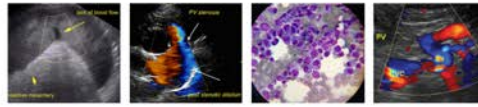
The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

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.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.



PATIENT *Free Abdomen*

Yvette McGeary No evidence of pathology in the area of the uterus or bilateral ovaries.

SPECIES

Feline

- Mild chronic renal changes with right kidney pyelectasia
- Hepatopathy – suspect low-grade inflammatory hepatopathy or hepatobiliary disease i.e., cholangiohepatitis.
- Mild gallbladder debris

BREED

DSH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right kidney pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein: creatinine ratio on sterile urine sample is recommended.

SEX

Intact Female

Assuming normal clotting status and using 25-gauge needle, screening hepatic FNA cytology could be considered, primarily to possibly identify inflammatory cell type if present. No evidence of hepatobiliary neoplastic criteria. Continued hepatosupportive medications with monitoring of ALT levels would be a more conservative approach.

AGE

14 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

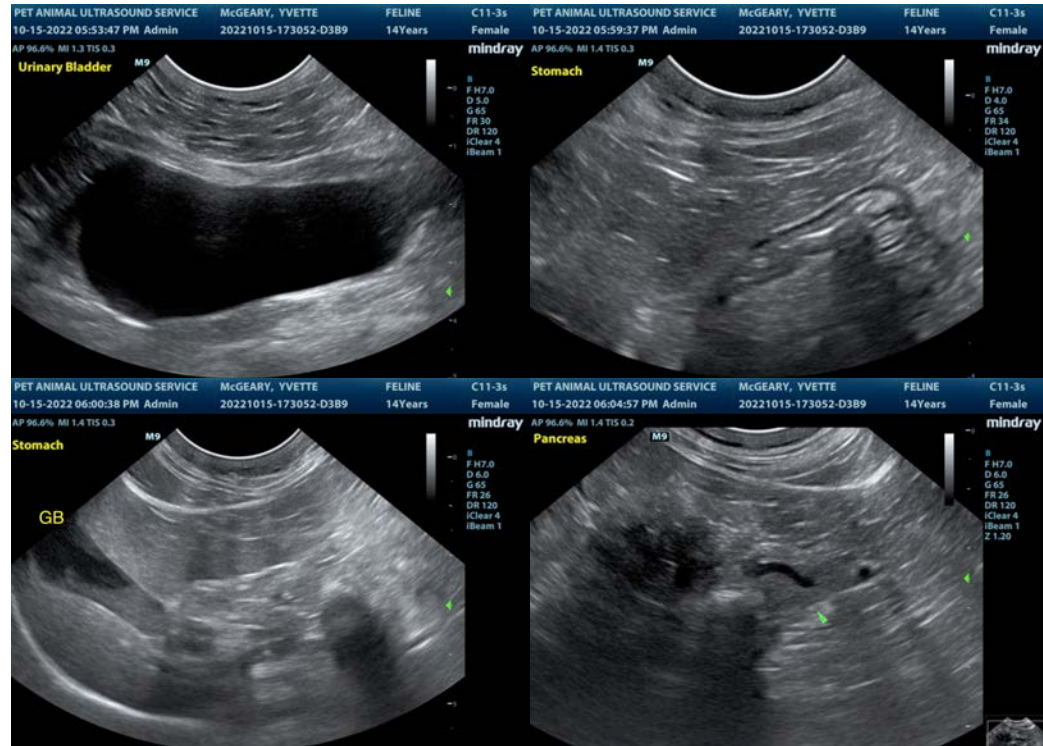
Pamela Harrigan, RDCS

HOSPITAL NAME

East Boston AH

REFERRING VET

Dr. Raman Chopra

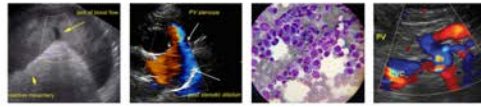


INVOICE

42121

DATE

10/15/22



PATIENT

Yvette McGeary

SPECIES

Feline

BREED

DSH

SEX

Intact Female

AGE

14 Years

WEIGHT

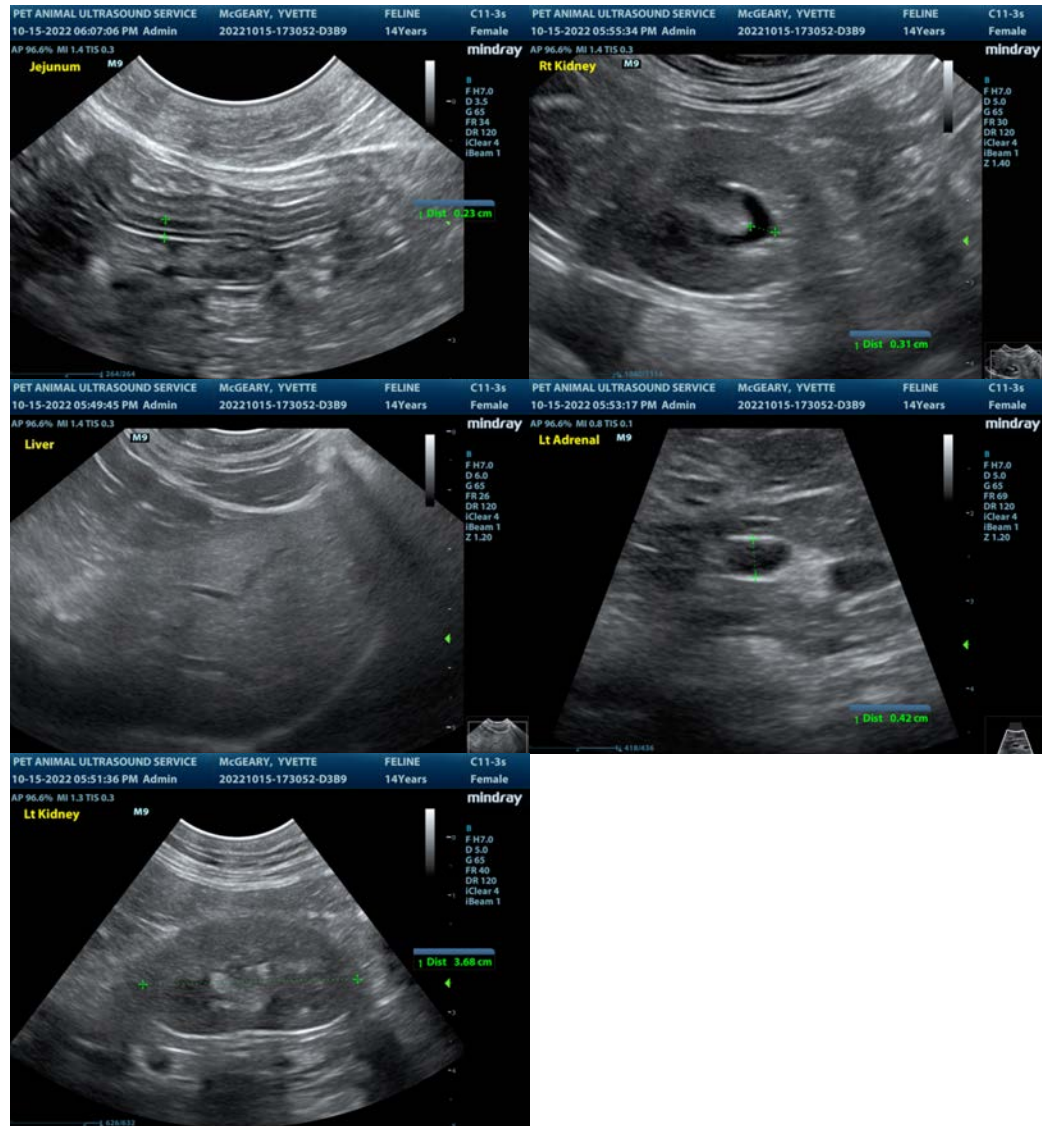
10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS



HOSPITAL NAME

East Boston AH

REFERRING VET

Dr. Raman Chopra

INVOICE

42121

DATE

10/15/22

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.

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.

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