



PATIENT PRESENTING CLINICAL SIGNS

Tiger Greer
Hx of waxing and waning inappetence over last couple of weeks, started after patient killed a lizard. No vomiting or diarrhea, radiographs indicated prominent rugal folds suggestive of gastritis, pancreatitis or some other neoplasia not ruled out. Has been given SQ fluids several times over last 1-2wks, responded positively to mirtazapine. One episode of hypersalivation after PE, resolved with cerenia. Owner reports "off" behavior at home since the lizard as well. QAR on PE every time he has been seen, soft on abdominal palpation, mild dehydration. Current Medications mirtazapine - last dose given 10/22

Feline
Radiographic Findings Radiologist report indicated prominent rugal folds suggestive of gastritis, pancreatitis not ruled out. Gas and feces in colon.

DSH
Abnormal PE/Chem/CBC/UA Results: 10/12: ALT 198, total protein 8.8g/dL, sodium 3.6mmol/L, mild lymphopenia attributed to stress, 2+ proteinuria 10/15: ALT 150, TP 9.2, no other significant findings

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

10 Years

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.

WEIGHT

7.2 kg

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 4.5 cm. The right kidney measured 4.2 cm.

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

The area of the aortic trifurcation was free of pathology.

IMAGING PERFORMED BY

Jenna Walsh, CVT

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.33 cm. The right adrenal gland measured 0.35 cm in width.

HOSPITAL NAME

Silver Creek AC

Spleen

The spleen measured 0.95 cm in width at the level of the hilus and 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.

REFERRING VET

Dr. Ferguson

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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 extending into the cystic biliary duct. Subtle dilation of the proximal common bile duct was noted, not consistent with post-hepatic obstruction. Proximal common bile duct measured 0.15 cm.

INVOICE

26651

DATE

10/26/21



PATIENT *Gastrointestinal*

Tiger Greer
The stomach presented intact wall layering with a normal wall layer ratio. The stomach was empty with mild luminal gas and without evidence of retained ingesta, fluid or foreign material. Subtle subjective prominent rugal folds present. Gastric body wall measured 0.28 cm.

SPECIES

Feline
The small intestine presented intact wall layering with primarily maintained 1:3 muscularis/mucosa ratio with subjective propensity for mild segmental prominent muscularis layer. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Duodenum wall measured 0.25 cm. Jejunum wall measured up to 0.29 cm wall width. Ileocolic wall measured 0.28 cm.

BREED

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

SEX

Pancreas

Neutered Male
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.

AGE

10 Years *Free Abdomen*

WEIGHT

7.2 kg
No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Mild inflammatory gastroenteropathy pattern – potential inflammatory bowel episode possibly owing to dietary indiscretion or IBD.
- Sonographically unremarkable pancreas
- Low-grade hepatopathy – reactive hepatopathy or low-grade inflammatory parenchymal or inflammatory hepatobiliary process possible.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no overt evidence of significant visceral (specifically gastrointestinal or pancreatic) pathology. The small intestine exhibited subtle mural changes, which are suggestive of inflammatory enteropathy. However, given the lack of diarrhea or vomiting, this finding is non-specific. No evidence of intraabdominal neoplasia. Broad-spectrum deworming (if not done) is suggested. Potential for low-grade or chronic pancreatitis may be present, yet ultrasonographically normal. Further assessment may include GI panel to include PLI, TLI, cobalamin and folate, continued as-needed gastrointestinal supportive care, and maintenance of hydration recommended.



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SPECIES

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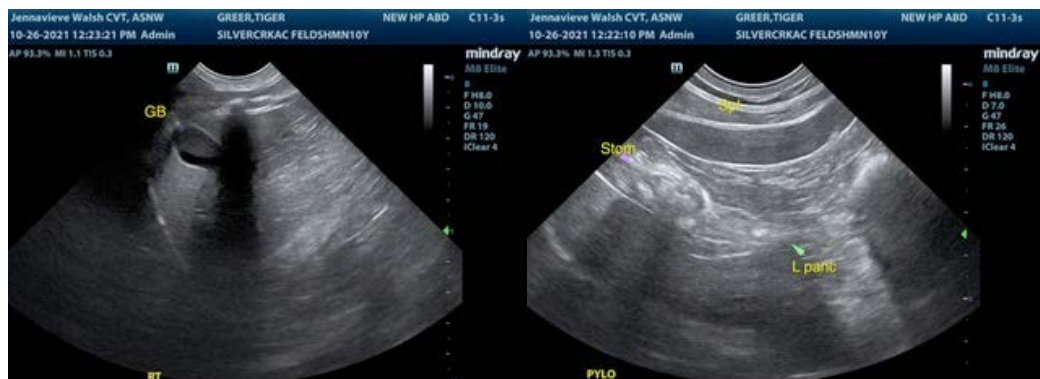
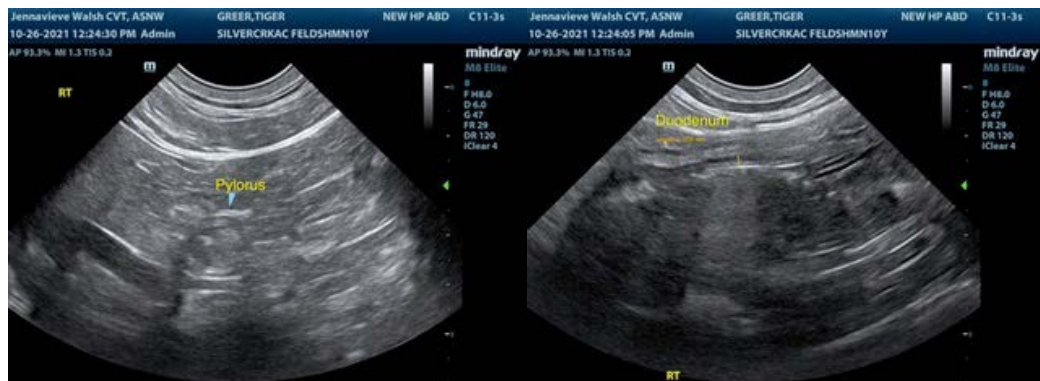
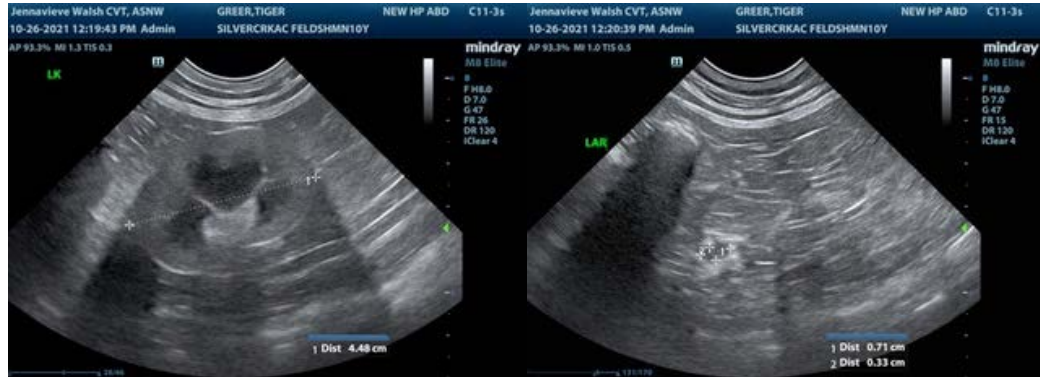
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SPECIES

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Neutered Male

AGE

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WEIGHT

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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.

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