



PATIENT PRESENTING CLINICAL SIGNS

Jasmine Faluotico

History: r/o tapazole toxicity hx of hypertension, heart murmur, kidney dz, liver dz /neoplasia, weight loss and inappetence discontinued tapazole last night

SPECIES

Abnormal PE/Chem/CBC/UA Results: platelet count - 28(lo), neut. 78(hi), lymph- 14(lo) , ALT - 805(hi), ALK phos - 137(hi), total bili- 2.7(hi), chol. 256(hi)

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

DSH

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. Aortic trifurcation was normal.

SEX

Spayed Female

Normal size and margination were 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 mild to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Minor medullary mineral was present. The left kidney measured 3.4 cm in length. The right kidney measured 3.4 cm in length.

AGE

13 Years

Adrenal Glands

WEIGHT

No obvious pathology in the area of the left or right adrenal glands.

8 Pounds

Spleen

INTERPRETED BY

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 0.87 cm in width.

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

IMAGING PERFORMED BY

Heather

Liver

HOSPITAL NAME

The liver exhibited subjective mild enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

ACC Flanders

The gallbladder was non-distended with anechoic content, along with mild nondependent particulate to mildly echogenic luminal debris. No overt evidence of peripheral gallbladder inflammation. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Casulli

Gastrointestinal

INVOICE

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.

17947

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.

DATE

11/3/22

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



PATIENT

Pancreas

Jasmine Faluotico

The pancreas base exhibited normal size and contour with subtle hypoechoic to nonhomogenous parenchyma compared to adjacent omentum.

SPECIES

Free Abdomen

Feline

No omental masses, overt lymphadenopathy or peritoneal free fluid was present.

BREED

Other

DSH

A rapid view of the heart revealed no evident pathology. No overt evidence of left or right chamber enlargement.

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed Female

- Hepatopathy- subjective benign. Suspect hepatitis/cholangiohepatitis pattern (viral, bacterial, toxin, etc.) with potential vacuolar hepatic changes, nonobstructive cholestasis, lipidosis, or other hepatopathy is possible. Occult infiltrative hepatic neoplasia is considered a less likely differential diagnosis.
- Nondistended gallbladder with mild luminal debris
- Bilateral chronic renal changes
- Possible low-grade pancreatitis
- Sonographically unremarkable gastrointestinal tract

AGE

13 Years

WEIGHT

8 Pounds

INTERPRETED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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DVM, DABVP
(Canine and Feline)

Potential for low grade or chronic pancreatitis may be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended to assess for occult nonstructural intestinal disease as a contributing factor to the weight loss could be considered. If persistent or progressive hepatic enzyme elevations despite Tapazole withdrawal, triad disease could be a possibility.

IMAGING PERFORMED BY

Heather

Further assessment of the liver may include, assuming normal clotting status, and using a 25-gauge needle, hepatic FNA cytology, primarily to assess for or possibly identify inflammatory cell type and rule out potential for occult neoplasia.

HOSPITAL NAME

ACC Flanders

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SPECIES

Feline

BREED

DSH

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Spayed Female

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WEIGHT

8 Pounds

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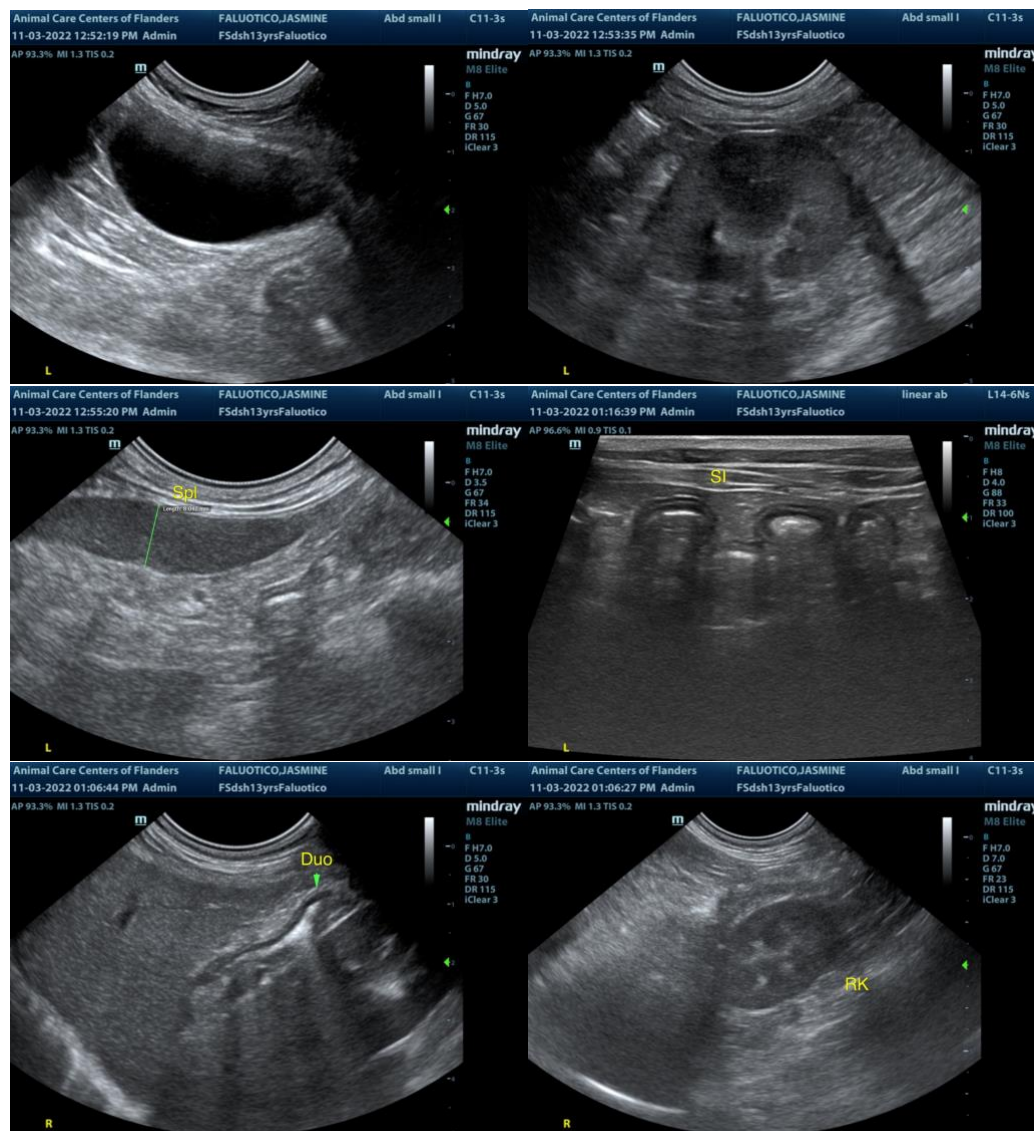
Dr. Casulli

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SPECIES

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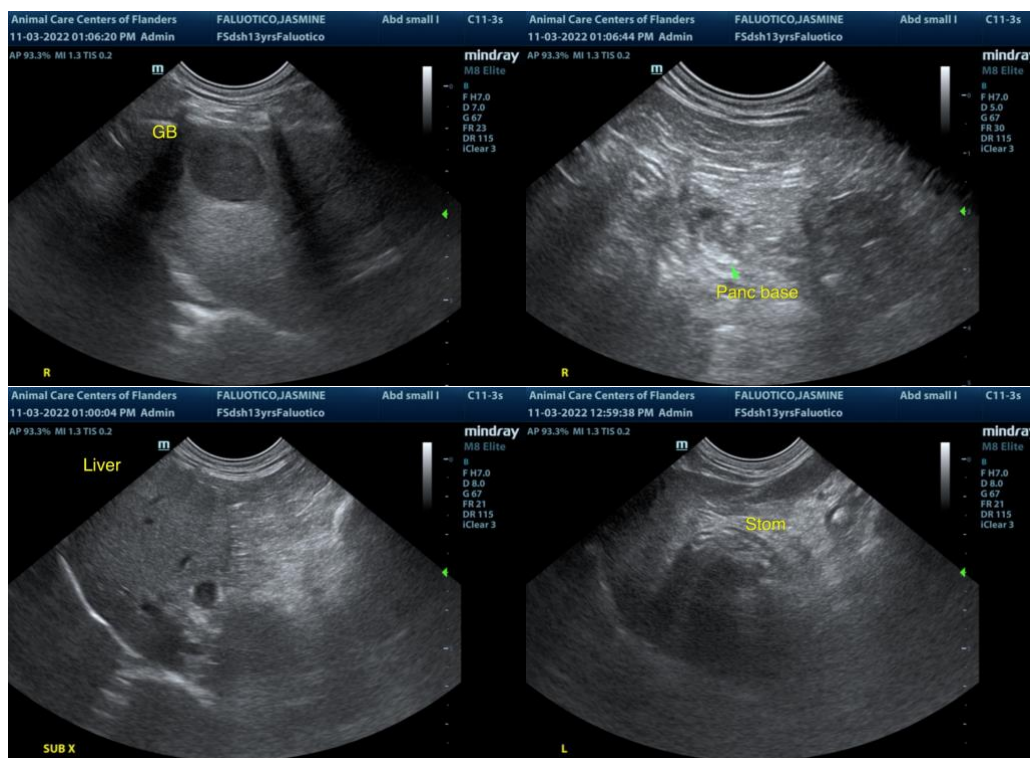
Dr. Casulli

INVOICE

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DATE

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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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
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