



PATIENT

She-She Mussari

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

17 years

WEIGHT

6.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Abbey Jones

HOSPITAL NAME

Schutzville AH

REFERRING VET

Dr. Abbey Jones

INVOICE

13233

DATE

2/1/22

PRESENTING CLINICAL SIGNS

This is a repeat ultrasound for this patient. We have a history of hyperthyroidism. We have had an off/on appetite with some weight loss. We also have a mild anemia, non-regenerative
Abnormal PE/Chem/CBC/UA Results: PE- Grade II dental disease, Ou nuclear sclerosis, Grade II/VI systolic murmur, also an irregular, irregular heart rhythm. Chem 1/14/22- Glu 184mg/dl, all other values normal CBC: 2/1/22 HCT 27.4%, MCV 35.3fl, MCHC 36.1g/dl, Mono 0.71k/ul, Baso 0, all other values normal T41/12/22 2.7ug/dl

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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 was noted.

The area of the aortic trifurcation was free of pathology.

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.3 cm in length. The right kidney measured 3.5 cm in length.

Adrenal Glands

The left and right adrenal glands were not definitively visualized.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. Mild asymmetrical medial capsule contour was present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease. The spleen measured 0.50 cm width.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Previously noted nonhomogeneous to cystic nodule to small mass was present in the caudate liver, measuring 2.7 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach exhibited intact yet subjective prominent wall layering. The ventral gastric body wall width measured 0.29 cm. The pylorus wall width measured 0.29 cm. No overt evidence of mechanical pyloric outflow obstruction was noted.

The small intestine presented intact wall layering and 1:3 muscularis/mucosa ratio with segmental nonshadowing chyme. No evidence of loss of small intestinal wall layering or intestinal masses was noted. No evidence of mechanical obstruction was present. The jejunum wall width measured 0.20 cm.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. No overt pancreatic neoplastic criteria was noted.

Free Abdomen

No evidence of progressive mesenteric lymphadenopathy was present. No effusion was noted.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Static moderate chronic renal changes
- Static cystic caudate liver nodule to small mass - likely consistent with cystic biliary adenoma
- Hypomotile stomach with mild gastritis pattern, sonographically unremarkable small bowel
- Heterogeneous pancreas with parenchymal remodeling - age-related pancreatic changes with potential for low-grade to chronic pancreatitis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of progressive mesenteric lymphadenopathy was present.

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

The stomach exhibited subjective mild inflammatory mural changes with potential concurrent or secondary hypomotility. No overt evidence of gastric mural neoplastic criteria, which is considered unlikely. However, sonographic monitoring of the stomach for evidence of progressive mural thickening or wall layering changes would be ideal.

Further assessment of the pancreas for the weight loss if not recently done, may include a GI panel to include PLI/TLI/Cobalamin/Folate. Three view chest radiographs are suggested if not recently done to rule out occult thoracic pathology which may result in weight loss in geriatric cats.



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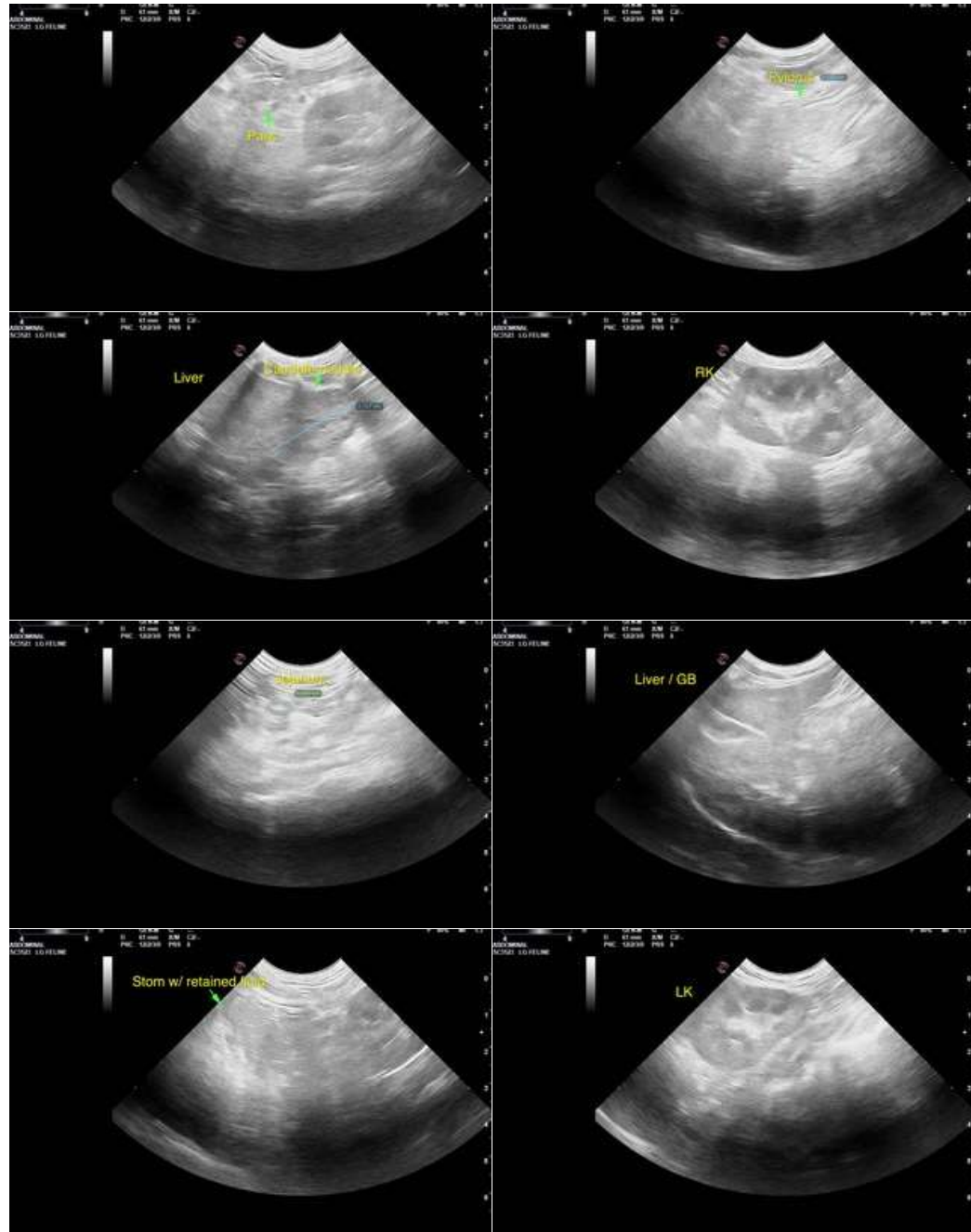
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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info@SonoPath.com

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