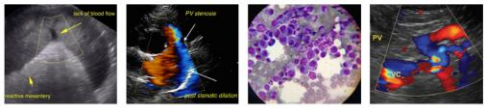

PATIENT

Jane Leecock

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

8yr

WEIGHT

13.5lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

VCA Palmer

REFERRING VET

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02/20/2023

PRESENTING CLINICAL SIGNS

Chronic hematuria, cystotomy 11/2022, ammonium urate stone. Early hyperthyroid. Cardiomegaly on radiographs, but no murmur. Bile acid test high. ? Portosystemic shunt. *Having bicavity ultrasounds

Abnormal PE/Chem/CBC/UA Results: BUN 12; free T4 51.5; bile acid test: pre 3.7; post 81.5. Free T4 history: Oct, 2022 74.1, Jan 2023 51.5

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with moderate mobile to swirling particulate 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 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 4.4 cm in length. The right kidney measured 4.4 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.36 cm width.

Spleen

The spleen exhibited borderline enlargement with mild medial folding. Finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma was present. 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 in width at the level of the hilus.

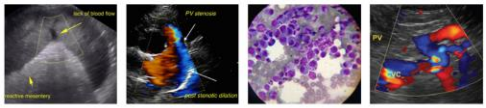
Liver/Gallbladder

The liver was subjectively normal to possibly borderline enlarged in size with homogenous uniform parenchyma and normal parenchyma echogenicity. The hepatic and portal vasculature were normal in appearance without signs of congestion. The visualized portal vein appeared to be overall sonographically normal with subjective normal cranial branching measuring 0.34 cm. The caudal vena cava was normal and comparable in size to the aorta with ~ 1:1 caudal vena cava/aorta ratio.

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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.



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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 0.28 cm width. The ileocolic wall measured 0.32 cm width.

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

Pancreas

The pancreas was normal in size and contour with subtle non-homogenous hypoechoic parenchyma and evidence of pancreatic duct dilation was present. The pancreatic duct dilation measured 0.30 cm.

Free Abdomen

No omental masses or peritoneal effusion was present.

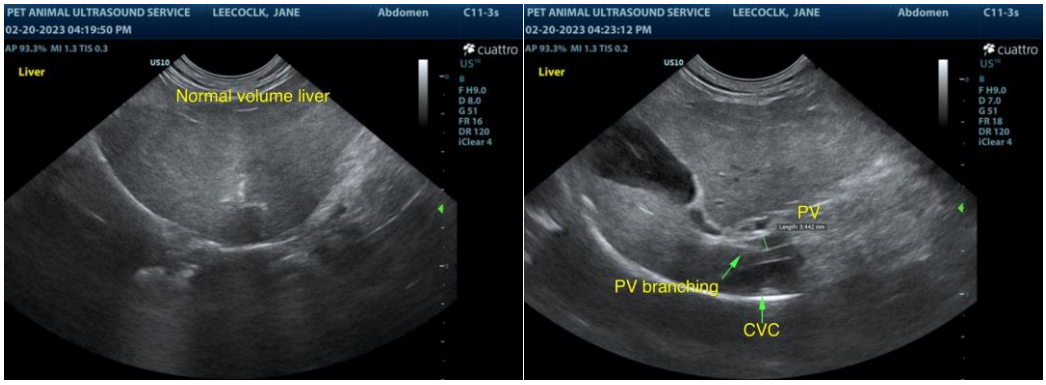
Focal, mildly prominent to enlarged colic lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a lymph node measured 0.94 cm x 0.40 cm. This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.

ULTRASONOGRAPHIC FINDINGS

- Normal bilateral renal size with early age related changes and cortical infarcts
- Normal volume liver with potential borderline hepatomegaly
- Non-specific borderline splenomegaly
- Moderate non-dependent particulate urinary bladder sediment-no evidence of recurrent/persistent macrocalculi
- Subtle hypoechoic pancreas with mild pancreatic duct dilation-potential for low-grade pancreatitis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence for macroscopic extra/intrahepatic shunting. Core surgical hepatic biopsy may be required for necessary definition of possible primary parenchymal disease vs non-obvious microscopic hepatic shunting. Recheck urine C/S on a sterile urine sample warranted. Advanced imaging such as gold standard CT with contrast may be indicated if persistent/progressive bile acid elevation or clinical signs consistent with hepatic dysfunction are noted.



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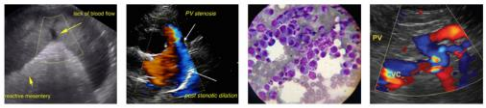

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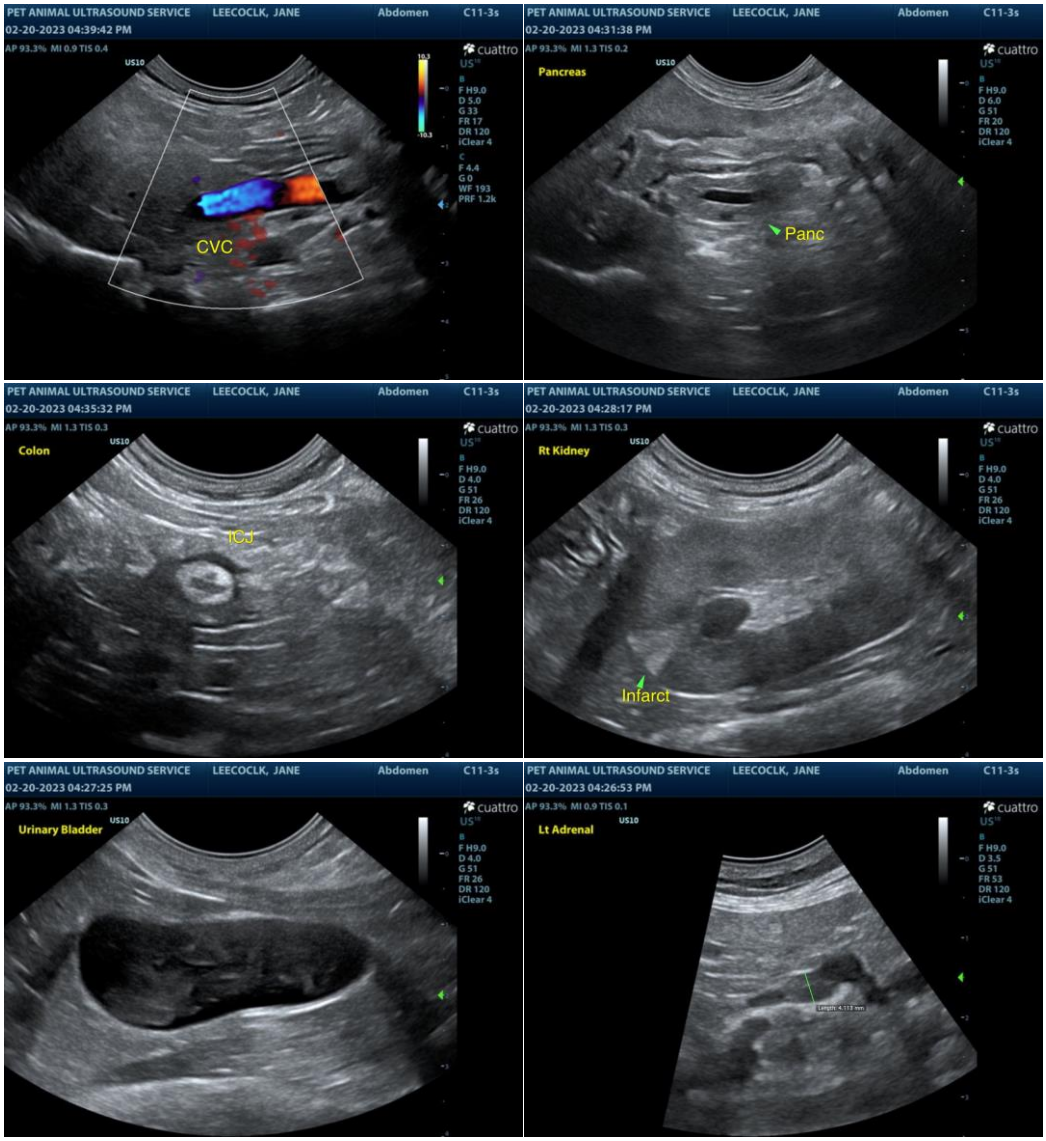

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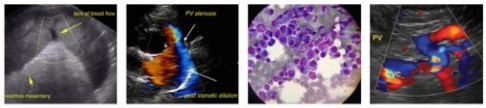

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

info@SonoPath.com