



**PATIENT**

Kisa Kharchenko

**SPECIES**

Feline

**BREED**

DMH

**SEX**

MN

**AGE**

2yr

**WEIGHT**

4.63kg

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Barthelemy

**HOSPITAL NAME**

9th Ave Animal Clinic

**REFERRING VET**

Dr. Waldman

**INVOICE**

13268ag

**DATE**

03/23/2023

**PRESENTING CLINICAL SIGNS**

Pre- dental labs show ALT elevation. No symptoms currently. Was on cerenia about 6 months ago for chronic vomiting which has resolved. Had femur fracture with FHO surgery in March 2022.

Abnormal PE/Chem/CBC/UA Results: ALT elevation 600

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 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 3.8 cm in length. The right kidney measured 3.9 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 0.29 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm width.

**Spleen**

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 0.84 cm in width at the level of the hilus.

**Liver/Gallbladder**

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 thin walls and primarily anechoic luminal content. The proximal to mid common bile duct was mildly dilated and tortuous without overt post hepatic obstruction. The common bile duct measured 0.22 cm diameter. The common bile duct contained anechoic content without evidence of calculi or mucus.

**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. The duodenum wall measured 0.29 cm width. The jejunum wall measured 0.23 cm width. The ileocolic wall measured 0.32 cm width.



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

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**Pancreas**

**SPECIES**

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.

Feline

**Free Abdomen**

**BREED**

No omental masses or peritoneal effusion was present.

DMH

Focal to intermittent mildly prominent to enlarged mesenteric 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). This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.

**SEX**

MN

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

- Benign hepatopathy.
- Non-distended gallbladder with mild non-obstructive proximal to mid common bile duct dilation.
- Sonographically unremarkable GI tract/pancreas.
- Focal to intermittent minor benign/reactive mesenteric lymph nodes-incidental.

2yr

**WEIGHT**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

4.63kg

Although non-specific, suspect cholangitis/cholangiohepatitis hepatobiliary pattern given ALT elevation and mild non-obstructive common bile duct dilation. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology is warranted for further assessment to identify inflammatory cell type if present. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial. No anesthetic contraindications assuming normal hepatic function i.e., normal BUN, GLU, ALB and CHOL.

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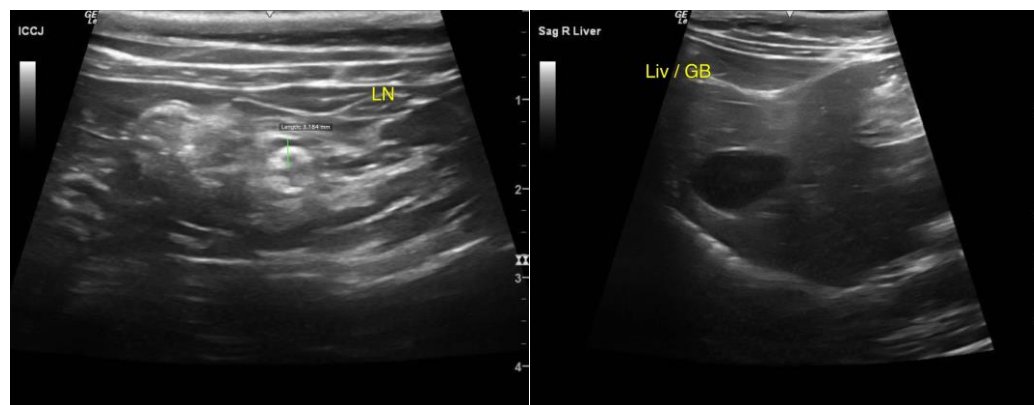
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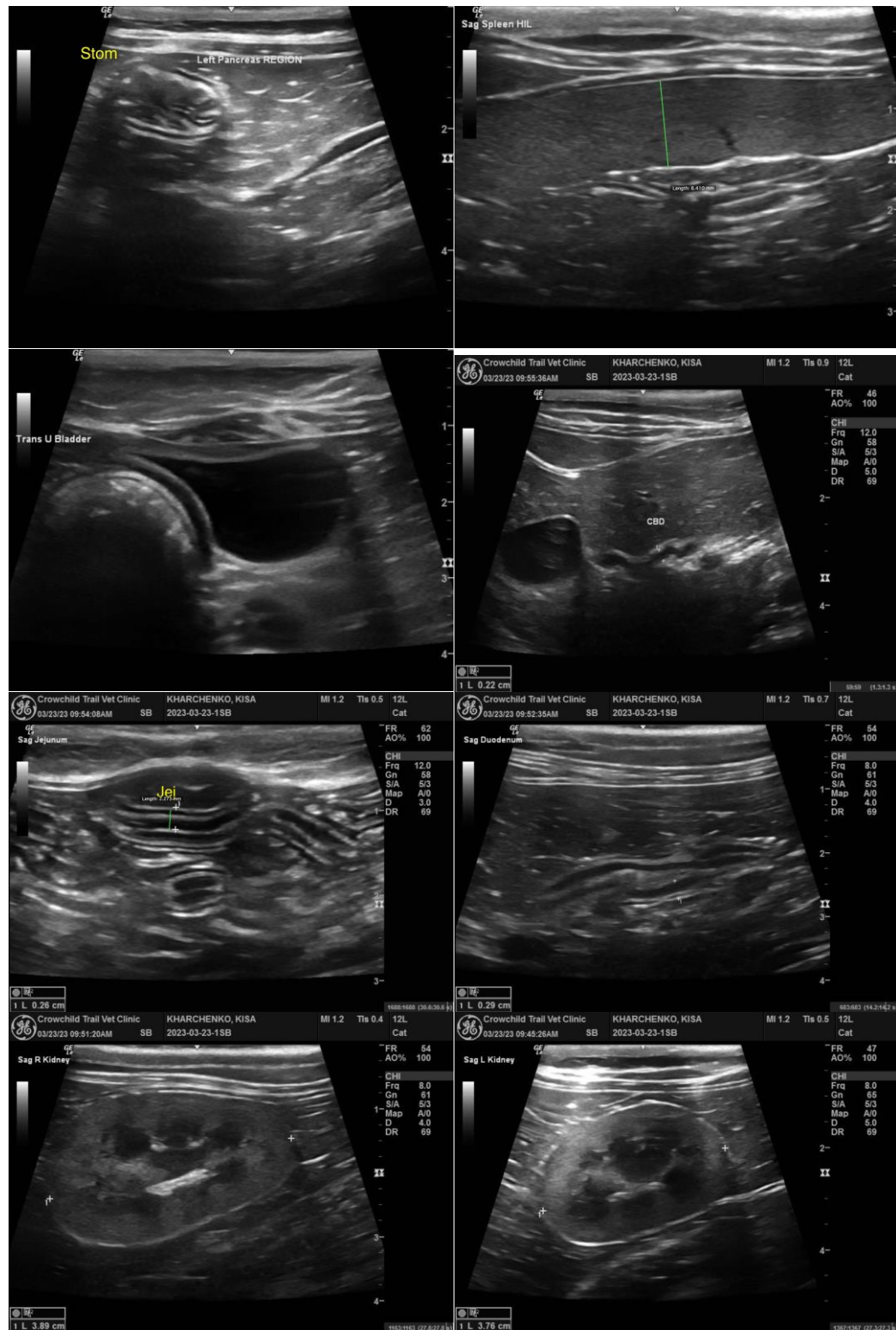
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



**PATIENT**

Kisa Kharchenko

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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