



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Phoebe Chipman  
**PRESENTING CLINICAL SIGNS** History: Presented for 3 to 4 day duration of lethargy and reduced appetite. Recent history of mild elevations in ALT, AST, ALKP, GGT. Tbili normal at that time (6 weeks ago).

**SPECIES** Abnormal PE/Chem/CBC/UA Results: On exam patient is icteric. Full labs are pending but liver chemistries in-house are more elevated now than previously including Tbili.  
**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 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.

**SEX**

**Spayed female** Normal size and margination was 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.0 cm in length. The right kidney measured 4.2 cm in length.

**AGE**

16 years

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

7.8 pounds

**Adrenal Glands**

No overt pathology notes in the area of the left adrenal gland. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.38 cm width.

**INTERPRETED BY**

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

**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 1.0 cm in width at the level of the hilus.

**IMAGING PERFORMED BY**  
Trae Cutchin

**Liver**

The liver exhibited generalized enlargement and subjectively maintained curvilinear yet swollen capsule contour. Subjective mildly reduced hepatic parenchyma echogenicity compared to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion.

**HOSPITAL NAME**

Friendship Springs  
Veterinary Care

**REFERRING VET**

Dr. Trae Cutchin

The gallbladder was distended in size with mildly thickened to echogenic walls and primarily anechoic luminal content. with very minor luminal sludge. Generalized mild common bile duct dilation was observed measuring 0.15 -0.2 cm in width containing anechoic content and without overt evidence of common bile duct calculi. The degree of CBD dilation was not consistent with current post hepatic obstruction. Subtle reactive mesentery noted around the liver and CBD.

**INVOICE**

10413ag

**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.

**DATE**

04/18/2022



**PATIENT**

Phoebe Chipman

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.

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

**SPECIES**

Feline

**Pancreas**

Although indistinctly visualized the pancreas exhibited potential for subtle generalized enlargement and maintained symmetrical capsule contour and heterogeneous parenchyma. Minor subjective pancreatic duct dilation was observed.

**BREED**

DSH

**Free Abdomen**

Subtle reactive mesentery was noted around the liver and common bile duct. No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

Spayed female

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

16 years

- Subjective acute on chronic cholangitis/cholangiohepatitis pattern, potential for occult hepatic or hepatobiliary neoplasia is possible.
- Possible low grade to chronic pancreatitis.
- Mild chronic renal changes.
- Overtly normal GI tract.

**WEIGHT**

7.8 pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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

Assuming normal clotting status and using a 25g needle, a hepatic parenchymal FNA for screening cytology to assess for and identify inflammatory cell type as well as assess for evidence of neoplasia is recommended. The potential for emerging post hepatic obstruction cannot be excluded yet no obvious evidence was visualized in the study. Empirically, aggressive therapy for acute on chronic cholangiohepatitis with continued serial monitoring of hepatic enzyme levels or for evidence of increasing cholestasis would be reasonable. Recheck sonogram primarily to reassess the gallbladder and CBD recommended if progressive cholestasis. A SpecFPL could be considered for further assessment of the pancreatic presentation.

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**PATIENT**

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**AGE**

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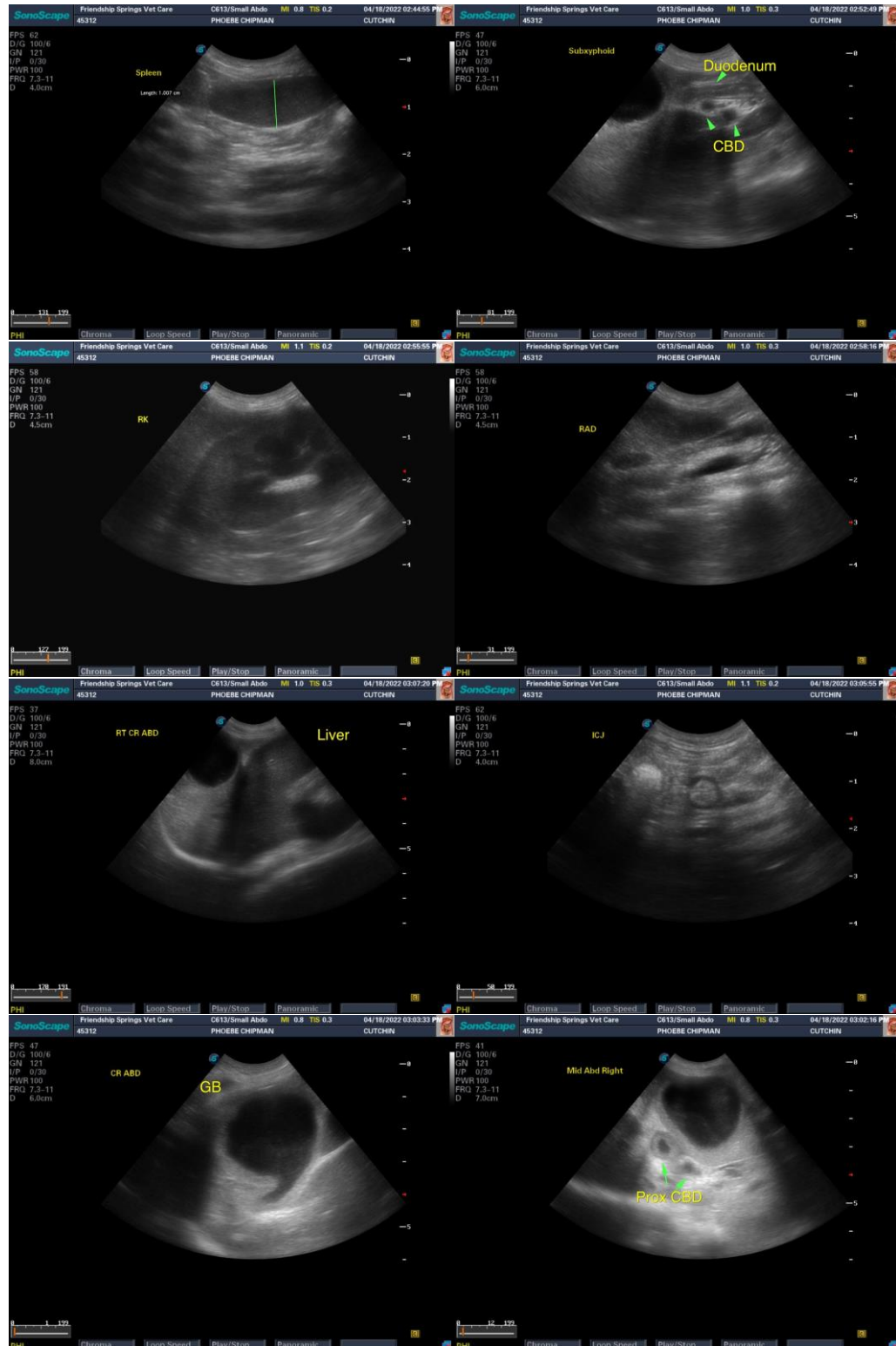
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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