



**PATIENT PRESENTING CLINICAL SIGNS**

**Bella Lula** History: P presented for wellness- o reported inappropriate elimination. Constipation suspected on exam and confirmed with radiographs. BW results below.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: AST (SGOT) 106 IU/L (10-100) ALT (SGPT) 433 IU/L (10-100)  
Alk Phosphatase 190 IU/L (6-102) Total Bilirubin 1.8 mg/dL (0.1-0.4) Cholesterol 415mg/dL (75-220)

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 mild nondependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**SEX**

**FS** Normal size and margination were present in the kidneys. Increased cortex echogenicity with mildly enhanced corticomedullary border demarcation was present. The left kidney measured 3.6 cm in length. The right kidney measured 3.1 cm in length.

**AGE**

8 years 11 months The area of the aortic trifurcation was free of pathology.

*Adrenal Glands*

**WEIGHT**

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

*Spleen*

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) 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 measure 0.7 cm in width at the level of the hilus.

**IMAGING PERFORMED BY**

Dr. Kevin Moon

*Liver*

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 with mild non mineralized luminal debris. The cystic and common bile ducts were normal.

**HOSPITAL NAME**

Shiloh Veterinary Hospital

*Gastrointestinal*

**REFERRING VET**

Dr. Nicole Kaczor

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild nonshadowing ingesta/chyme 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.

**INVOICE**

10486ag

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

*Pancreas*

**DATE**

04/29/2022



## PATIENT

Bella Lula

The left pancreatic limb was normal in size and contour with subtle uniform hypoechoic parenchyma compared 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.

## SPECIES

*Free Abdomen*

Feline

No overt lymphadenopathy or peritoneal effusion was present.

## BREED

DSH

## ULTRASONOGRAPHIC FINDINGS

## SEX

FS

- Hepatopathy-subjectively benign
- Mild gallbladder debris
- Mild urinary bladder sediment
- Mild nonspecific chronic renal changes exhibiting mild uniform increased cortex echogenicity
- Possible low grade pancreatitis
- Unremarkable GI tract with minor gastric ingesta

## AGE

8 years 11 months

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## WEIGHT

5.6 pounds

Although nonspecific the appearance of the liver is suggestive of cholangiohepatitis given the elevated ALT/AST combination with potential for mild vacuolar changes and nonobstructive cholestasis given the elevated ALP/TBIL. No overt evidence of hepatic or hepatobiliary neoplasia. Further assessment may include a hepatic FNA with 25g needle assuming normal clotting status for screening cytology to assess for and identify suspected inflammatory cells. A Spec fPL or GI panel to include PLI/TLI/Cobalamin/Folate is recommended for further clarification of the pancreatic presentation or if concurrent GI signs/weight loss.

## INTERPRETED BY

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

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.

## IMAGING

## PERFORMED BY

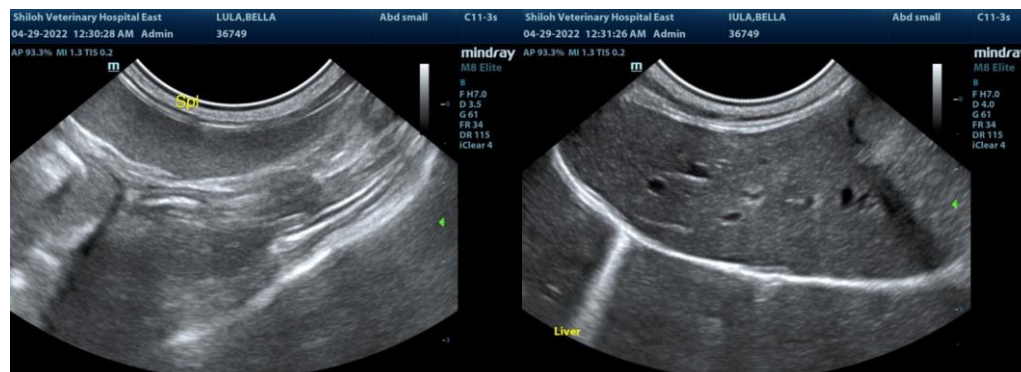
Dr. Kevin Moon

## HOSPITAL NAME

Shiloh Veterinary  
Hospital

## REFERRING VET

Dr. Nicole Kaczor



## INVOICE

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## DATE

04/29/2022



**PATIENT**

Bella Lula

**SPECIES**

Feline

**BREED**

DSH

**SEX**

FS

**AGE**

8 years 11 months

**WEIGHT**

5.6 pounds

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DVM, DABVP  
(Canine and Feline)

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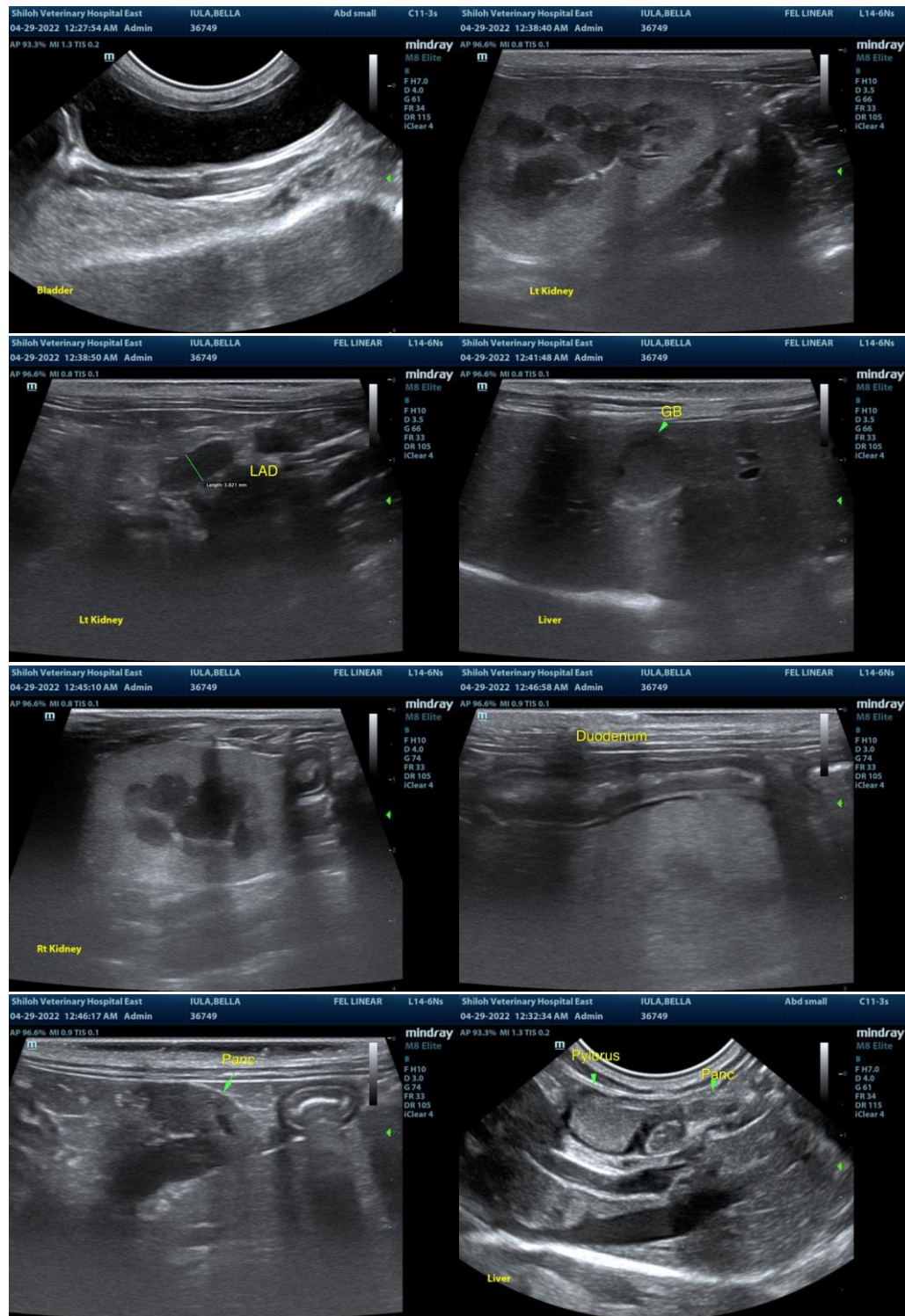
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**PATIENT**

Bella Lula

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.

**SPECIES**

Feline

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)

**BREED**

DSH

info@SonoPath.com

**SEX**

FS

**AGE**

8 years 11 months

**WEIGHT**

5.6 pounds

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DVM, DABVP  
(Canine and Feline)

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